

Develop an

HIV & AIDS

plan for your school



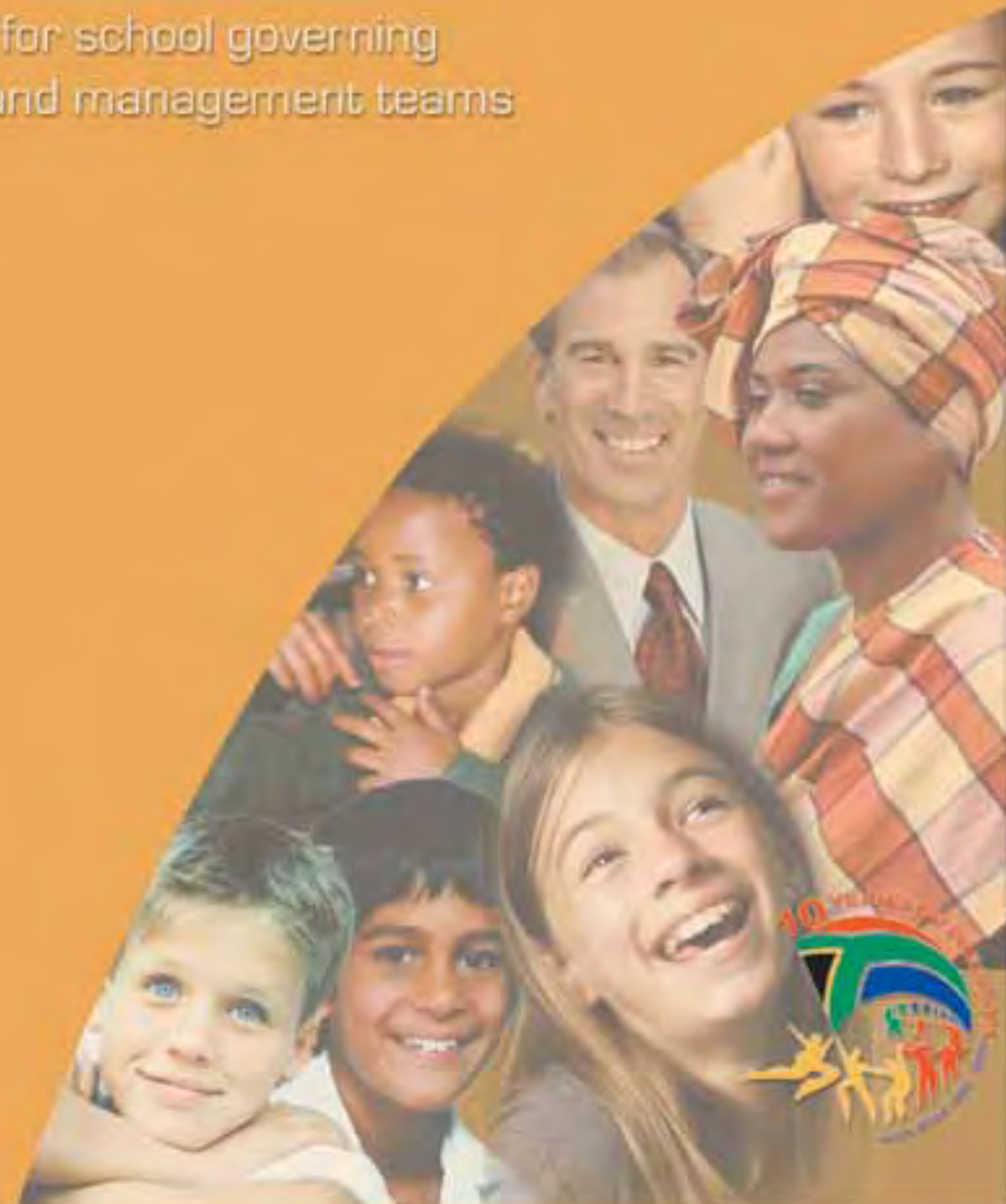
A guide for school governing
bodies and management teams

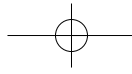


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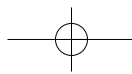


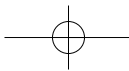
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**A guide for school governing bodies and
management teams**



Issued by the Department of Education





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A guide for school governing bodies and management teams

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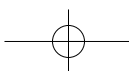
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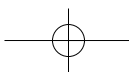
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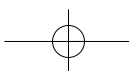
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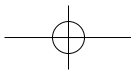
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Foreword

The Ministry of Education convened a conference on HIV/AIDS and the Education Sector in 2002. Many of you as parents and community members attended the conference and raised issues that worried you.

At the conference we agreed that we must act quickly to protect the lives and wellbeing of our children. We agreed that education must lie at the heart of our actions against HIV and AIDS because it is mainly through education that we can hope to have a South Africa without HIV and AIDS.

We recognised that no person could respond to HIV and AIDS alone. We agreed that the Department of Education must work together with parents, school governing bodies, learners, and teachers, among others, to protect our children from HIV and help those already infected to live their best lives. We also agreed to show our support to all those who are affected by the disease or do not have parents because of the disease.

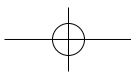
In order to act on the agreements we made at the conference, the Department of Education has put together guidebooks to help us – as school governing bodies and school management teams – to work together to respond to HIV and AIDS.

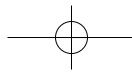
This guide, ***Develop an HIV and AIDS plan for your school***, is a practical book.

It has been written to help schools and their communities to go step by step to look at the problems that HIV and AIDS bring and to take action in their own community. The guide encourages everyone – school governing bodies, school management teams, educators and parents to work together to plan and act to strengthen schools against HIV and AIDS. The guidebooks must be used as part of our programme of developing school governing bodies and school management teams to manage provision of education for all our children.

HIV and AIDS can be stopped. Our children can manage to stay free of HIV. I wish you strength as you work together with us to achieve this ideal.

Professor Kader Asmal, MP, Minister of Education





Introduction

The HIV epidemic is making life difficult for many South Africans. Many people know someone who is infected with HIV or affected in some way by the virus. We are all living with HIV and AIDS. Some of us are HIV positive. Some have lost a friend or relative because of AIDS.

Many schools are already facing problems caused by the HIV epidemic. Many schools do not have enough resources and the HIV epidemic makes things worse. The good news is that Education is already working in positive ways to lessen the impact of HIV and AIDS. These efforts need to be developed and strengthened in order to protect education against the impact of the epidemic.

There is not only one solution. The education sector must work with other organisations and government departments to make a difference. Everyone in the education sector needs to work in partnerships with others. We need to build a society where:

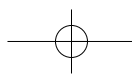
- Children grow up feeling safe, their lives are valued and their bodies respected.
- Schools continue to be places where educators teach and learners learn.
- People feel free to take HIV tests to know if they are HIV positive or negative and they take responsibility for the result.
- Those people who are infected with HIV or who are living with AIDS no longer hide away, but receive the love and care they need.

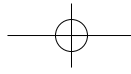
To build a good society like this, we need to understand the reality in which we work. We need to think carefully about our particular area of work or where we can influence people. We need to use whatever resources we have to make a positive contribution to protect our schools, our educators and our learners.

This book is one way of offering support to schools as they face problems and find solutions.

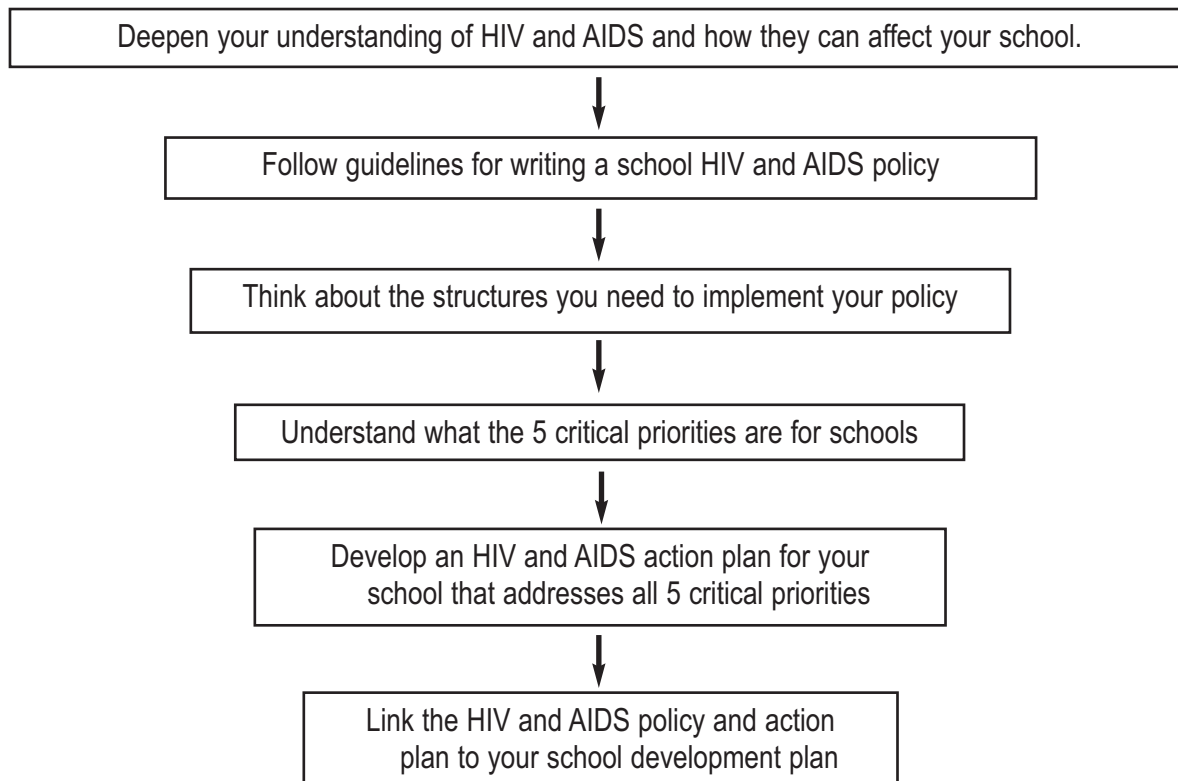
What are the aims of this book?

- This book has been written as a guide for schools to help them to think about and manage the problems that HIV and AIDS bring.
- The book can help schools and their communities to use the national policy on HIV and AIDS and education to take local action.
- The book will encourage everyone – school governing bodies, managers, educators and parents to think, plan and act to protect and strengthen schools against the impact of the epidemic.





This booklet has been designed to lead readers through a number of important steps in the planning process:



The HIV and AIDS planning process that has been set out in this book should be a central part of school development planning. The two processes should be integrated and not separate. If a school already has a school development plan, then the questions that can be asked are:

- Are HIV and AIDS activities an important part of the school development plan?
- How can the HIV and AIDS action plan feed into the existing school development plan?

If a school does not yet have a school development plan, then the planning process outlined in this book can be used or adapted for any important school planning processes.

Who should read this guide?

- School governing body members.
- School managers and school management teams.
- District officials, for example: district directors and planners; community development officers; and school safety officials; circuit managers; education development officers; and integrated development support officials.
- Educators.
- Parents.
- Representative Learner Council members.
- Community leaders.

circuit managers:

- izimenenja zesekethe
- kringbestuurders
- Abaphathi be-circuit
- batsamai ba sedika

education development officers

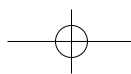
- izikhulu zokuthuthukisa imfundo
- onderwysontwikkelingsbeamptes
- Amagosa ophuhliso kwezemfundo
- batlhankela ba tlabololo ya thuto

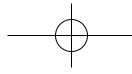
integrated development support officials

- nezikhulu zokuxhasa intuthuko ehlanganiwe
- geintegreerde ontwikkelingsondersteuningbeamptes
- amagosa axhasa uphuhliso oludityanisiweyo
- tihabololo ee kopanentsweng ya batlhankela ba thuso

Representative Learner Council members

- amalungu oMkhandlu oMmele abafundi
- Verteenwoordigende leerlingraadslede
- Amalungu aMele aBafundi kwiKhansile
- Kgotla-kemedi ya ditokololo tsa baithuti





How can you use this guide effectively?

The chapters in this book take you through a learning process. This will allow you to follow at your own pace.

Action plans



These pages will help you to draw up workable plans for action in your school.

Activity

Activity

Complete these activities to help you understand your specific situation. These are important practical tools.

- Work through each section and think carefully about it.
- Stop to think a little when you feel worried or concerned.
- Do the activities alone or with others.
- Answer the questions yourself.
- Share your thoughts and what you have learnt with the people you work with.
- Use this tool to draw up an action plan.

Outline



This icon describes what the chapter is about.

Discuss



Discuss the questions in this section with your colleagues.

Case study

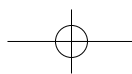


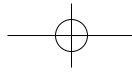
Read these stories to help you imagine the different issues in real life. Try and answer the questions that follow with colleagues.

This guide has been written for you. You all work for education in different ways. Now it is your task to turn the national policy on HIV and AIDS and Education into the way you think, plan and act. This guide can help you to do the following:

- Become aware of the ways HIV and AIDS is part of your daily life.
- Understand how the epidemic can undermine your way of living and your future plans.
- Think about how to plan carefully so that you can deal with the problems of HIV and AIDS.

Throughout this guide there are many opportunities for you to think carefully about your situation. Take the time to honestly understand the situation in your area. Use your knowledge and skills to plan an effective way to deal with the situation.





CHAPTER I

HIV and AIDS in Education

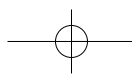
In this chapter you will:

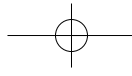
1. Read some background information about HIV and AIDS.
2. Find out more about how HIV and AIDS can affect your school.
3. Understand what the five critical priorities are for schools.
4. Think about what to include in an HIV and AIDS policy.
5. Find out what you need to implement the policy.
6. Look at an example of an action plan to implement the policy.



critical priorities

- Okubaluleke kakhulu okufanele kwenziwe kuqala
- kritieke prioriteite
- izinto eziphambili
- Dintsha tse di bothkwa





CHAPTER I

HIV and AIDS in Education

1. Background information about HIV and AIDS

The HIV virus that causes AIDS has been around since the late 1970s. Despite many efforts to contain the virus, HIV has spread quickly across the world. It has become an epidemic and twenty years later there is still no cure. Throughout this time people have lived with HIV. Parents with HIV have sent their children to school. Educators with HIV have been teaching, and learners with HIV have been trying to learn. Now it is time to step back and ask ourselves the following questions:

- How do HIV and AIDS affect the education sector?
- How do HIV and AIDS affect our schools?

Here is some background information about HIV. You will see how it leads to AIDS and the effects of HIV and AIDS. When you have read this information, think about how HIV and AIDS affect you and your work.

Facts about HIV

HIV is a very small germ or organism called a virus, which infects people. It cannot be seen with the naked eye but you can see it under a microscope. HIV only survives and multiplies in body fluids such as sperm, vaginal fluids, breast milk and saliva. People can only be infected through contact with infected body fluids.

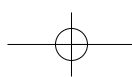
The body's natural ability to fight illness is called the immune system. This is the body's defence against infection. HIV attacks the immune system. It makes it harder for the body to resist all kinds of illness such as flu, diarrhoea, pneumonia, TB and certain cancers. This is the other reason why HIV is called the Human Immunodeficiency Virus. HIV eventually makes the body so weak that it cannot fight sickness and the person dies.

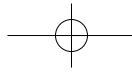
immune system

- amasotsha alwa nezifo emzimbeni
- immunstelsel
- amajoni omzimba
- tsamaiso ya tsweliso-botshelo

diarrhoea, pneumonia, TB

- Isihudo, iPhneumonia
- diarree, longontsteking, tuberkulose
- isifo sorhudo, isifo sokukrala kwemiphunga, isifo sephepha
- Letshololo, Numonia, TB





Most people with HIV do not show symptoms for a long time. These people can be fairly healthy and able to work for between five to eight years after infection. Others can start showing symptoms quite soon after they are infected. People who are infected start to get illnesses. This means the disease has progressed to AIDS. AIDS is the final stage of infection and this is what causes a person to die. People with AIDS suffer from different illnesses at the same time. We call this a syndrome. AIDS stands for Acquired Immune Deficiency Syndrome. Different illnesses make up AIDS. AIDS is not one disease but different illnesses. The kinds of illnesses that people get can differ.

syndrome

- iSyndrome
- sindroom
- iimpawu ezalatha into engemanga kakuhle emzimbeni
- Twatsi

Facts about the epidemic

In South Africa the HIV epidemic has already reached the stage of generalised infection. This means that when over one per cent of the population is infected, it is called a generalised epidemic. Recent research by the Nelson Mandela Foundation/HSRCⁱ estimates that about 11.4 per cent of the South African population or between 4.5 and 4.8 million people are infected with HIV. Approximately 350 000 people are already sick and dying of AIDS. UNAIDSⁱⁱ research estimates that about ten per cent of children or 662 000 lost a mother or father or both by 2001. This number may increase to 1.3 million by 2005.

generalised infection

- Ukungenwa yizifo okujwayelekile
- algemene infeksie
- Ukosuleleka zizifo okwenzeka ngokuqakayo
- Tshelo-kakaretso

Some of the reasons for the rapid spread of HIV in South Africa are:

- Breakdown of the family unit due to the migrant labour system of the past.
- Girls at risk when they are very young. There may be pressure on them to bring in an income (trading or agricultural work).
- Traditional attitudes towards male-female sexual relationships. Women have a low position in society and limited power to take control of their sexual lives.
- Forcing women to have sex, or the exchange of sex for money or gifts.
- Poverty and unemployment that particularly affects women with children.
- Early sexual activity, many sexual partners or casual sexual relationships.
- Silence on sexual matters.
- A high presence of sexually transmitted diseases.

migrant labour system

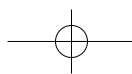
- Abasebenza abavela kwezinye izindawo
- trekarbeidstelsel
- Indlela emisiweyo yokusenbenza ze oguduke xa uselivini
- Khudugo ka tiro

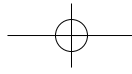
The spread of HIV and the increase of AIDS damages our society and our education system. Many schools already experience great problems. Learners have poor self-esteem. School communities can no longer depend on healthy learners, stable families, sufficient educators or a strong economy.

Discuss



- How do HIV and AIDS affect your work?





2. Find out more about how the HIV epidemic can affect your school

You cannot tell if people have HIV by looking at them. Some people may think they can. People may guess and they may be right or wrong. The only sure way to know your HIV status is to have an HIV test. The results of this test are confidential. Unless parents, educators or learners tell someone of their HIV status, it is impossible to know exactly who is carrying the virus. It is also impossible to know how long it will take before people with HIV develop AIDS.

confidential

- -mfihlo
- vertroulik
- into eyimfihlo
- Sephiri

Many educators may not see the suffering of learners who become infected between the ages of 15-19 as this happens after they leave the education system. It is important for educators to identify those children in school who are affected by the epidemic. These children may be orphaned. Their families may not be able to pay school fees. They may not have uniforms. They are hungry and may not be accepted by the school and the community.

Educators are not immune to the effects of the epidemic. HIV and AIDS affect education in many ways. Educators die or they are unable to work hard because of stress and chronic illness. Education finds it difficult to provide enough educators, managers, and other staff to replace those who are ill or who have died.

chronic illness

- Isifo esingelapheki
- chroniese siekte
- Ukugula okungapheliyo
- Bolwetsi jo bo nnang sebaka

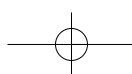
The HIV epidemic is a slow event. It slowly destroys families and school systems, and changes the way schools work. For example, at first only a few learners in a school are without parents or struggle to pay their fees. Only a few educators are often ill. Over time, however, more and more people become ill. Their problems add up to a considerable drain on the education system.

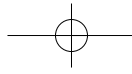
Discuss



Many people do not want to look closely at evidence on the spread of HIV. They do not wish to talk about the epidemic.

- How do you explain this attitude?
- People often mention HIV and AIDS in an indirect way. What are the words people in your community use to describe the disease?





Look at ways to find out how HIV and AIDS are affecting your school

Activity – Do your own HIV and AIDS risk assessment of your school and community

It is important for you to understand clearly how the epidemic can affect education. Use the following checklist to look at your own situation and decide how great the risk is.

Try not to base your answers on opinion only. Take time to think and talk honestly to others before you decide on your answer.

Check the risk to the school

- | | | | |
|---|-----|----|----------|
| ■ Is there a drop in the number of children enrolling for school? How many learners have dropped out? | Yes | No | Not Sure |
| ■ Is the pressure to earn money keeping learners out of school? | Yes | No | Not Sure |
| ■ Are there more girls dropping out of school than boys? | Yes | No | Not Sure |
| ■ Do older learners in a class increase the threat of HIV infection? | Yes | No | Not Sure |
| ■ Are educators regularly out of school attending funerals? | Yes | No | Not Sure |
| ■ Is educator absenteeism increasing? | Yes | No | Not Sure |
| ■ Is the quality of education in the classrooms suffering? | Yes | No | Not Sure |
| ■ Are educators being trained to deal with HIV and AIDS-related issues in the classroom? | Yes | No | Not Sure |
| ■ Are educators willing to take responsibility for identifying learners at risk? | Yes | No | Not Sure |
| ■ Are there unsafe places in your school? | Yes | No | Not Sure |

Check the risk to the community

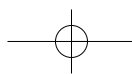
- | | | | |
|---|-----|----|----------|
| ■ Is sexual violence and abuse a problem in the community? | Yes | No | Not Sure |
| ■ Do community members talk openly about HIV and AIDS? | Yes | No | Not Sure |
| ■ Are HIV and AIDS awareness programs working well? | Yes | No | Not Sure |
| ■ Are family incomes getting smaller because of unemployment, the high cost of medical care and funerals? | Yes | No | Not Sure |
| ■ Are children who lose parents looked after by their families? Do they have to fend for themselves? Do <u>foster families</u> care for these children as they would care for their own children? | Yes | No | Not Sure |
| ■ Is the local community able to care for children at risk? What <u>support grants</u> or methods are available in your community for children at risk and their foster families? ⁱⁱⁱ | Yes | No | Not Sure |

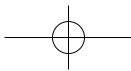
foster families

- Imindeni enakekela izintandane
- pleegsorggesinne
- lintsapho ezihlala nabantwana abangengobazo
- Malapa a thokomelo

support grants

- Iziboneleo zokondliwa
- steuntoelaes
- Imali yokuxhasa abantwana
- Dituelo tsa thuso



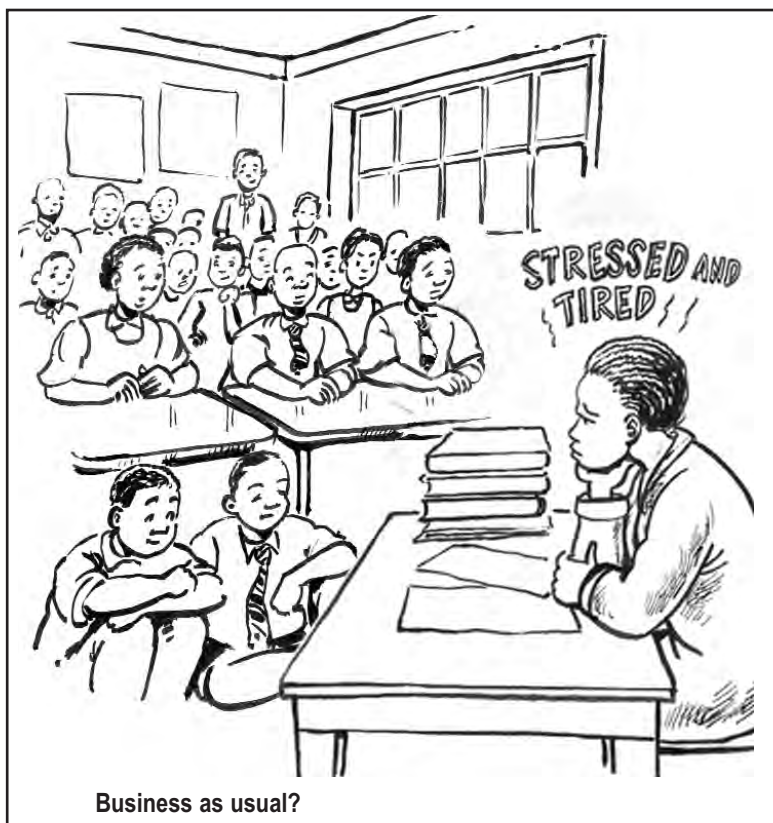


Risk assessments are important. They can help you to understand how HIV and AIDS affects your school and the wider community. They will help you to think about the actions your school has to take.

Discuss



- What must your school do to prevent the spread of HIV among young people?
- How can your school ensure that all young people, especially orphans and other vulnerable children, do their best?
- How is your school preventing the spread of HIV among your staff?



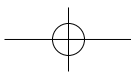
Discuss

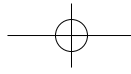


Look carefully at the cartoon. Now use the following questions to think about how the HIV epidemic affects your school.

- Does the cartoon show similar problems to the ones in your school?
- How can your school go on properly with its daily work?
- How can you improve the quality of education while you also deal with the needs of educators and learners infected or affected by HIV?

Schools already face many difficulties. HIV and AIDS add to them. The epidemic really shows up these existing problems. For example, in an area where schools may find it difficult to attract Mathematics and Science educators, AIDS can make this problem worse. Fewer educators are available. Ways of dealing with the epidemic must also help with existing problems.





Activity - Define your key challenges

Our school community has to deal with many difficulties. Our key challenges are:

3. Understand what the five critical priorities are for schools

The Minister of Education has declared the HIV epidemic a national emergency. The Department has issued a national policy on HIV and AIDS, as well as guidelines for dealing with the problem.

Schools can be deeply affected if HIV disrupts the lives of children in their care. The virus seems to be invisible. Many people in your community can share stories about the effects the disease can have on people they love.

Schools must take into account the five critical priorities when they work out an action plan. The five critical priorities are:

- 1. Preventing the spread of HIV.**
- 2. Providing care and support for learners affected by HIV and AIDS.**
- 3. Providing care and support for educators affected by HIV and AIDS.**
- 4. Working together to continue to protect the quality of education.**
- 5. Managing a coherent response.**

Preventing the spread of HIV

A school is like a social vaccine for children at risk. It does not seem to matter how well children do at school – what matters is that they are at school.

Children who drop out of school early are more likely to:

- Have sex at a young age.
- Drink alcohol earlier.
- Become infected with HIV.

Make sure that learners do not drop out of school. This will help to keep them safe and prevent the spread of HIV.

disrupts

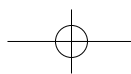
- -onakalisa
- ontwrig
- Ukugxobhagxobha
- Go tlhakatlhakanya

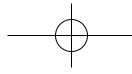
invisible

- -ngabonakali
- onsigbaar
- Into engabonakaliyo
- Ee sa bonaleng

coherent

- -hambisanayo
- samehangend
- Into ecacileyo
- Ee tsepameng





Providing care and support for educators and learners

In the “HIV Emergency Guidelines for Educators”, the Minister of Education urges schools to become caring communities by:

- Speaking openly about HIV and AIDS, attacking ignorance and prejudice and correcting wrong ideas about the disease.
- Helping infected and sick people to live with dignity so that they can contribute to their communities for as long as they are able.
- Finding ways to care for the sick and the needy, especially when the family unit has broken down.
- Reacting sympathetically to the loss and sorrow caused by illness and death in the community.

ignorance and prejudice

- Ukungazi nokwenzelela
- onkunde en vooroordeel
- Ukungabi nalwazi nokugweba kuqala
- Ikgatholosa le go gobelela

Working together to protect the quality of education

We need to look carefully at the impact of the HIV epidemic on our schools. Prevention on its own is not enough. There is widespread infection in many communities. We have to focus on stopping the spread of the virus. We also have to work with other community structures to help people living with HIV.

Managing a coherent response

- To manage a response means: checking our actions to find out what is happening. We must then find out whether the response is working and making a difference.
- A coherent response means: making sure that all the different parts of the partnership are working properly together.

The Department views schools as the central point of communities. They want schools to lead the way and create partnerships. In this way they can manage a coherent response to the suffering caused by HIV and AIDS.

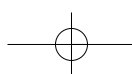


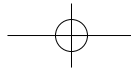
Schools cannot do everything, but they can lead the way.

Remember!



In responding to the HIV epidemic, schools or institutions should develop their own policy on HIV and AIDS, in line with the national guidelines. Such a policy must agree with the Constitution and the law. A school policy should not go against the national policy, or the national guidelines issued by the Department of Education.^{iv}





4. Develop an HIV and AIDS policy for your school

Activity - Write your own HIV and AIDS school policy

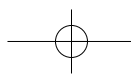
An effective HIV and AIDS policy says very clearly what the school believes. It also clearly states the school's aims. Some schools may already have an HIV and AIDS policy. Look carefully at it, then check that you have covered all of the critical priorities in your policy. You can use the following template to guide you, if you have not written your policy.

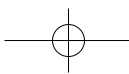
As you work through this guide, Chapters 2, 3, 4, 5 and 6 will help you. You should also look at the template below to help structure your policy. Now write down what you believe and aim to do about the five critical priorities in your HIV and AIDS school policy.

Think back to the five critical priorities. (page 8)

- Find out where to get more information about how to respond to these priorities.
- Be aware of the problems you need to consider.

HIV and AIDS Policy of _____	
Date: _____	
Written by: _____	
Signature: _____	
Priority 1: Prevention	<i>What our school believes about preventing the spread of HIV and what it aims to do.</i>
Type of structure	
Priority 2: Providing care and support for learners	<i>What our school believes about providing care and support for learners and what it aims to do.</i>
Type of structure	
Priority 3: Providing care and support for educators	<i>What our school believes about providing care and support for educators and what it aims to do.</i>
Type of structure	
Priority 4: Protecting the quality of education	<i>What our school believes about protecting the quality of education and what it aims to do.</i>
Type of structure	
Priority 5: Managing a coherent response	<i>What our school believes about managing a coherent response and what it aims to do.</i>
Type of structure	





Priority 1: Prevention of HIV infections

Where can we get more information?

For more information go to **Chapter 2**. It will help you to look at prevention in greater detail. Work through the chapter before you finish this part of your policy.

What are the issues?

In the end your HIV prevention policy should be fairly detailed and should include issues such as:

- Providing correct information.
- Promoting safe sex practices.
- Setting up peer education programmes.
- Speaking out against sex between young girls and older men.
- Providing effective life skills training.
- Making schools safe.
- Providing universal precautions.

peer education

- Imfundo yabantanganye
- portuurgroep onderrig
- Ukufundisana kwabantanganye ngokwemfundo
- thuto ya tekatekano

Priority 2: Care and support for learners

Where can we get more information?

Chapter 3 will give you more details. It will give you many new ideas that you can include in your school policy.

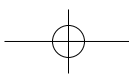
What are the issues?

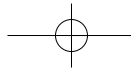
Try to be specific about the way you plan to respond to learners' needs. This makes your policy a useful and effective document. Some of the issues you would need to think about are:

- Creating a caring school.
- Creating a safe school.
- Creating a healthy school.
- Creating a caring classroom.
- Creating peer support.

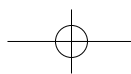
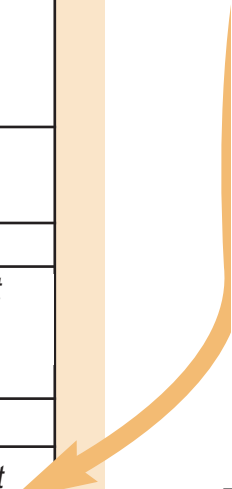
Know where to find the information you need to develop an HIV and AIDS school policy

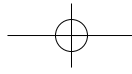
Refer to the National Policy on HIV and AIDS, for Learners and Educators in public schools (See list of contacts and references on pages 111 and 112.)





HIV and AIDS Policy of _____	
Date: _____	
Written by: _____	
Signature: _____	
Priority 1: Prevention	<i>What our school believes about preventing the spread of HIV and what it aims to do.</i>
Type of structure	
Priority 2: Providing care and support for learners	<i>What our school believes about providing care and support for learners and what it aims to do.</i>
Type of structure	
Priority 3: Providing care and support for educators	<i>What our school believes about providing care and support for educators and what it aims to do.</i>
Type of structure	
Priority 4: Protecting the quality of education	<i>What our school believes about protecting the quality of education and what it aims to do.</i>
Type of structure	
Priority 5: Managing a coherent response	<i>What our school believes about managing a coherent response and what it aims to do.</i>
Type of structure	





Priority 3: Care and support for educators

Where can we get more information?

Chapter 4 will provide you with greater detail.

What are the issues?

- Creating an open school that promotes human rights, disclosure and confidentiality.
- Creating a school that does not allow discrimination.
- Being aware of the physical, medical, emotional and social needs of the sick educator.
- Dealing with death and sorrow in the school.
- Dealing with educator stress.
- Promoting mutual support in the school.
- Developing supportive leadership.

human rights, disclosure and confidentiality

- Amalungelo esintu, ukudalula nokuba yimfihlo
- menseregte, bekendmaking en vertroulikheid
- amalungelo oluntu, ukwazisa, nokuhlonipha imfihlo
- Ditshwanelo tsa botho, go bua phathalatsa le go tshola sephiri

does not allow discrimination

- -ngavumeli ubandlululo
- laat nie diskriminasie toe nie
- Ayiluvumeli ucalucalulo
- Ga e dumelele tihaoelele

Priority 4: Protecting the quality of education

Where can we get more information?

Chapter 5 will help you to look at this priority.

What are the issues?

- Managing absenteeism, illness and trauma among learners and staff.
- Protecting the human resources (educators) that are lost.
- Providing for the training needs of educators.
- Finding the money to fund short-term help.

trauma

- iTrauma
- trauma
- Uksenzakala
- Manokonoko

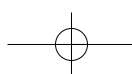
Priority 5: Managing a coherent response

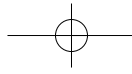
Where can we get more information?

Chapter 6 will help you to deal with this section in greater detail. It will guide you through a step-by-step process to develop your action plan.

What are the issues?

- Managing partnerships.
- Using information about HIV.
- Having someone to manage the process.
- Creating the right kind of structure.
- Monitoring how the policy works and the involvement of the district office.





5. Find out what you need to implement policy

Developing your own school policy on HIV and AIDS is an important first step. The policy gives your school guidelines on the way forward. Guidelines, however, are not enough. You still have to plan practical actions that will help to make the policy a living document. An action is not an action until it gets done! Many policies and action plans are useless because people talk about their intentions, but never actually do the work. Your policy will only become a practical document when you carry out the actions.

Activity - Make an HIV story board

Use an existing notice board and turn it into a 'HIV story board'. Use the story board to make an interesting display. Give it a heading such as 'This is how HIV touches our lives'. Ask learners and educators to cut out newspaper articles about people living with HIV. You could even make a roster and ask specific classes to prepare a new display every two weeks.

Here are some more effective 'no-budget' ideas:

- Ask learners from all classes to write or draw what they know about HIV. Choose the best pieces and display them.
- Invite an important member of the community to give a motivational talk on compassion. Ask him or her to talk about hate, discrimination and blame.
- Ask the drama group to prepare a few three-minute plays about living with HIV and present them to the school.
- Run poetry or art competitions to write positive messages about living with HIV and AIDS.
- Use graffiti to present creative messages about preventing HIV.
- Run a competition to collect items for orphans.
- Write rap/kwaito songs on the theme.

Your HIV and AIDS policy should enable your school to manage a coherent and consistent response to the impact of the disease.

A coherent response: means that all your activities, no matter how small they are, work together to create a whole. There is no confusion and the message of the activities is always the same.

A consistent response: means that your school organises HIV-related activities in an ongoing way. A 'big' HIV event (e.g. a poster competition, an outside speaker) must be carefully planned. Be sure to lead up to this event with smaller classroom activities. Then follow up some of the issues raised by the event.

Discuss



- How can you make sure that your policy is implemented in a coherent and consistent way that makes a difference to the lives of your educators and learners? Will it save lives?
- What structures do you need to set up in the school? Where should they be located – with the School Governing Body (SGB) or the School Management Team (SMT)?
- What outside structures should the school liaise with? What others need to be established?

compassion

- Uzwelo
- deernis
- Uvelwano/imfesane
- Kutlwelo-bothoko

graffiti

- Imbibhalo esobondeni
- graffiti
- imibhalo eyenziwe ngumntu edongeni
- Go tshwantsha

a coherent response

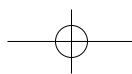
- Ukuphendula okunomqondo
- 'n samehangende anwoord
- Impendulo ecacileyo
- Tsi bogelo ee tsepament

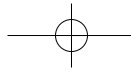
a consistent response

- Ukuphendula okusimeme
- 'n konsekwente reaksie
- Impendulo engaguququkiyo
- Tsi bogelo ee thomameng

liaise

- Xhumanisa
- skakel
- ukunxulumana
- Gokaganya





Set up structures to implement your HIV and AIDS policy

An effective HIV and AIDS policy has a clear aim and is part of the overall school development plan. A good policy will briefly outline what structures are needed. It will show how the policy should be implemented in an ongoing way. A clear purpose and goals are very important.

Schools should not feel that they have to set up a number of new structures. Sometimes too many teams and committees are a burden and can end up duplicating one another's work. What you put in place will depend on what structures already exist. Remember that you could expand the role of existing structures (e.g. the fundraising committee or school safety committee) to meet your needs.

Activity – Think about what structures you have and what you still need

Look at the examples of structures below. Think about existing structures at your school.

- How could you adapt existing structures to include the tasks that are outlined in these examples?
- Think about the kind of structure/s you would need if these structures do not exist.

School Based Support Team (SBST)

- **Who could be involved?** Members of the SGB, SMT, Life Orientation staff, educators, learners, someone from the Department of Social Services.
- ◆ **What could it do?** The SBST could be an umbrella body for the other committees. It could drive your HIV and AIDS policy, make sure that actions happen, respond to crises and make financial decisions.

Educator Support Team (EST)

- **Who could be involved?** Members of the SMT, union representatives, educators, People living with HIV and AIDS (PLWHA).
- **What could it do?** Deal with Priority 3 – Care and support of educators, e.g.
 - Support educators personally so that they cope emotionally with the difficulties of colleagues and learners living with HIV and AIDS.
 - Refer educators for counselling and support.
 - Identify educator needs regarding workplace policies, leave and professional development.

Life Skills and HIV Prevention Team (This may be part of the staff development committee in some schools.)

- **Who could be involved?** Life Skills and other educators, members of SGB, learners.
- **What could it do?** Deal with Priority 1 – Prevention of HIV infection, e.g.
 - Drive Life Skills and HIV prevention programmes, e.g. awareness campaigns.
 - Network with HIV and AIDS organisations and service providers.
 - Involve community and youth (see Chapter 2 for more ideas).

duplicating

- Ukuphindaphinda
- duplisering
- Ukuphindaphinda
- Go kwala sebedi

umbrella body

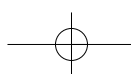
- Inhlango emmele ezinye
- sambreelorganisasie
- Umbutho omkhulu oneminye ephantsi kwawo
- Mokgatlho o mo tona

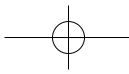
professional development

- Ukuthuthukiswa ngokomsebenzi
- beroepsontwikkeling
- Uphuhliso olwenziwa ngobuchule obugqibeleleyo
- Tlhabololo ya se-profeshenale

network

- Xhumana
- network
- Ukuthungelana
- Mafarathattha a neeletsano





Health and Safety Team

- **Who could be involved?** Educators, a local health care worker, learners and PLWHA.
- **What could it do?** Deal with Priority 1 – Prevention of HIV infection, e.g.
 - Create and maintain a healthy school.
 - Deal with issues such as staying in touch with the national Healthy Schools Project.
 - Deal with nutritional issues, hygiene and cleanliness of the school. Make sure that the sick bay and the first aid kit are properly maintained and create awareness around universal precautions.
 - Advise the SGB on all health matters (see Chapter 3 for more ideas).

Youth Peer Health Team

- **Who could be involved?** Youth, educators, social workers, PLWHA, nurses, doctors and other professionals.
- **What could it do?** Deal with Priority 2 – Care and support of learners, e.g.
 - Provide paraprofessional training for youth to do what is outlined in the HIV Emergency Guidelines (see Chapters 4 and 5 for more detail).

Work on your HIV and AIDS policy

- Which of the above structures do you already have? Which do you think should be set up at your school to implement your HIV and AIDS policy?
- Go back to the HIV and AIDS policy template on page 10. Fill in the kind of structure/s that you already have. Write down any new structures that you think are necessary.

Healthy Schools Project

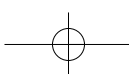
- Umkhankaso wezeMpilo wesikole
- Gesonde Skoleprojek
- Iprojekthi yezikolo ephathelene nezempilo
- Porojeke ya dikolo tse di itekanetseng

nutritional issues

- Izindaba zokondlela
- Voedingkwesies
- Imiba yokondleka
- Dintlha tsa go otla

paraprofessional

- Okuthi akube ngokomsebenzi ofundelwe
- semiprofessioneel
- Ubuchule obugqibeleleyo
- Bofrofeshinale jo bo kopanetsweng



6. An example of an action plan to implement policy

The example of an action plan below shows you how to set up a school-based structure.

HIV and AIDS ACTION PLAN OF Rebone Primary for 2003				
Priority 5: Managing a coherent response.				
Date: 9 January				
Participants: SGB, SMT, School Based Support Team				
Action	Activities	Who is responsible?	By when?	Budget?
Set up a school-based structure to drive the HIV and AIDS policy and provide care and support.	Put together a short letter about the role and responsibilities of the committee or team. Outline <u>criteria</u> for serving on it and send it out. Invite interested parties to come to a meeting.	SGB chairperson and principal.	15 January Write draft of letter within four days of the SGB meeting. Discuss draft. Send out final letter within a week.	R0 – Use existing school letterhead, stamps, envelopes.

Objective: To create a legitimate structure to drive the HIV and AIDS policy in the school. The role of the new structure is to make sure that enough thinking goes into the policy and to make sure it is implemented.

Involvement: People who serve on the team should be a mixture of school managers and interested staff. They should be caring, efficient, and open-minded. They should want to help people affected and infected by HIV and AIDS. You could also invite parents, community members and health workers to become part of the team. You should think about which partners outside school are important. Also decide whether you need the expert advice of health workers, social workers, etc. Perhaps your team should include members of the Representative Learner Council (RLC), if you are working in a high school.

Responsibility: The SGB chairperson and principal should give legitimacy to the new structure. They should definitely be members. One member of this new structure should also serve on the SGB.

Timeframes: Set timeframes that can be met. At the same time, however, it is critical to make sure that the action continues and the work keeps going. It is important to allow enough time for each activity, and to monitor the action. Speak to people about speeding up the process.

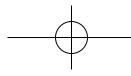
Your local District Education office or your local/district AIDS committee should also receive a copy of your school's HIV and AIDS policy. This will help to inform them about your new developments. It will also make it easier to ask them for support.

criteria

- Inqubo elandelwayo
- kriteria
- Isikhokelo sokwenza okuthile
- Mokgwa wa go thopa

legitimate

- -fanelekile
- wetig
- Isemthethweni
- Ee tshwanetseng

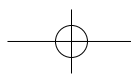


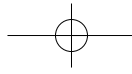
Activity - Monitor the progress of developing your HIV and AIDS policy

Here are some questions you can ask to monitor whether your own policy is on track:

- Have you discussed the need for your own HIV and AIDS policy at SGB level? **Yes No**
- Have you discussed the need for your own HIV and AIDS policy at SMT level? **Yes No**
- Have you informed the school community about important issues relating to HIV and education? **Yes No**
- Have you had a meeting to explore what the school can do? **Yes No**
- Have you taken your school community through a process to decide on the aims and the content of your policy? **Yes No**
- Have you written the policy? **Yes No**
- Is the policy displayed and are copies available on request? **Yes No**
- Does your district office have a copy of the policy? **Yes No**
- Do you have a structure in place to make sure the policy is implemented? **Yes No**

Notes:





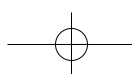
Summary

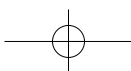
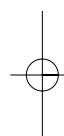
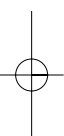
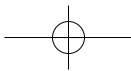
In this chapter you:

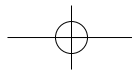
1. Improved your background knowledge about HIV and AIDS.
2. Found out more about how HIV and AIDS can affect your school.
3. Learned about the five critical priorities for schools.
4. Began to think about what to include in an HIV and AIDS policy.
5. Thought about what you need to implement policy.
6. Looked at an example of an action plan to implement policy.

List of useful resources:

- “National Policy on HIV/AIDS”, Government Gazette of 10 August 1999, Government Notice NO 20372.(See List of contacts and resources on page 111.)



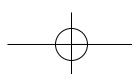


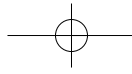


Preventing the spread of HIV

In this chapter you will:

1. Look at the role of schools in preventing the spread of HIV.
2. Think about some practical ways to prevent infection.
3. Understand what makes young people at risk at school.
4. Read about some examples of creative and effective responses.
5. Find solutions that will work for you.
6. Look at ways to take action.





CHAPTER 2

Preventing the spread of HIV

1. Look at the role of schools in preventing the spread of HIV

The immediate problem facing us all is to stop HIV from spreading, especially among youth. Most HIV infections happen in young people, especially women, either in school or soon after they leave school.

There are many good radio, TV and billboard campaigns which hope to make young and old aware of HIV. Most young people will have heard the messages of abstinence, staying faithful and using condoms. There are also many NGOs and other organisations working to make people aware of safe practices. However, education and schools in particular should continue to make the prevention of HIV infection a priority. Research shows that young people at school are less likely to be infected than those who are out of school. Experience from Uganda and Zambia shows that informed young people are best able to protect themselves.^v

Knowing how HIV is spread and having access to condoms is often not enough. People still get infected. You need to create an environment that supports a change of behaviour. This is where the school, in partnership with government departments, communities and other organisations can play a powerful role.

Discuss



- How do the following factors increase the risk of HIV in your community?
 - Silence about HIV or AIDS.
 - Judging people who are infected.
 - Alcohol and drug abuse.
 - Sex with older men or women for money or gifts.
 - Learners having sex with each other.
 - Sexual harassment and sexual bullying.
 - Beliefs that men have more rights than women.
- What other factors put people at risk?

abstinence

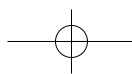
- Ukuzithiba
- onthouding
- Ukuzila okuthile
- Go ithibela

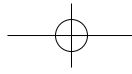
NGOs

- Izinglangano ezingekho ngaphansi kukahulumeni
- Nie-regeringsorganisasies
- Imibutho engekho phantsi korhulumente
- Mekgathol ee seng ya puso

sexual harassment

- Ukuhlukumenza ngoocansi
- seksuele teistering
- Ukuhlukunyezwa ngokwesondo
- Tshotlo ka thobalano





2. Think about some practical ways to prevent HIV infection

A number of ways can help schools to prevent the spread of infection among both staff and learners.

Provide correct information: Educators and other staff need to be given correct, basic knowledge. Teacher training institutions need to include information (in their in-service and pre-service programmes) about HIV.

Staff need to understand how HIV and AIDS will affect their lives and their families. This information should motivate them to act responsibly. They will then protect themselves from becoming infected or infecting others.

Young people, especially adolescents, are especially at risk from getting infected with HIV. Young people often get wrong information about sex and HIV from their classmates. This is why it is important to provide people with accurate information.

Develop skills that will help staff to act positively, e.g.:

- Skills for decision-making, negotiation and condom use.
- Skills to access appropriate services for the treatment of STIs and other infections, and counselling.
- Skills for positive living.
- Skills to promote gender equality.

Encourage safer sex practices: One way of preventing the spread of HIV is easy access to testing. Government has set up pre- and post-test counselling centres around the country to help change behaviour. You must encourage those who have been tested and who know their HIV status to act responsibly. Educators and other staff need up-to-date information about how to access services for the treatment of STIs and other infections.

Young people especially, need access to government clinics that are youth-friendly. Here they can get help with sexual health issues such as STDs and contraception. They will learn about the value of sexual abstinence. They will find it easy to obtain condoms and also be convinced that it is 'cool' and 'sexy' to use them.

Set up peer education: Many young people find it hard to resist sexual pressure. They look for approval from adults and their peers. Sometimes they will do almost anything to get approval – including unprotected sex. The problem is that unsafe sexual behaviour usually happens outside the school gates. For this reason, trained peer educators are more suitable to talk to young people about issues like this.

negotiation

- Ukubonisana
- onderhandelings
- Uthethathethwano
- Puisano

STIs

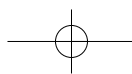
- Izifo ezithathelwana ngokocansi
- seksueel oordraagbare infeksies
- Izifo ezidluliswa ngokwabelana ngesondo
- Malwetsi aa tshelanwang ka thobalano

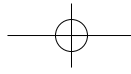
equality

- Ukulingana
- gelykheid
- Ukulinganiswa
- Tekano

peer

- Untanga
- eweknie
- Oontanga
- Molekane





Speak out against sex between young girls and older men in your community:

Many young girls are at risk because of their social or economic position. They may be tempted to exchange sex with older men for gifts. Unsafe sexual behaviour like this must be discouraged. Schools can help to change behaviour and keep young people safe.

Ensure that life skills training is effective: Schools should provide correct information and make people aware of the situation. They also need to support learners to resist pressure, understand healthy and positive sexual relationships, and build self-worth. This includes correct information about a healthy lifestyle, for example, hygiene, good nutrition, how the body works and sexual health. For this reason, the Department has introduced sexuality and HIV and AIDS education from Grades R-12.

These programmes teach young people about sex. They encourage boys and girls to respect and protect their bodies and to build healthy relationships. Schools should involve parents and members of the community in their life-skills programmes so that there is no confusion. Everyone will understand and support the messages of these programmes.

Make schools safer places: Schools need to make sure that the physical space is safe for learners. They need to make sure that there are no unsupervised areas where drug abuse, bullying, sexual harassment or even rape can take place. It is also important for schools to take some responsibility for the safety of learners on their way to and from school.

The Departmental policies protect learners from sexual abuse, gender inequality and violence. However, each school has to look carefully at itself to see how well these policies are carried out. Schools must take the lead in removing educators who abuse learners. They should use the Employment of Educators Act and Child Protection legislation to report anyone who knows of ongoing abuse but does not report it. It is a criminal offence if you do not protect a child who is sexually abused.

Work in partnership with others: Young people are at greatest risk outside school. Changing behaviour is not easy. Schools need the support of the community. This means that schools need to become part of a network to help protect learners and educators. This involves finding out which traditional authorities, parents, NGOs, CBOs, FBOs and other government departments work in the area, and forming relationships with them. It also involves working with various government departments, such as the Departments of Health, Social Development, and Safety and Security. Schools need to work with youth organisations, community structures, religious organisations, parents and other members of the community in building a safer society.

nutrition

- Ukudla okondlayo
- voeding
- Isondlo
- Go otla

drug abuse, bullying, sexual harassment or even rape

- Ukusetshenziswa budedengu kwezidakamzwa, ukuklova, ukhlukumeza ngokocansi nokudlwengula imbala
- dwelmmisbruik, afknouery, seksuele teistering of selfs verkragting
- Ukusentyenziswa gwenxa kweziyobisi, ukusebenzisa amandla ukuphatha kakubi abanye abantu okanye ukudlwengula
- Tiriso-bothaswa ya dritibatsi, tshotlo ya thoballano kgotsa petelelo

gender inequality

- Ukungalingani gokubulili
- geslagsongelykheid
- Ukungalingani ngokwesini
- Go sa lekalekaneng ga bong

criminal offence

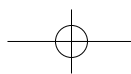
- Ukuphula umthetho/icala
- misdaad
- Isenzo solwaphulo mthetho
- Tlolomolao ya bosenyi

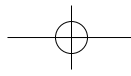
community based organisations (CBOs)

- Izinghlango zomphakathi
- gemeenskapsgebaseerde organisasies
- Imibutho esekelwe ekuhlaleni
- Mekgatho yua baagi

faith based organisations (FBOs)

- Izinghlango zokholo
- geloofsgebaseerde organisasies
- Imibutho esekelwe kwinkolo
- Mekgatho ya tumelo





Activity - Check your school's capacity to prevent the spread of HIV

Answer the following questions:

- Does your school have a functioning life skills programme?
- Does the school take action against bullying, harassment and inappropriate sexual relationships?
- Are women and girls recognised enough for their contributions?
- Are boys and men encouraged to be caring and respectful?
- Does your school recognise the role that young people can play in preventing the spread of HIV?
- Have you done anything to make young people partners in prevention?
- What has been done to improve the skills of educators who teach life skills? What materials do they need for self-study, distance education, peer group learning and INSET (inservice training) at school?
- Have you encouraged members of the surrounding community to become partners in prevention?

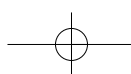
distance education, peer group learning

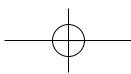
- Imfundo yabaqama, ukufunda kwabeqembu elintanganye
- afstandsonderrig, portuurgroep onderrig
- Imfundo yangasese, ukufundisana kontanga
- Thuto ya sekgala se se leele, thuto ya sethopa sa balekane

Discuss



- How would you assess your school's capacity to respond?
- In what ways has your school already started to prevent the spread of HIV?





3. Understand what makes young people vulnerable at school



Case study



Mary decided to leave school in Grade 9 because she was pregnant. She lives with her mother who is unemployed. She looks after her four-year-old boy who is sick. She is also sick with AIDS. She gets very depressed and sometimes goes to the shebeen to drink. She has often thought of killing herself but then she remembers her child.

Things have changed for Mary. She used to be one of the top learners at the large rural school she attended. Then, one day in Grade 8, she was travelling back from school with a taxi driver she knew well. She was the last person left in the taxi. He stopped the taxi near an empty park and told her she was beautiful and kissed her. He was young and handsome and Mary was confused and flattered. He gave her a present of money and promised to give her more. This started to happen more often. In the afternoons they would be alone together in the taxi and she started to have sex with him.

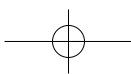
When Mary fell pregnant she told the taxi driver. He refused to believe her and told her that she was unfaithful to him. Her mother was furious and went to confront him. He denied ever having sex with Mary. The mother threatened to report him to the school for having sex with an underage girl. The principal wrote a report and said he would send it to the district office with Mary's statement.

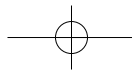
In the meantime the taxi driver went to see Mary's mother and offered to pay her lobola. In return Mary withdrew her statement. When Mary's son was born he was sick – both he and Mary tested HIV positive. The taxi driver still operates his taxi at that school and has never visited Mary or her child.

Discuss



- How does this story make you feel?
- Have you heard of similar stories?
- Could this have happened to girls at your school?
- What circumstances made it possible for this to happen to Mary?
- What could have prevented Mary from getting infected with HIV?
- What action should the school have taken against the taxi driver?
- How could school management, the SGB and other structures have helped her?





Be aware of attitudes that are unhelpful

Silence

The story of Mary shows clearly how dangerous silence is. It allows harmful practices to continue and helps the epidemic to grow. Unless people like the taxi driver are prosecuted and learners are aware that they are protected from this type of behaviour, people like this will continue to spread the virus. Mary may also practise unprotected sex and spread the virus. The system has not acted to protect her and she probably feels lonely and angry. In order to attack ignorance, and unsafe practices, we need to speak openly about HIV and AIDS.

Discuss



Answer the following questions:

- Are we a “silent” school?
- Do we know and talk honestly about how HIV and AIDS affect our school? Do we prefer to ignore it?
- Are we embarrassed by people with HIV and AIDS?
- Do we protect our colleagues who victimise/bully/harass others?
- Do we protect our learners from all forms of bullying and sexual harassment?
- Do we support colleagues and learners if they have been victimised?

Blaming the victim

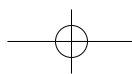
Some people might believe that Mary was to blame for getting infected with HIV. This attitude is called “blaming the victim”. Some people believe that the victims may have encouraged rape and harassment. This makes it difficult for victims to seek support if people have attitudes like this.

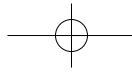


Discuss



- Does this cartoon seem familiar to you?
- How do people talk about young women like Mary at your school?





'It Can't Happen to Me!'

Everybody is at risk or vulnerable. This is a message that everyone needs to hear, especially young adolescents. They often don't take the many AIDS messages they hear seriously. A good way to emphasise this is by encouraging discussion about growing up and having sex. Encourage safe sex practices like using condoms. Another important way to encourage responsible behaviour is to let people know about universal precautions. This means that in every first aid situation, the injured person and his or her body fluids have to be treated as if they are infected with HIV.



Universal precautions are:

- Treat all blood as HIV positive. Avoid direct contact with blood or other body fluids. Use gloves or plastic bags to cover your hands. Children should learn to stop their own bleeding as soon as possible.
- Clean the wounds with antiseptic.
- Use antiseptic or diluted bleach to clean any areas that come into contact with blood. These include clothes, surfaces, floors and instruments used to dress the wound.
- Make arrangements to dispose of sanitary towels and tampons at the school so that no one can have contact with them.

vulnerable

- -ngavikelekile
- kwesbaar
- ukubasesichengeni sokwenzakala
- Kgonagalo ya go gobala

antiseptic

- -lwa namagciwane/nezifo
- antisepties
- Isinqanda kubola
- Tshitatutelo

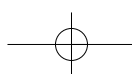
sanitary towels and tampons

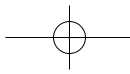
- Okokusiza abesifazane uma besesikhathini
- sanitère doekies en tamponne
- lilaphu lokuzikhusela xa umntu olibhinqa esexesheni kunye nesivingco sokunqanda ukopha
- Ditoulo tsa go phepafatsa le matsela a go thibela madi go elela

Straight Talk is a very successful Ugandan monthly newspaper for 15- to 19-year-olds. It is delivered directly to schools and has helped to change unsafe attitudes. It was started because many adults found it difficult to speak about sex. It has honest and accurate articles about sexuality and growing up. It talks about HIV and other life skills, as well as the rights of children and young adults. Previous issues have included: how to handle strangers, talking straight but respectfully, saying a big "no", protecting myself against unwanted pregnancy and HIV and AIDS, sexual abuse, defilement, rape, bullying, teasing. Letters written by young people who give advice to their peers are also published.

defilement

- Ukubukela phansi
- bevuiiling/skending
- Ukungcolisa
- Go se faela





4. Read about some examples of creative and effective responses

Example 1 - Every Class is a Life Skills Class

At Capital Park Primary School in Pretoria every member of staff has attended a life skills training course. Mrs van der Walt, the Educational Guidance Head explains: "Every class is a life skills class. If a life skills question comes up during natural science it makes sense that the educator can deal with the question. Obviously answers should be age appropriate and should not embarrass any of the learners." Their programme is aimed at building a value system and helping learners make the right decisions. The school uses drama, music and role-play to teach learners how to deal with difficult situations. "When we move into sexuality education in Grade 7 we involve the parents and talk to them at an information evening. The children are very open and it is our policy to answer every question they ask. We realise that if they don't get the information from us they will get it from other 'backstreet' sources. It also helps build a relationship between learners and educators."

(Ref. "Our Young People Take It On")

role-play

- Ukulingisa
- rolspeel
- Ukudlala iindawo ethile ebalini
- Go tsaya-karolo

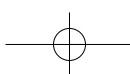
Example 2 - Youth Clubs

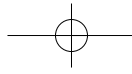
All over Africa very effective youth clubs have been established to prevent the spread of HIV. Some of the most effective ones have been where young people have been trained as paraprofessional peer health educators. AIDS Action Clubs in Zimbabwe involve peer education, life skills training and awareness of child abuse. In Zambia the Copperbelt Health Education Project (CHEP) has established Anti-AIDS clubs. The Limpopo Youth Development Organisation refers pregnant teenagers to clinics. They use drama and games to talk about HIV and AIDS. In one project in Limpopo, they encourage young people to draw up their goals for the next five years, and help them to see how HIV and AIDS could impact on these plans.

Example 3 - A Peer Education Programme

Edward Mabunda started SAPLER in the Winterveld region of the North West Province in 1996. "I realised that young people are not only relaxed when listening to other young people, but are keen to learn from the experiences of others. Let young people convey the message to other youngsters." Mabunda has placed dozens of peer educators at schools for a year to help the life skills education staff. About 500 schools in the North West have joined the programme. First, they have to form an HIV and AIDS committee under the direction of the school's guidance counsellor. Then programmes and timetables are set up with the educators. The peer educators are all matriculants and submit weekly reports on their activities. From these, quarterly reports are compiled and sent to the district managers of the Departments of Education and Health.

(Ref. "Our Young People Take It On")





Example 4 - Youth Clinics

An important aspect of the work of organisations such as loveLife, Soul City, and the Southern African Association of Youth Clubs is to plan youth-friendly clinics. Many young people don't go to clinics, or go once and not again because of the way they are treated. A good youth clinic has staff that knows how to work with young people, helps them and does not criticise them. Young people also need to be assured of privacy. Such a clinic should have its own entrance. Young people need to get affordable or free counselling, testing, information and condoms. They also need to get support with pregnancy and STIs.

Example 5 - Foot Soldiers Against AIDS

A school in Bultfontein near Taba Nchu has decided to take action. Twice now, the 943 learners have marched to bring home the message of abstinence to the youth and the broader community. Before the march they organised marshals, pamphlets and information points and invited the police and the local media to attend.

The school has also educated a group of Grade 8 to 11 learners about HIV and AIDS. These learners went through the school, class by class, telling learners about HIV and how to prevent it. The school speaks to communities at shopping centres, wherever people meet, and distributes pamphlets and makes people aware. The proud principal, Mr Motshelamadi, says: "We intend to sustain our campaign and to get people to accept people living with AIDS. We'd like to see that every school child will become a foot soldier, a representative of their school in their own community, forming cells and encouraging others to join in the battle against HIV and AIDS."

(Ref. "Our Young People Take It On")

Example 6 - Men Talking to Men and Women Talking to Women

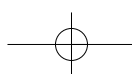
Action Aid in Mozambique has an interesting peer education programme. It is based on the Stepping Stones programme which was started in Uganda. The programme believes that men and women need private time and space with their peers. They can then discuss their own needs and concerns about relationships and sexual health. Once a week members of the community meet for workshops. They are divided into four groups: young women, older women, young men and older men. Trained facilitators discuss topics such as culture and gender, relationships and HIV/AIDS. Through drama, song, dance and other activities the community is made aware of issues. Problems are identified, and the group members come up with practical solutions which are shared with other groups. At the end of the workshops, everybody makes a promise to the community to implement certain changes.

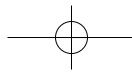
facilitators

- Abenza kube lula
- fasiliteers
- Umntu owenza ukuba kube lula ukwenza okuthile
- Bafefofatsi



- Could any of these solutions work in your area?





Activity - A gender awareness workshop for learners and educators



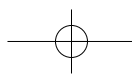
Use this cartoon to hold a workshop with learners and educators. Hold separate workshops for male and female educators, and male and female learners. Facilitators should be the same gender as the group. At the end the groups can come together and share solutions.

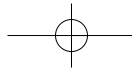
Questions for boys/men: Why do you think Carlos behaved like this? Is sex a right? Do you think he would have been a failure as a man if he had listened to Maria? How can we help him to become more caring to other people?

Question for male educators: How could we as male educators stop this kind of behaviour?

Questions for girls/women: What could Maria have done to protect herself? What stopped her from protecting herself? What can women do to stop this kind of behaviour?

Question for female educators: How could we help female learners to avoid getting into this kind of situation?





5. Find solutions that will work for you

There are a number of ways to deal with the problems of HIV and AIDS. These are explained in more detail below. As you think about possible solutions, you should say what you plan to do. These intentions can then be included in your HIV and AIDS policy.

Create a culture of caring and openness

The first step to is to admit that everybody in our school and in our country is affected in some way. Now let us look at our sexual behaviour and at how we relate to people. Let us speak to children about things we are often uncomfortable with. Let us look at and be open about difficult issues, such as abuse and neglect. Let us think about poverty, depression, drug and alcohol abuse, sexual violence or other inappropriate/anti-social behaviour. Only by being open about our problems can we deal with them and prevent any more damage.

Discuss



- As an SGB/SMT/Staff/RLC member what should we say in our policy about what we aim to do in encouraging more openness and honesty?

Encourage young people to be leaders

The examples on the previous pages show that young people can be very useful partners in dealing with HIV and AIDS. Young people are much more comfortable hearing messages about sex and related issues from other young people. This has made peer-education programmes and youth clubs so worthwhile. Some schools have trained learners as peer-counsellors very effectively. Learners can speak to them in confidence and can get advice about where to go for help.

Discuss



- As an SGB/SMT/Staff/RLC member what should we say in our policy about what we aim to do in involving learners in HIV prevention?

neglect

- Yekelela
- afskoop
- Ukungakhathaleli
- Ikgatholosa

poverty, depression

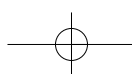
- Ubumpofu, indlala
- armoede, depressie
- Indlala, ukudakumba
- Leuba le bothoki

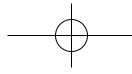
inappropriate/anti-social

- ngafanelekile/--ngahambisani
- nenhlalo-mpilo
- ongepas/anti-sosiaal
- Ayifanelekanga/ichasene namasiko nezithethe
- Ee sa lebanang/Gothoka botho

Representative Learner Council (RLC)

- Umkhandu ommele abafundi
- Verteenwoordigende leerlingraad
- Ikhansile yabamele abafundi
- Kgotla-kemedi ya baithuti





Form partnerships

Often we don't want to deal with HIV and AIDS because we feel helpless. We might feel that being an educator is already a demanding job. We can't be expected to take on even more responsibilities. It is important to realise that we do not have to do it alone. Dealing with HIV and AIDS prevention in the school sometimes just means knowing who to ask for help. It is useful to find out which schools and organisations in your area are dealing with HIV and AIDS and then to form strong partnerships with them. The Department of Social Development should be able to give you a list of what support is available. You can then make sure that every child and adult in your school knows where to go for help.

Discuss



- As a SGB/SMT/Staff/RLC member, what should we say in our policy about what we aim to do in developing partnerships to prevent the spread of the HIV epidemic?

Involve parents or caregivers

No HIV prevention campaign can work without the support of parents/caregivers. Find out what kinds of skills they offer. Do you have parents/caregivers who are nurses, doctors, social workers, counsellors, religious leaders, traditional healers, AIDS activists, cooks, handymen? Make contact with them and ask them what they could do to help you. Include parents/caregivers in life skills training programmes and staff development. Many of them struggle themselves with good communication, culture and gender issues. Many are afraid that HIV and AIDS education in the school is about sex education, and that sex education will encourage their children to have sex. By giving parents/caregivers information about HIV and AIDS, you can help to change attitudes and make them see that sex education is vital.

Discuss



- As an SGB/SMT/Staff/RCL member what should we say in our policy about what we aim to do in involving parents/caregivers in preventing HIV infection?

Activity – Run an awareness workshop for parents/caregivers and learners

Here is an outline of a possible workshop you could hold. The aim of the workshop is to help parents/caregivers become more comfortable with talking about sex to their children.

Step 1: Read the story of Mary (page 26) or any similar story that is familiar to people.

Step 2: Discuss what circumstances made Mary vulnerable.

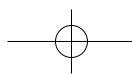
Step 3: In groups, let people brainstorm what factors make youth in their community vulnerable to getting HIV.

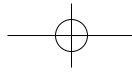
Step 4: From the group discussions draw up a list of the eight main factors that make youth most vulnerable.

Step 5: Discuss the way forward.

brainstorm

- cobelelana ngomqondo
- dinkskrum
- Ukunika izimvo njengoko zifika engqondweni yakho
- Dipuisano tsa go rarabolola mahata/Go akantshana





Run an effective Life Skills programme

Remember Life Skills is one of the focuses in the Learning Area: Life Orientation

Every educator should have basic HIV and AIDS knowledge, but life skills education should be handled by skilled, trained, suitable educators. To make life skills effective, every educator has to draw attention to HIV and AIDS. Educators have to be examples of good behaviour. This requires educators to think about their own behaviour and attitudes, and for the school to support educators in their difficult task. This will be dealt with in more detail in Chapter 4. By now every school should be running a life skills programme. Schools that run a life skills programme must look closely at how effective it is.

Activity – Assess whether your life skills programme is effective

To assess your life skills programme, use this exercise to think more clearly about what you mean by effective.

Complete the sentence:

We know that our life skills programme is effective when _____.

Here are some possible answers:

- the behaviour of young people starts to change.
- there are fewer acts of violence in and around school.

Here are some points you could use to check your life skills programme.

- Does it give accurate, age-appropriate information which helps learners protect themselves?
- Does it help learners to behave in a safe way? Does it deal with issues such as assertiveness and good communication skills?
- Does it help build a culture of care in the school? Does it deal with respect, knowing one's rights, gender equality, and how to deal with bullying and harassment?
- Does it include all role players, members of staff, learners, parents and other organisations?

assertiveness

- Ukuphikelela ngokuyikho
- selfgelling
- Ukuzithemba
- Naya ditaelo ntle le potsolotso

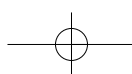
Discuss

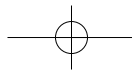


- As an SGB/SMT/Staff/RCL member what should we say in our policy about what we aim to do in strengthening our life skills programme?

Activity – Go back and work on your HIV and AIDS Policy

- Go back to the template on page 10 and write down what your school believes and what it aims to do about Priority 1: Prevention.





6. Look at ways to take action

Priority I: Prevention – Summary of issues

In this chapter we discussed four key ways to prevent the spread of HIV and gave some examples of possible actions. These are:

Direct interventions

- providing learners and educators with correct information.
- providing information about testing and counselling.
- finding out about and advertising youth-friendly clinics.
- helping learners and educators to get condoms.
- following universal precautions.
- organising a first aid kit.

Creating partnerships

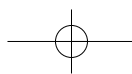
- working together with youth, the school community and existing service providers.
- getting involved in peer-education projects and youth clubs.
- holding workshops with the community.
- finding out who else could help you with your HIV and AIDS programme.

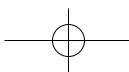
Strengthening the Life Skills programme

- evaluating the life skills programme and finding out how to improve it.
- training every educator in the school.
- involving parents in life skills training.

Creating a culture of caring and openness

- holding workshops with parents, educators and other members of the community.
- participating in awareness campaigns to fight blame and discrimination.





Action 1 – Hold a workshop to talk about action

Organise a workshop with learners, educators, parents and RLCs to talk about what practical and manageable actions will help your school to respond to Priority 1: Prevention. Refer to the section that you wrote for your HIV and AIDS policy. In order to prepare for this workshop, think about the following things:

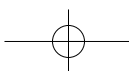
- Decide who should be involved in drawing up your school's HIV and AIDS action plan. Make sure these people have read through this chapter before the workshop begins.
- Ensure that everybody is informed about the issues in this chapter. You can use the summary on page 35 for preparation and ask participants to add their own ideas.

Action 2 – Find out about prevention services and support.

Here is an example of a list you could use to collect information about different services and support in your area.

Examples of services	Name of organisation	What type of help and support can they provide?	Contact person and details
State Services	e.g. CPU, Social Services, Circuit Office of the DoE		
Religious/Traditional Organisations			
NGOs	e.g. Treatment Action Campaign		

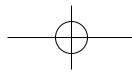
Find out what kind of materials – books, pamphlets, tapes and videos – can be put in the library and used for various classes, or discussion groups.



Action 3 – Look to other schools for ideas

Look at Rebone Primary’s action plan on the right. Talk about the plan. Would these activities work in your school? How would you go about planning an awareness campaign?

HIV/AIDS ACTION PLAN OF Rebone Primary for 2003									
Priority 1: Prevention									
Date: 9 January									
Participants: SGB, SMT, School Based Support Team									
Action	Activities	Who is responsible?	By when?	Budget?	Resources needed	Who will support us?	Who/how will we monitor our progress?	Indicators of success	
1. A month-long awareness campaign	<ul style="list-style-type: none"> a. Plan the campaign b. Contact speakers and participants. c. Discuss with staff how to use AIDS as a teaching theme for the month. d. Fundraising. e. Invite guests. f. Carry out campaign as planned in a. 	<ul style="list-style-type: none"> a. SGB, SBST. b. Mrs Ntau and Kala. c. Life Skills and Life Orientation educators. d. Mr Walter. e. Staff invite parents, Mrs Ntau, guests of honour. f. See plan (a). 	<ul style="list-style-type: none"> a. 21 Feb. b. 25 Feb. c. 25 Feb. d. April. e. End of April. f. 1-28 May. 	R2 500. Will try to raise more.	Phone calls. T-shirts, ribbons, pamphlets, catering.	Try the District Office, NGOs, Department of Health, local businesses for donations – T-shirts, ribbons, retailers for donations of food, SGB, SMT, RLC.	<ul style="list-style-type: none"> a. Report to SGB chairperson. b. Report to principal. c. Report to SGB. d. Report to SGB. e. Write a report and send to District, sponsors, NGO. 	<ul style="list-style-type: none"> a. There is a program of activities in place. b. Speakers and participants know what to do when. c. Extra sum of money has been raised. d. Learners, educators and the community around the school are concerned about the spread of HIV/AIDS, and have started to speak about it. 	



Activity - Work on your action plan

Action: Remember that you are going to plan more actions for Priorities 2, 3 and 4. It is better not to have too many activities planned for the year. Rather aim at something you can achieve: maybe four for the year – or one big one, like the example of the Awareness Campaign which runs over a month and has several different activities.

Activities: Break down the Action into easy, do-able steps.

Who is responsible? Make sure that one person or a specific team takes responsibility. Don't forget to include learners in the planning and preparation, especially when dealing with prevention. An awareness campaign must involve many areas. Think how you could involve parents, religious and cultural organisations, police, social services, the Department of Health, the District Office, etc.

When? Give each activity a clear and realistic deadline. It gives the action a sense of purpose and professionalism.

Budget? It is important not to be too dependent on budgets for your plans. See how much you can do with very little money.

It costs nothing to get speakers to come to your school. Many organisations hand out free posters and pamphlets. Learners can also make posters and write plays and songs about HIV and AIDS.

Resources: Be creative here. See what you can get – can you make something out of nothing? Can you access the resources around you? Can you share your resources with other schools or organisations in your area?

Support: It is important to remember that you do not have to do this alone. There are many organisations that can help you with ideas, resources, materials, photocopying, media coverage, or even financial support. Speak to neighbouring schools and share your resources. Think carefully about what support you need, e.g. perhaps you need the police to marshal a march. Don't only look for financial support. Sometimes it is just as useful to have someone who believes in what you are doing.

District support: Invite your district HIV and AIDS co-ordinator and find out how he or she can support you. Find out what resources they have available. Do they have materials that you could use, such as posters and pamphlets? Do they have a special fund you could use? Could any of their staff help you? Could they provide speakers and hold workshops with educators, parents and learners? Could they help with getting the media involved? Parents and the community are more likely to support you if they know that your activities are supported by the Department.

How will we monitor progress? You need to manage the process and solve any problems that may arise. You also need to check that the planned activity actually takes place. It is important that someone takes responsibility for this. Be specific about how to monitor progress. Is it necessary to write progress reports and hand them out to everybody? Can someone give the SBST chairman or the principal a verbal report?

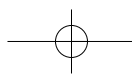
Indicators of success: Make sure that these are clear. You must be able to measure and see them. Think of ways that will help you to know when you have achieved your targets. It is good to know how to measure success and praise yourself once you have achieved what you set out to do.

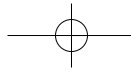
professionalism

- Ubuqotho ngokomsebenzi
- professionalism
- Ubuchule bokwenza izinto
- Boprofeshenale

media

- Abezindaba
- media
- Amajelo eendaba
- Bobegakgang

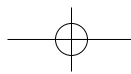


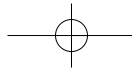


Activity - Work on your action plan

Use this template to fill in Priority 1: Prevention in your own action plan.

HIV/AIDS ACTION PLAN OF _____ for 200_									
Priority 1: Prevention									
Date: _____									
Participants: _____									
Action	Activities	Who is responsible?	When?	Budget?	Resources needed	Who will support us?	Who/how will we monitor our progress?	Indicators of success	
1.									
2.									
3.									
4.									





Summary

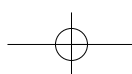
In this chapter you:

1. Looked at the role of schools in preventing the spread of HIV.
2. Thought about some practical ways to prevent infection.
3. Tried to understand what makes young people vulnerable at school.
4. Read about some examples of smart plans.
5. Tried to find solutions that will work for you.
6. Looked at ways to take action.

List of useful resources:

- “Signposts for Safe Schools” (Department of Education, 2003).
- List of pre- and post-test counselling centres.
- Information about youth-friendly clinics.
- Life Skills curriculum.
- “Ethics manual for SACE” by Ben Parker.
- “Our Young People Take It On” (Department of Health)

Refer to page 111 for contact details.

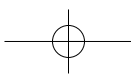
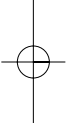
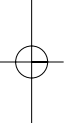
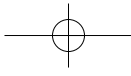


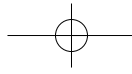
Caring and support for our learners



In this chapter you will:

- 1.** Find out more about how learners can be affected by HIV and AIDS.
- 2.** Understand the special needs of orphans.
- 3.** Find out what ill learners need.
- 4.** Understand the rights of learners with HIV.
- 5.** Know how to identify learners who need support.
- 6.** Look at ways that schools can create a caring environment.
- 7.** Look at ways to take action.





CHAPTER 3

Caring and support for our learners

1. Find out more about how learners can be affected by HIV and AIDS

In society we have to deal more and more with family members who are ill or die. In this chapter we look at the role of the school and the educator in dealing with affected and infected learners. Zama's story illustrates the problem of many children affected by HIV and AIDS.



Case study

"My name is Zama. I have been living with my two uncles. One is in jail, one was in hospital but they sent him back. My mother is in Durban. I last saw her when I was very young. No one is bringing money into the house. When I eat, I eat peanut butter, bread, tea. I am feeling very bad. I make my uncle food and I ask if he needs water. He doesn't want to eat, he just wants cigarettes and cool drink."



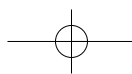
Zama is the only one looking after his uncle. "His wife used to look after him but she has left him. The traditional healer also visits but it is mostly me who helps him at night, and before and after school and on weekends. When I'm at school he is left alone. He got worse not long ago. Even early this year he was working. He was the one who used to bring us money."

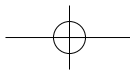
When Zama was asked whether his educator knew about how things are at home, he said no. He had also never been visited by a social worker.

Discuss



- What emotional needs does Zama have?
- What practical needs does he have?
- What kind of support do you think he needs most?





Emotional trauma

Zama is probably lonely and depressed. He seems to have very little support and protection in the world. Emotional suffering is probably the strongest effect of HIV and AIDS on children. Their worries can last for a long time as they watch their parents, friends, relatives or caretakers suffer. Some, like Zama, have to care for the dying. They have to find ways to comfort them. These children also suffer from anxiety. They may worry that they too are infected. They fear death and they may wonder where they will go when their parent or guardian dies. They may feel hopeless about the future.

Signs of depression can include:

- Tiredness
- Tearfulness
- Eating too little or too much
- Too much or too little sleep
- Not caring about appearance
- Lack of motivation
- Drop in school performance – poor marks
- Poor concentration and memory
- Withdrawal from others
- Feeling negative and uninterested
- Thinking about suicide.

To add to the suffering of children, families affected by HIV and AIDS are often judged and treated badly. So, instead of getting help and support, some children are met with silence. This adds to the depression and creates low self-worth.

Material suffering

Zama also needs material help. He is not getting proper food and probably needs clothes and toiletries. Orphaned children often have to work to support their brothers and sisters. Looking after the dying involves hard physical labour, including lifting and turning adults, bathing them and helping them to the toilet.

The struggle to get educated

Learners affected by HIV and AIDS can also find it difficult to attend school regularly. This is especially true for children whose parents are ill or who have died. It may be difficult for girls to go to school when they are needed at home to care for those who are sick. They also have to help care for other small children or work in the fields and carry water. They might have to care for younger children in a child-headed household. Such children may find it difficult to go to school, to find school fees or money for school uniforms. They may also be blamed because of someone who has been sick or died of AIDS.

Schools can help such learners to deal with their emotional problems and provide them with skills to make money and survive.

caretakers

- Abahlinzeka ngokunakekela
- versorgers
- Unogada
- Balebeledi

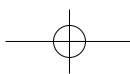
anxiety

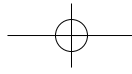
- ukuphatheka kabi emphefumulweni
- angs
- Ixhala/uvalo
- Go tlhobaela

Discuss



- What problems do learners affected by HIV and AIDS in your community have to deal with?





2. Understand the special needs of orphans

It is likely that in 2005 over one million children under 15 will have lost one parent to AIDS.^{vi} This creates new problems. In the past most orphans were taken care of by the extended family. Today families may find it difficult to cope with the numbers of children who need care. Orphans generally have similar problems to children affected by AIDS, but death brings many more problems.

- extended family**
- Umndeni omkhulu
 - uitgebreide gesin
 - Usapho olwengezelelelweyo
 - Lelapa le le okeditsweng

Dealing with grief

Many children don't have the opportunity to grieve properly. They may be separated from their brothers and sisters when they are put into foster homes. They may have to grieve in silence for their losses, because of the silence around HIV and AIDS. Their loss and the silent grieving can affect them for the rest of their lives.

- grieve**
- -lila/-zila
 - treur
 - Ukuzila
 - Utlwa-botlhoko/Ge lela

One way to help children to grieve is to talk to them about death. This has to happen over time. It must take into account the age and culture of the child. Grieving takes time. A child who is grieving needs patience and space.

Discuss



- How does my culture deal with death and dying?
- How can I and others around me help people to grieve?

Lack of care

Losing a loved one can make a child vulnerable to bad treatment from relatives and guardians. Sometimes families fight over the property of dead people and leave children without anything. They make children work and do not care for them properly. Some families speak badly about a parent who has died of AIDS. This makes the grief and anger even worse for the child.

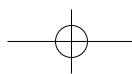
Uncertainty

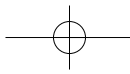
Death makes life uncertain for a child. Sometimes children are separated from the people they know. Some children may also be afraid that they will lose more people close to them. Children who do not get emotional support may find it difficult to deal with their feelings.

Discuss



- What problems do orphans in your community face?





3. Find out what ill learners need

Learners who are ill with AIDS have similar needs to any other person struggling with illness. However, because HIV attacks the immune system, they need to be especially careful to protect themselves from any infection. They may need the following help:

- Access to a clean and quiet sick bay where they can lie down if they feel sick during school time.
- Help with taking medicine.
- A more understanding approach to schoolwork if they miss classes and tests.
- A clean environment with access to safe drinking water, running water to wash their hands, healthy food preparation and clean toilets.
- A well-balanced diet.
- A safe and accepting environment.



PHOTOGRAPH: PictureNet Africa

Nkosi Johnson

4. Understand the rights of learners with HIV

The National Education Policy on HIV and AIDS looks after the rights of children. It states that:

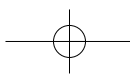
- No learner with, or thought to have HIV or AIDS, may be unfairly discriminated against.
- Learners with HIV should be treated in a just, sympathetic way.
- No learner should be refused admission to, or continued attendance, at school on account of HIV.
- The testing of learners for HIV as a condition for admission to, or continued attendance, at school is not allowed.
- Learners with HIV are expected to attend classes in accordance with legal requirements for as long as they are able to function effectively.

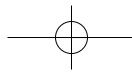
(Extracts from National Policy on HIV/AIDS for Learners in Public Schools)

Discuss



- Do you know who the sick learners at your school are? Do you know what they need?





5. Know how to identify learners who need support

The first step is to find out who needs support. To do this the school needs to collect information about learners in a confidential and unharmed way. This could be done through a school audit.

Activity – Do your own school audit

The purpose of this exercise is to find out the following:

- How many vulnerable learners there are and what problems they experience.
- Monitor what is happening to vulnerable learners and find out if they are being referred to services offered by the DSD, DOH or other local or community organisations for care and support.

Step 1: Ask each educator to identify learners who are vulnerable or who have special needs. Encourage educators to do this as confidentially, sensitively and ethically as possible. For example they could ask learners in their class who may be experiencing any of the following: death of a parent, difficulties living with relatives, abuse, alcoholism, neglect, HIV and AIDS related problems, to come and talk to them privately about their problems. Educators could also ask learners to come and tell them of fellow learners who are experiencing difficulties who may find it difficult to tell the educator themselves.

Step 2: Ask educators to fill in an audit sheet like the one shown on page 48.

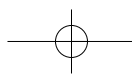
Step 3: Once these sheets are completed, educators should pass them on to their SMT.

Step 4: The SMT should draw up one combined list from all the separate class audits. They should decide on the most common and important problems.

Step 5: The SMT should hold a meeting with SGB, colleagues and parents to discuss the kinds of problems that children are experiencing. They should also discuss ways to deal with these problems e.g. putting child headed households in touch with a feeding scheme, the DSD or a faith based organisation.

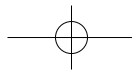
Step 6: The SMT should agree to repeat this exercise every six months.

Step 7: Design and implement the audit every year on an agreed date. This will keep information on learners up to date.



You can use a form like this for your audit.

Problems faced by learners										
Grade 1	Names	Has lost parent	Lives with relatives	Poverty, unemployment	Suspected abuse/emotional neglect	Is chronically ill	Is often absent	Other problems and comments	Action	Referral
	April, Tumi		x	x	x			Guardian disclose to staff	Make appointment with school counsellor	Dept. of Social Development
	Brink, Sue	x	x			x	x	Seems to have accepted death of father	Internal guardian	Local clinic
	Brown, Jon	x						Seems a happy, well-balanced boy	Continue monitoring	N/A
	Cele, Thabo									



6. Look at ways for schools to create a caring environment

Helping all those affected learners seems a huge job. But Zama's story can teach us a few simple and practical actions.

For example

- The school could help Zama access a grant or get food parcels.
- It could also provide an educator who is trained in basic counselling. The educator can listen to and support him regularly.
- A school can become one of a number of circles of support for learners and educators. It can network with other government and non-governmental organisations.
- A school can help to identify learners at risk, and ensure that they are supported.



Schools can provide spiritual support for traumatised learners

Spiritual support can bring meaning into the life of such learners. For example:

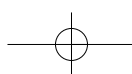
- A school could invite spiritual leaders to be part of the team that deals with learner support.
- Spiritual leaders could also be asked to come and speak at assembly.
- Lighting a candle and saying a prayer at assembly is a simple way of showing you care.

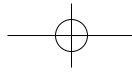
Schools can get material support for affected learners

Whilst schools themselves cannot provide material support, they can network and get access to material support for learners in need.

This kind of support was shown by some learners from Inkonjane School in Meadowlands, Soweto. Many come from very poor families themselves. Yet, when they heard of the suffering of the AIDS orphans in rural Ingwavuma in KwaZulu-Natal, they were prepared to go without bread to help them. The learners collected enough money, food and clothes to fill a bakkie and take it there. Two learners went along to hand over the goods and to express their love and care.

(Ref. "Our Young People Take It On".)





Families should be encouraged to deal with their financial problems in the following ways:

- Poor, HIV affected families should apply for exemption from paying school fees. Every school principal and chair of the SGB must assist with this process. If they do not, families should contact the local district office in order to get help.
- The school could start a fund to help families in need. There are many fun and meaningful ways to raise money.
- Schools should link up with the national nutrition programme.
- Schools could ask businesses to donate school uniforms.

exemption

- Ukubonelela
- vrystelling
- Ukukhululwa ukuba ungakwenzi okuthile
- Thebolo

Schools can provide emotional support for traumatised learners

Because of the AIDS epidemic, it is important that every educator learns basic counselling skills. Here are some simple ways to help a learner who is suffering:

- Find a quiet place where you will not be disturbed.
- Make sure that the learner is the centre of your attention. Be relaxed. Make eye contact. Lean forward slightly.
- Listen carefully so that you understand the learner's point of view and feelings.
- Ask for more information, opinions and feelings. Encourage the learner to tell you more by asking questions.
- Don't interrupt or judge. Control your own emotions. Don't question the learner too strongly. Don't be afraid of silence.^{vii}

(Adapted from "HIV&AIDS: Care and Support of Affected and Infected Learners". DoH)

Set up a 'listening hour' after school. Learners can talk to a sympathetic educator who will listen and allow them to 'offload' their problems. Also start a mentoring programme, where educators with counselling skills could offer help to learners. The school audit could help you to find out who these learners are. Mentors could also be responsible for referring learners with special needs. If appropriate, certain learners could also learn counselling skills themselves and visit affected learners.

mentoring programme

- Uhlelo lokujwayeza
- gidsprogram
- Inkqubo yokucebisi
- Lenaane la kgakololo

Schools can strengthen their support structure

Every school needs to have a structure or team in place. (See page 29 to get some ideas about a Youth Peer Health Team.) Such a team could help in various ways. It could refer learners, find practical solutions to problems and access support that is already available. A team like this could help to register orphans and access subsidies, grants or food parcels. It could find out which families would benefit from home-care services and put them in touch with the right organisations.

access subsidies

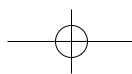
- Ukuxhasa osizweni lokufinyelela kokuthile
- verkryging van subsidies
- Ukuncedisa ekufuneni izibonelelo
- Nna le thuso ya matlole

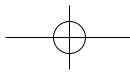


Case study

Gahlanso Primary in Tembisa has a School Based Support Team (SBST). It is made up of volunteers from the community and Life Orientation educators at the school.

They teach learners life skills and provide HIV and AIDS education. Their major target is child abuse. "Many of our kids are abused ... We won't take that: we want this school to be the safest place for kids," says Austin Ledwaba, a member of the SBST. If necessary, the SBST members visit learners at their homes. Parents living with HIV and AIDS are given support, e.g. they are shown how to approach the SGB for exemption from school fees.





Activity - A safety survey for learners

All learners, need a safe and stable environment to learn in. To get information about the safety of your school do a safety survey like the one below. Protect the learners by telling them that they do not have to fill in their names. They need only indicate their gender and grade.

The survey outline shows how safe learners feel at school.

Boy/Girl: _____

Grade: _____

How safe do you feel in these areas?

- Classroom with educator
- Classroom without educator
- Passages
- Toilets
- Play area
- Sports ground
- Outside school gates

SAFE

UNSAFE

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

How safe do you feel at these times?

- During lessons
- During break
- Coming to school
- During extra-mural activities
- Waiting after school
- Going home

<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

How safe do you feel with:

- Educators from the school
- Boys from your class
- Girls from your class
- Older boys from the school
- Older girls from the school
- Younger boys from the school
- Younger girls from the school

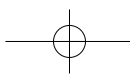
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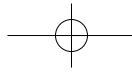
Is there any game/activity at the school that makes you feel unsafe?

Discuss



- What should the SGB/SMT say in our policy about what we aim to do about:
 - Our willingness to make our school more caring?
 - Our willingness to make our school safer?
 - Our willingness to make our school environment healthier?





How can educators show that they care?

Promote care in the classroom

Find ways to promote tolerance and respect in your classroom. A positive classroom atmosphere helps learners do well.

Educators can do things like

- Allowing learners to express their feelings of sadness, loss and hope through drawing, writing and drama.
- Teaching entrepreneurial skills so that learners can help support their family financially.
- Helping learners to speak about their feelings of anger, sadness and grief. They can also invite a speaker to talk about feelings.



Discuss



- What should the SGB/SMT/Staff/RLC say in our policy about what we aim to do in showing learners that we care?

tolerance

- Ukubekezelela
- verdraagsaamheid
- Ukunyamezela
- Boitshoko

entrepreneurial

- hwebayo
- ondernemend
- Ukuziqalela ishishini ellilelakho
- Bogwebi

"We must remember that HIV infected or affected learners have the same kinds of hopes, dreams and desires that all learners have. They have feelings of sadness, worry, anger, excitement and joy. They want to have friends, play games and want to be treated like any other learner. They also want to be admired and gain recognition for something well done... Treating the learner differently will intensify his/her feelings of being different and have a negative effect on his/her self esteem."

(DoH HIV/AIDS: Care and Support of Infected and Affected Learners.)

Provide academic support for ill learners

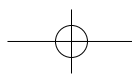
Educators can help ill learners with their work in the following ways:

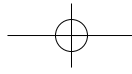
- Letting an ill learner sit near the door.
- Allowing ill learners to take textbooks home so that they can study there if they are unexpectedly sick.
- Helping learners to organise the work they have to catch up on.
- Involving their colleagues and friends in helping them.

Discuss



- What should the SGB/SMT/Staff/RLC say in our policy about what we aim to do in finding useful ways to provide academic support to ill learners?





How can learners care for each other?

Educators can encourage learners to help one another

- Educators could organise voluntary homework buddies. Academically successful learners could help classmates who are often absent. They can help them to catch up with class work and homework.
- At a youth club or an AIDS club at your school, learners could organise various activities. Some ideas are: start a cooking club where learners prepare cheap healthy meals for needy learners, or run a home-care club where they learn the basic skills of caring for ill people. Youth clubs could also teach the skills of home-care, and raise funds to give material support.
- Learners living near ill or affected colleagues can visit them and offer academic or practical support.

homework buddies

- Owenza nabo umsebenzi wesikole owenziwa ekhaya
- huiswerkmaats
- Amaqabane oncedisana nawo xa usenza umsebenzi wesikole ekhaya
- Badirisani-ba-legae



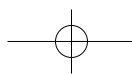
Discuss

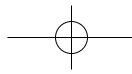


- What should the SGB/ SMT/ Staff/ RCL say in our policy about what we aim to do in terms of learners making the school a more caring place?

Activity – Go back and work on your HIV and AIDS policy

- Go back to the template on page 10 and fill in what you aim to do about Priority 2: Providing care and support for learners.





7. Look at ways to take action

A school community can respond to many of the problems we have raised.

Here are some actions that deal with supporting learners affected and infected with HIV and AIDS.

Priority 2: Care and support for learners - A summary of issues

In this chapter we discussed five main areas. These are:

1. Creating a caring school:

For example

- Providing spiritual, material and emotional support to affected and infected learners.
- Strengthening support structures in the school and putting learners or their parents in touch with available support.

2. Creating a safe school:

For example

- Doing a survey to find out how safe learners feel in the school and then acting on the result of the survey.

3. Creating a healthy school:

For example

- Looking carefully at the school to find out how to improve the health of learners.

4. Creating a caring classroom:

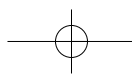
For example

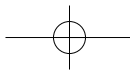
- Building the self-esteem of learners and helping them to deal with emotional problems.
- Providing academic support for ill and affected learners.

5. Making use of peer support:

For example

- Creating a system of homework buddies and peer teaching.





Action 1 – Think differently

In what ways can you use the examples above and your own creative ideas to provide care and support for learners?

Action 2 – Find out about services and support

Find out about the care and support services that are available. They will help you to care for learners and improve school safety and health. Then make a list of these services, including contact details, and make sure that the school community has access to it.



“Teachers are not social workers ... Nevertheless, they can, with others, provide care and support for those affected with HIV and AIDS ... particularly orphans. It is easy to create a culture of care in schools. You do not have to be a social worker to have a culture of care in schools, to ensure a secure environment ... Central to teaching in a secure environment, is observing zero tolerance for violence or abuse in the school setting.”

Professor Kader Asmal, MP, Minister of Education

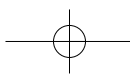
zero tolerance

- Ukungabekezeleli nhlobo
- glad nie geduld word nie
- Ukungabi nalusini
- Go iletsa gothelele

Action 3 – Look to other schools for ideas

Look at Rebone Primary’s action plan on the next 2 pages. They already have a School Based Support Team in place that deals with safety and health issues. They have decided to delay action on health and safety until they have done an audit. A very important part of their action plan is to form a Youth Peer Health Team (YPHT) which will soon start functioning. After six months they will plan a meeting to check that the YPHT works well.

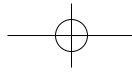
- What can your school learn from this example?
- What are they doing well?
- What would you do differently?



Action 3 – Look to other schools for ideas

HIV and AIDS ACTION PLAN OF Rebone Primary for 2003				
Priority 2: Care and support of affected and infected learners				
Date: 10 January				
Participants: SGB, SMT, YPHT				
Action	Activities	Who is responsible?	When?	Budget?
1. Create a Youth Peer Health Team (YPHT) that can solve and monitor learner problems.	a. Decide who should be involved. b. Decide how the Youth Peer Health Team (YPHT) functions and what its responsibilities are. c. Find out what help/training you can get. d. Begin monthly problem-solving meetings. e. Feedback and monitoring meeting. f. Plan action for the rest of the year.	a. School Based Support Team (SBST). b. SBST and the new YPHT. c. Mr Walter. d. YPHT e. SGB, SBST and YPHT.	a. 1 March. b. 10 March. c. 18 March. d. End of April. e. 19 June.	Access to emergency funds for learners in need. Will discuss budget needs at meeting on 19 June.
2. Do School Safety Audit	a. Meet with staff to get co-operation. b. Carry out audit in school. c. Summarise and analyse results. d. Hold feedback session and plan action where necessary.	a. SBST and staff. b. SBST and staff. c. SBST. d. SBST, staff and SGB.	a. 2 March. b. 10 March. c. By 20 March. d. 21 March.	Photocopying of 363 surveys.
3. Do School Health Audit	Do a health audit of school and draw up an action plan.	SBST and SGB.	28 February.	From results of audit see if budget is needed.
4. Hold community awareness workshop around needs of infected and affected learners.	a. Send out invitations and plan workshop; invite guest speaker. b. Hold workshop.	a. SBST and SGB. b. Parents, SBST and SGB.	a. By 4 May. b. 20 May.	Catering R800

Resources needed	Who will support us?	Who/ how will we monitor our progress?	Indicators of success
<p>1. Phone calls and visits.</p> <p>2. Contacts.</p>	<p>District Office ELSEN team, NGOs, DoH, local businesses for donations of food and clothing for needy.</p>	<p>Invite District Support Team members, and local service providers to feedback meeting on 19 of June</p>	<p>a. A YPHT is formed.</p> <p>b. The YPHT is clear about its duties and functions.</p> <p>c. The YPHT has a list of support services they can contact.</p> <p>d. Regular monthly meetings are held where learner problems are discussed and solved</p> <p>e. Learners and educators become aware that there is support from the YPHT.</p> <p>f. The meetings has cleared up any problems. The YPHT has a clear sense of the way forward.</p>
	<p>a. Get help with analysis and possible solutions from district officials and CPU.</p> <p>b. Invite speaker from DoE on safe schools.</p>	<p>Feedback meeting with SBST and SGB after staff meeting – have we met our deadlines?</p>	<p>a. Staff is keen to help with the audit.</p> <p>b. Audit is carried out.</p> <p>c. A summary of the results shows the way forward.</p> <p>d. An action plan is drawn up.</p>
	<p>Contact a nutritionist, and a district nurse to help with the audit.</p>	<p>SBST to give feedback at SGB meeting.</p>	<p>We know where the weaknesses of our school are and plan how to act on them.</p>
<p>3. Stationery for invitations.</p> <p>4. Catering and school hall</p> <p>5. A gift for the guest speaker</p>	<p>a. Contact the department to see whether they know of any good speakers</p> <p>b. Invite District AIDS co-ordinator and social worker to help plan and facilitate the workshop.</p> <p>c. Invite the local newspapers.</p>	<p>A report on the workshop will be presented to the District HIV/AIDS co-ordinator.</p>	<p>a. There is a good turnout at the workshop</p> <p>b. Participants indicated a change of attitude. They want to become involved in local home-care programmes.</p>

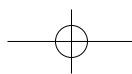


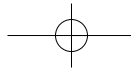
Activity - Work on your Action Plan.

Work on the part of your action plan that deals with Priority 2: Care and support for affected and infected learners.

- Make sure you cover at least four of the five issues summarised on page 54.
- Decide what the priorities are for your school. For instance, a poor school in an unsafe area should create a safe and healthy school (issues 2 and 3). Where safety and health are not so important, focus more on creating a caring classroom and making use of peer support (issues 4 and 5).
- Remember your aim is to create a more caring school for everybody.
- You can use the example of Rebone Primary on the previous pages to guide you.

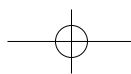
(Refer to page 38 for more detail on how to fill in the template.)

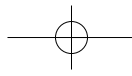




Activity - Work on your Action Plan.

<p>HIV and AIDS ACTION PLAN OF _____ for 200_</p> <p>Priority 2: Care and support of affected and infected learners</p>								
<p>Date: _____</p> <p>Participants: _____</p>								
Action	Activities	Who is responsible?	When?	Budget?	Resources needed	Who will support us?	Who/how will we monitor our progress?	Indicators of success





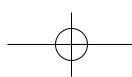
Summary

In this chapter you:

1. Found out more about how learners are affected by HIV and AIDS.
2. Understood the special needs of orphans.
3. Found out what ill learners need.
4. Understood the rights of learners with HIV.
5. Learned about ways to identify learners who need support.
6. Looked at ways to create a caring environment.
7. Looked at ways to take action.

List of useful resources:

- “HIV/AIDS: Care and Support of Affected and Infected Learners” (Department of Health)
- “Courage to Care” by G.Winkler
- “Signposts for Safe Schools” (DOE), 2003
- “Conference on HIV/AIDS and the Education Sector: Report and Sector Plan of Action”
- Soul City Booklets
 - Grants for Children
 - Choose Life – Living with HIV and AIDS in our World
 - Living Positively with HIV and AIDS
 - Talking about HIV and AIDS
 - AIDS in our community
 - George’s Story
 - Simanga’s Choice
 - Soul City Workbooks



Caring for our educators

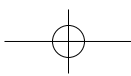
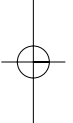
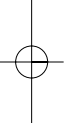
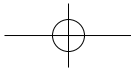


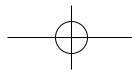
In this chapter you will:

- 1.** Find out about how educators can be affected by HIV and AIDS.
- 2.** Think more deeply about disclosure.
- 3.** Learn more about the rights of educators.
- 4.** Understand the responsibilities of educators.
- 5.** Understand the needs of educators living with HIV.
- 6.** Think of ways in which schools can respond to educators' needs.
- 7.** Find possible solutions.
- 8.** Find ways to take action.

disclosure

- Ukudalula
- bekendmaking
- Ukuveza elubala
- Go senola/Go upolola





CHAPTER 4

Caring for our educators

1. Find out about how educators can be affected by HIV and AIDS



Case study

Adeline Mangcu was diagnosed with HIV in 1994. On her way home from the hospital she told everybody she met about what she had just found out. "I felt I needed them to know that this is not somebody else's disease. We were lied to.

Anyone can get HIV. The way it was presented to us, we thought it was definitely not a black thing. We heard about gay men getting it ... I felt it was my duty to tell people. I mean I'm a teacher. How could I be so good at being a teacher and be so bad at motivating people on the correct way of doing things and teaching? I don't know if it helped to tell people that day, but I know it got me a lot of enemies. I was the second black woman to come out and no one wanted to hear about it ... some people actually lose their families if they speak openly about AIDS. Not that they say 'Don't come to the house anymore', but you lose the support that is really needed."

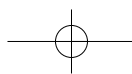
(from "Courage to Care", G. Winkler)

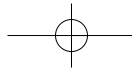


Discuss



- Should Adeline have disclosed that she is HIV positive?
- As an educator, was she acting in a responsible way?
- How do you think her colleagues at school responded?
- Do you think she is a good role model for the learners at her school?





2. Think more deeply about disclosure

The law does not allow educators or any other employees to be forced to have HIV tests. To prevent the spread of HIV it is important that as many people as possible know their HIV status. Disclosing if you are HIV positive or not can be a powerful tool in preventing the spread of HIV. It helps the infected person to get the support he or she needs. But, as Adeline's story shows, it is not always an easy thing to do. Disclosure is a process, not an event where you tell the whole world. Once you decide on disclosure, it is probably sensible to go for counselling first. You should first tell the people that you trust. Then it might be helpful to speak to the people who need to know, for example, your principal or your Head of Department. According to the Constitution nobody other than yourself is allowed to disclose your HIV status. Parents can make the decision for children under the age of 14. The HIV sufferer should know that what is said will be confidential. The person who breaks a confidence may be legally prosecuted. The act of disclosure can lead to emotional healing and give a sense of purpose.

Educators like Adeline play an important role in education and should be given much support. An open atmosphere at school makes it easier for educators to disclose. Such an atmosphere should have:

- Easy access to HIV testing and counselling.
- Colleagues who respect confidentiality and act in a way that inspires trust.
- A good knowledge of human rights.
- A supportive environment.

"Telling people has actually brought me back to the real me. I feel I can conquer this through power and hope."

Bruce Radebe, "Living with HIV," 22 years old.

3. Learn more about the rights of educators

The law protects the right of educators and learners living with AIDS:

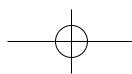
- No person may be unfairly discriminated against directly or indirectly.
- Everybody affected by HIV/AIDS should be treated fairly and sympathetically.
- To prevent discrimination, all learners, students and educators should be educated about fundamental human rights as contained in the Constitution of the Republic of South Africa, 1996.

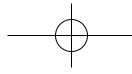
The law also protects the rights of educators to work:

- Educators may not be denied the right to be appointed in a post, to teach or to be promoted on account of their HIV status. HIV status may not be a reason for dismissal of an educator.
- Learners, students and educators may not be tested for HIV infection. The testing of educators for HIV as a condition for appointment or continued work is not allowed.

HIV status

- Ukuphathwa yiNgculazi
- MIV status
- Ubume bakho malunga nentsholongwane esisandulela gawulayo
- Maemo a HIV





Protection against discrimination

Some educators may not want to work with an HIV positive colleague. Some learners might refuse teaching from that educator. Then they need to be given accurate information about HIV. They can also be counselled. The principal and educators will have to resolve the situation if the learner or colleague still refuses.

Protection of leave

Probably the most serious effect of the HIV epidemic on the education sector is increased absenteeism. It is the role of the SGB to put relevant procedures in place for each school. The SGB will also have to decide, together with the educator, a medical practitioner and the district office, when it is time for boarding. Normal sick leave is 36 working days with full pay over three years.

- The Head of Department can decide to give a maximum of 30 more consecutive days of leave with full pay.
- An educator who has been found to be permanently incapacitated but can still give service, can be re-deployed. He or she can be given a less demanding job that still uses his or her abilities.
- An educator who adopts a child younger than two years qualifies for adoption leave of 45 days.
- An educator can get three working days leave if a spouse, partner or child is ill.
- An educator can get five days leave if a spouse, partner or child dies.^{ix}

boarding

- Ukubhoda
- mediese ongeskiktheid
- ukunqunyanyiswa ngenxa yokugula
- Go bota

permanently incapacitated

- -khubazeke unomphela
- permanente ongeskiktheid
- Akanakho ukusebenza ubomi bakhe bonke
- Go tlhokisa maatla ga leruri

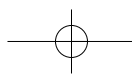
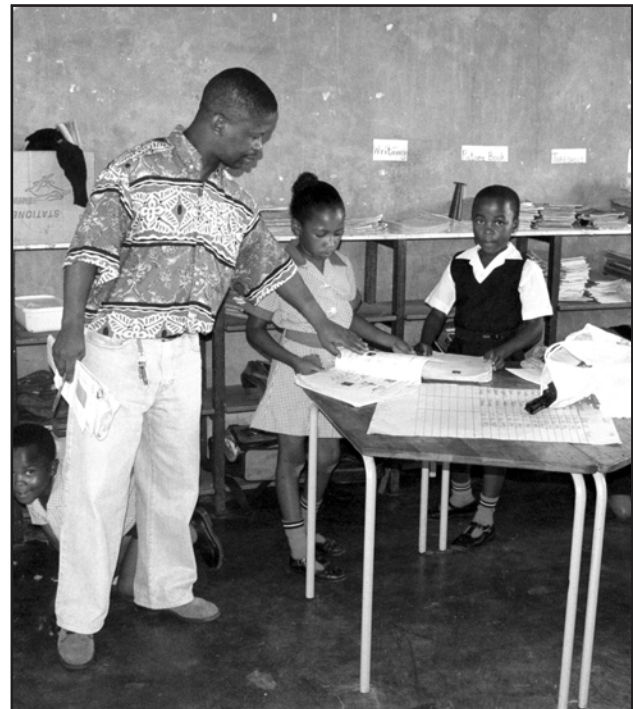
re-deployed

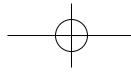
- -phakwe kwenye indayo
- geherontplooi
- Utshintshelwa kwenye indawo ngokomsebenzi
- Go isiwa kwa tirong e nngwe

4. Understand the responsibilities of educators

The HIV epidemic forces all of us, including educators, to look at our own behaviour. We cannot expect learners to change their behaviour unless educators themselves are models of good behaviour. Something we do in private becomes a public issue. This can be very uncomfortable. What does this mean for us as educators?

- It means that our own sexual relationships must be safe and respectful.
- It means that relationships among staff members must be respectful and supportive.
- It means that we must not tolerate or have relationships with our learners.
- It means that male educators, in particular, must model caring behaviour. In a society filled with violence it is important for boys to solve problems in a non-violent way.
- It also requires that the school, in partnership with unions, the Department of Education, and the South African Council for Educators, strictly implements the educator code of conduct.





5. Understand the needs of educators living with HIV

Physical and medical needs

An educator infected with HIV lives with a body that constantly struggles to fight disease and illness. There are many ways to help the body's immune system. These include:

- Working in a healthy and supportive environment.
- Preventing common illnesses through immunisation and taking medicines.
- Eating in a healthy way.
- Using medicines, including anti-retrovirals and vitamin supplements.
- Avoiding unnecessary stress.
- Exercising regularly to reduce stress and keep strong and fit.
- Leading an active life and making positive plans for the future.

HIV infected educators who develop full-blown AIDS will feel ill more often during working hours. Like other ill educators, they will need time off work, or a place to lie down for a while. If possible, the school should provide a bed in a quiet and safe place. Educators who are often ill also need medical and emotional support.

immunisation

- Ukugoma
- immunisatie
- ugono
- Tshoutiso

anti-retrovirals and vitamin supplements

- Okunikeza amasotsha omzimba amandla nezegezeelo zamavithamini
- anti-retrovirale en vitamienaanvullings
- Amachiza alwa nogawulayo kunye nentsholongwane yakhe kunye neepilisi ezongeza ubukho ebevithamini emzimbeni
- Diritibatsi tsa anti-retrovirals le divithamine tsa tlaletso

Emotional and social support

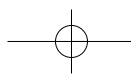
Educators have to take over some classes when other educators are ill. This can put an additional load on the staff. It can cause bitterness and should be dealt with by the school in a sympathetic way. Sick educators may also feel the following:

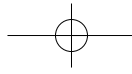
- Feelings of depression and hopelessness. Educators may lose interest in their work and feel that nothing really matters.
- Feelings of loneliness and being on their own. This is made worse when there is no support.
- Worry about the future of those they will leave behind, especially children or a partner.
- Anger or guilt towards a spouse or the person who infected them or whom they infected.
- A feeling of spiritual desolation or being abandoned by God – “How could this happen to me?”

These educators need access to counselling, support from colleagues and spiritual support.

spiritual desolation or being abandoned

- Ukunganakekelwa ngokomphefumulo noma ukulahlwa
- geestelike vereensaming of verlatting
- Ukudakumba umphefumlo kunye ukubukulwa
- Go tlogelwa ole nosi kgotsa go ikgatholosiwa





Dealing with grief

Educators will almost certainly deal with death. They will experience the loss of a loved one, a colleague or friend, the family members of their learners, or learners they know. They will feel strong emotions that can be described in the following ways:

Stage 1: Shock or disbelief (It can't be true). Bewilderment (What is happening?); or confusion (What should I do?).

Stage 2: Anger, resentment (Why me?); guilt (I didn't do enough...); fear (I won't be able to cope...); panic (There is no way out...), and depression.

Stage 3: Acceptance and getting used to the situation. This can take a long time during which there can be a feeling of depression.

Dealing with grief requires firm and caring leadership

- Provide educators with practical information: get speakers to talk about death benefits and how to draw up a will. You may also want to set up a funeral society and fund.
- Give educators spiritual support. Invite religious leaders to speak about death or hold memorial services at the school. Light candles during assembly to remember the death of a beloved colleague or learner. Make sure that learners are part of the memorial service. You may also want to invite the bereaved family.
- Provide access to counselling. Find out where to get counselling. People who are dying often have the need to speak openly about their fears and anxieties. Those who are left behind will also benefit from counselling.
- Link educators with support organisations. Most hospitals and clinics will send dying patients home. Home-based care can be very hard work but it can also be a good way to deal with death. Invite an organisation such as Hospice to show colleagues how to care for the dying. It can also give a sense of hope.
- Create a wall of remembrance for educators or learners who have died. Plant a tree and provide a bench where anyone can sit and remember.

bewilderment

- Ukuxakeka ngokwenqondo
- verbystering
- Ukudideka
- Go baka tathego

resentment

- Ukuzisola
- wrewel
- Ukucaphukela
- Go tenega

memorial services

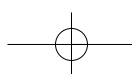
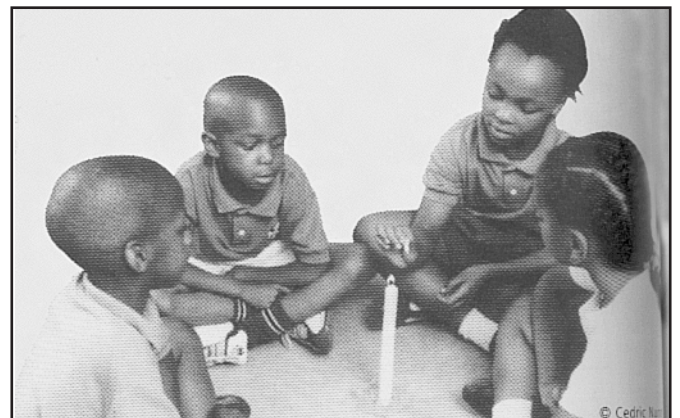
- Inkonzo yesikhumbuzo
- gedenkdieste
- Inkonzo yesikhumbuzo songasekhoyo
- Tirelo ya Matshedisio

bereaved

- oshonelwe
- bedroef
- Ababhujelweyo
- Ba ba utlwiweng bothoko

wall of remembrance

- Isikhumbuzo
- gedenkmuur
- Udonga lwesikhumbuzo
- Lobota lwa dikgopotso



6. Think of ways in which schools can respond to educator needs



“A first requirement in supporting carers working in the field of AIDS is to acknowledge formally that their work is inherently stressful, and that feelings of distress are a legitimate reaction to their experiences, rather than signs of personal weakness or lack of professionalism. Bottled-up feelings lead almost inevitably to burnout, and carers need to feel confident and free to express doubts and distress and to seek timely help.”

Educator stress can cause demotivation and absenteeism. It can bring on illnesses such as high blood pressure, diabetes and obesity. It can also lead to alcohol and drug-abuse. Stress also lowers our levels of tolerance, making it harder for educators to be fair, caring and good role models.

One result of the HIV epidemic is that educators sometimes have to take on the role of care-givers and community facilitators. Educators do not have to become social workers. It does mean that you need to be caring and know where to get professional support. To do this you have to:

- Respond to social problems in the school.
- Look at your own relationships and the example they set for the children in your care. This can be a very important but also a very stressful challenge.

Any HIV and AIDS programme at your school has to support the educator; even if none of the educators at your school have disclosed that they are HIV positive.

Help to reinforce educators positively

One of the most important ways to release stress is to know the importance of your work. School is often the only place where children get care and love. Educators can make a very powerful contribution to learners' lives, especially if they are helpful and show that they believe in them. Such educators need to be rewarded in some way by their learners and by the whole school community.

Provide educators with knowledge that is empowering

Knowledge and training in counselling and helping skills can give educators confidence. They will feel that they can make a difference in the lives of learners. This will also help to take away the hopeless feeling of not knowing what to do.

inherently

- -hlangene, -hambisanayo
- inherente/ingebore
- Yeyemvelo/isegazini
- Ntle le go kgaogana

bottled-up feelings

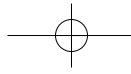
- Imizwa engaphimisiwe
- opgekropte gevoelens
- Umvandedwa
- Maikutlo aa sa itumediseng

burnout

- -khathala
- uitbranding
- Ukuzibulala
- Go shwa lore

diabetes and obesity

- Isifo sikashukela nesokukhuluphala kakhulu
- suikersiekte/diabetes en obesiteit
- Isifo seswekile kunye nesifo sokutyeba kakhulu
- Bolwetsi jwa sukiri le go nona thata kgotsa go akola thata



Make sure that educators have someone to talk to

A powerful way to relieve stress is to be able to talk about feelings and problems. So it is important that every educator has access to some professional help from either a doctor, psychologist, spiritual leader or counsellor. Forming support groups will build healthy relationships among colleagues. People will feel good when they share ideas and solve problems as a team.

psychologist

- Isazi sokusebenza komqondo
- sielkundige
- Igcisa elisebenza ngengqondo
- Ngaka ya saekoloji

Encourage educators to manage their own stress levels

Here are some practical ways for educators to manage their stress levels:

- Get enough sleep.
- Eat healthy food that is high in fibre and low in fat and sugar.
- Don't drink too much coffee or tea.
- Get regular physical exercise, even if it is just a half hour walk in the afternoon.
- Practise relaxation exercises such as deep breathing.
- Don't abuse alcohol because it weakens the body and reduces your ability to deal with stress. Contact Alcoholics Anonymous for support.
- Reduce or stop smoking. Smoking doesn't relieve stress – it actually increases it because nicotine is a powerful stimulant. Smokers could form a support group to help them to stop.
- Take time out to enjoy activities with friends and family. Play and laughter are great stress relievers.
- Make time for yourself to do the things you enjoy.
- Engage in spiritual activities such as praying, making music or going to church.

high in fibre

- -nomhadlahadiso omningi
- veselyk
- Ukutya okurhabaxa kakhulu (njengqolowa)
- E na le thale ele ntsi

nicotine is a powerful stimulant

- iNicotine iyisikhuthazi esinamandla
- nikotien is 'n sterk prikkelmiddel
- Inikothini, esisiyobisi esifunyanwa ecubeni, sisivuseleli esinamandla
- Nikotine e maatla mo go tsiboseng kgotsa no go thuseng go itharabologelwa

Encourage educators to create an Educator Support Team

To create a caring environment you may want to establish an Educator Support Team (EST). Its function would be to support educators, and to create a safe environment. You could invite a spiritual leader or a health worker to join the team. The team should find practical ways to help educators.

Management and leadership issues have to be dealt with by your SGB. Make sure the EST does not become a staff grievances committee. Its function should be to plan activities that can help educators in their role as care-givers.

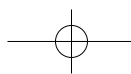
Here are some examples of the kinds of things an EST may want to try:

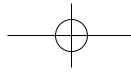
- Find out where educators can get help. Make a list and share information about all the service providers in your area.
- Invite speakers for monthly staff workshops. Topics could include managing personal finances, relaxation techniques, personal relationships, coping with depression, addiction and losing weight. Provide a box into which educators can put suggestions for future speakers.
- Start a walking club, an educators' choir, book club or a drama group.



addiction

- Ubugqila
- verslawing
- Ukuba likhoboka lento ethile
- Tshwakgolo ya dritibatsi





7. Find possible solutions

Build support amongst staff

A supportive atmosphere among members of staff is very important. It can motivate educators working under difficult conditions and can help with depression. Staff relationships are like other relationships. Each person has to take responsibility for his or her behaviour and everybody has to make it work. Below are examples of typical positive and negative behaviour patterns among colleagues.

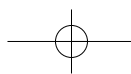


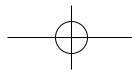
Positive, constructive behaviour	Negative, destructive behaviour
<p>Supportive staff:</p> <ul style="list-style-type: none"> ■ Staff has a common sense of purpose. Everybody works together to achieve this purpose. ■ Members of staff are happy about each other's achievement, and support each other during difficult times. ■ There is a focus on similarities between people and difference is tolerated and welcomed. ■ Members of staff trust and respect each other. They listen carefully to each other. ■ There is very little gossiping. Things that are said in confidence are safe. ■ Staff members are sensitive to the way they communicate. 	<p>The divided staff:</p> <ul style="list-style-type: none"> ■ Staff form groups which don't really speak to each other. There is clear division between men and women, old and young, and among different cultures. ■ People from different unions or political viewpoints do not speak to each other. ■ Staff gossip and judge one another. ■ Groups often cover for each other. There is a general atmosphere of mistrust. ■ There is often anger, blaming and jealousy. ■ Staff may try to undermine positive changes.
<p>Add your own ideas:</p>	<p>Add your own ideas:</p>

Discuss



- As an SMT and staff member what should you say about how to be more supportive of each other?





Build supportive and appreciative leadership

School managers should be aware of how they think about their staff. Do they have negative or positive attitudes? Do they notice negative behaviour more quickly than positive behaviour? Are they so stressed that they forget to acknowledge the stress their staff is under?

Ideas for the SGB

- Write a letter of appreciation to each educator for the work he or she has done.
- Hold a tea for staff at the end of the term.
- Organise a small budget for stress management. Use it to get speakers, or for an activity such as a fun walk.

Ideas for the district office

- Organise an 'Educator of the Year' award in your area. Have different categories: e.g. Most caring educator; educator working against HIV and AIDS, etc.

Form a strong, committed School Management Team

One of the important roles of the SMT is to create a caring school where educators feel supported and acknowledged. Here are some useful questions to guide you:

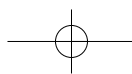
- Do you have an open door policy? Do you listen to educators?
- Does everybody feel equally acknowledged on your staff?
- What is your role in reducing educator stress?
- Do you set a good example in supporting your colleagues?
- What role do you play in promoting support among colleagues?

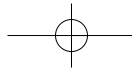


Discuss



- As an SMT what should you say about your willingness to be supportive and to build positive relationships with fellow staff members?





Create an SGB with vision

The role of the SGB is to change the idea of a caring school into a reality. To check that you are doing this, answer these questions:

- In what ways are we already a caring school?
- In what ways can we become more of a caring school?
- What opportunities do we have to be more supportive of our staff?
- What threatens our ability to be more supportive of our staff?
- How can we make a caring school part of our school development plan and mission?

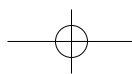
Discuss

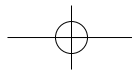


- As an SGB what should you say about your willingness to create a school that is more supportive of your staff?

Activity - Work on your HIV and AIDS policy

Now go back to the template on page 12 in Chapter 1 and write what you aim to do about Priority 4: Care and support for educators.





8. Find ways to take action

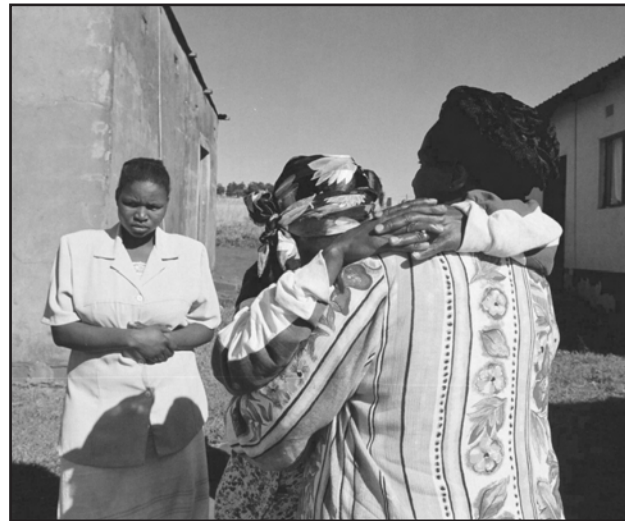
Before you draw up an action plan you need to find out who will take responsibility for implementing it. You need to ask yourselves the following questions:

- Are you going to set up an Educator Support Team or is there already a structure in place?
- If you are going to set up an Educator Support Team, who will be on it?
 - Mainly educators?
 - School managers?
 - Members of the SGB?
 - Someone from the district?

Priority 3: Care and support for educators - A summary of issues

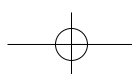
In this chapter we discussed many ways of providing care and support for educators:

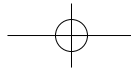
- Creating an open school where staff model positive relationships for learners.
- Being aware of human rights.
- Creating an environment that makes people feel able to disclose.
- Being aware of the physical, medical, emotional and social needs of the ill educator.
- Dealing with death and grief in the school.
- Dealing with educator stress.
- Promoting support and respect among staff at school.
- Building supportive and appreciative leadership.



Action 1 – Think differently

In what ways can you use the examples above to provide care and support for educators?





Action 2 – Build partnerships between schools and districts

Your district can be a valuable partner in creating a caring school. Invite members of the district to talk to you and find out how they could create a caring school. Here are some questions that might guide your discussions.

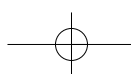
1. How could the district help us with the following?

- Access to HIV testing and counselling?
- Setting up youth friendly-clinics?
- Trauma and grief counselling?
- Stress management?
- Dealing with increasing absenteeism of educators?
- Creating a safer school environment?
- Creating a healthier school environment?
- Material support for poor learners?
- Support for accessing grants, food help and subsidies?
- Creating community awareness around issues such as sexual violence, exchanging sex for favours or gifts, and abuse?

2. Could the school become part of a cluster-based referral centre where educators and learners obtain help and give support?

3. Where can we send learners with special needs, even for a short while?

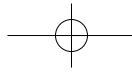
4. What support can we expect when there is a crisis at our school, such as a rape or a death?



Action 3 – Look to other schools for ideas

Priority 3 deals with providing care and support for educators. Look carefully at the HIV and AIDS plan of Rebone Primary School. It will give you a good place to start.

HIV and AIDS ACTION PLAN OF Rebone Primary for 2004					
PRIORITY 3: Providing care and support for educators					
Date: 15 January					
Participants: SGB, SMT					
Action	Activities	Who is responsible?	By when?	Budget?	
1. Setting up a School Based support Team (SBST).	a. Identify the policy background and role of the team. b. Meet with educators who will serve on the team. c. With the help of the SLES section of the district office, develop a set of procedures. Be clear on what the team can and can't do! d. Introduce new structure to all sections of the school community. e. Begin work	a. SGB and Rebone AIDS Forum b. SMT c. Principal to connect with district office; SMT to prepare meeting. d. SGB	a. End January b. First week of February c. Mid February	a. Zero budget b. Tea and biscuits for meetings will come out of regular staff catering budget.	
Resources needed	Who will support us?	Who/how will we monitor our progress?	Indicators of success		
a. Policy documents b. Time c. Name and number of special needs co-ordinator responsible for the school d. Workshop process. e. Time. f. Bring and share catering.	a. The district office. b. Donations of food from people attending the meeting c. SGM, SMT, RCL	a. Report to SGB chairperson. b. Report to principal c. Report to SGB. d. Report to SGB. Write a report and send to district. e. Plan a report-back meeting towards end of the year and write a report afterwards.	a. A document outlines the envisaged role of the support team b. Meeting takes place and educators understand role of support team. Educators are willing to serve on it. c. The meeting takes place. A document outlining the vision and role of the support team is developed. d. Meeting takes place. Learners and parents know about the support team. e. Educators feel a greater sense of care, support and unity.		



Activity – Work on your Action Plan

Work on the part of your action plan that deals with Priority 3: Care and support for educators.

- Think about how you would go about setting up an SBST if you do not already have one.
- If you already have a functioning SBST, decide whether its role should be developed or changed. Include this in your action plan.
- Remember the aim is to create a more caring school for everybody.
- You can use the example of Rebone Primary on the previous page to guide you.

Action: Remember that structures work best if they meet a real need. They also need ongoing public support.

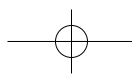
Who is responsible? By involving the district office from the start the school shares the responsibility between the department and the school.

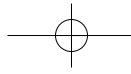
When? Setting up the structure quickly helps to leave time for the new team to develop a clear purpose before they are introduced to the public.

Who will monitor progress? The district office will share the responsibility for monitoring the development of school based support teams. At the same time schools must keep the district informed of their developments and needs.

Indicators for success: In the end the most important long-term indicator of success will be how much value is added to the school. Has the quality of life of learners and educators improved? This long-term aim should never be forgotten, even if the short-term indicators need to be practical and specific.

Use the template on the next page.

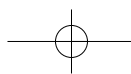


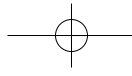


Activity – Work on your action plan

Use this template to fill in Priority 3: Providing care and support for educators

HIV and AIDS ACTION PLAN OF _____ for 200_								
Priority 3: Providing care and support for educators								
Date: 10 January Participants: SGB, SMT								
Action	Activities	Who is responsible?	When?	Budget?	Resources needed	Who will support us?	Who/how will we monitor our progress?	Indicators of success





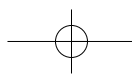
Summary

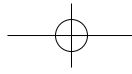
In this chapter you:

1. Learned more about how educators are affected by HIV and AIDS.
2. Thought about the issue of disclosure.
3. Learned about the rights of educators.
4. Understood the responsibilities of educators.
5. Learned more about the needs of educators living with HIV.
6. Thought of ways in which schools can respond to educator needs.
7. Looked at possible solutions.
8. Found ways to take action.

List of useful resources:

- National Education Policy Act
- Draft National Policy on HIV/AIDS, for Learners and Educators
- Educator's Code of Conduct
- Employment Equity Act
- Labour Relations Act
- AIDS and the law (Wits Law Project)

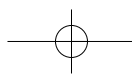


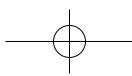
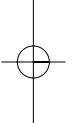
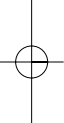
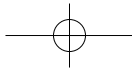


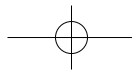
Planning for quality education in the face of HIV

In this chapter you will:

- 1.** Find out more about how the HIV epidemic affects the quality of education.
- 2.** Understand what threatens quality education in your school.
- 3.** Think of ways for schools to protect the quality of education.
- 4.** Look at how schools can manage absenteeism by working in partnership with districts.
- 5.** Find ways to take action.







CHAPTER 5

Planning for quality education in the face of HIV

1. Find out more about how the HIV epidemic can affect the quality of education

The personal problems of learners and educators affect teaching and learning in every school. One priority, therefore, is to protect the learning process and to plan for quality education. In order to do this, you need to ask a number of questions:

- How do you replace human resources that are lost?
- How will schools fund help at short notice when educators are sick or absent?
- What are the training needs of people who come in to help?
- How do these issues affect the development planning of your school?
- How do schools assist orphans and children at risk with education?

The experience of the business community clearly shows that the HIV epidemic causes high levels of absenteeism. This results in a loss of man hours and skills. Both problems make it difficult for a business to survive. A number of businesses have acted in the following way:

- They budget for the cost of giving staff extra sick and compassionate leave.
- They put aside funds to train replacement staff.
- They create a work atmosphere where staff feel free to be open about their problems.

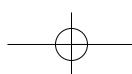
The HIV epidemic affects schools in similar ways:

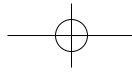
- When educators become ill, learning is affected.
- Learners are left without consistent teaching and colleagues often have to take double classes.
- Educators who are carrying a double load experience higher stress levels and can feel demotivated.
- Learners and the school as a whole can feel demotivated.
- Learners do not get the attention that they deserve.

Discuss



What can schools learn from the business sector about planning and budgeting for absenteeism?





What do we mean by 'quality'?

Here are some questions we should ask ourselves when we talk about the quality of education:

- How do the lives of our learners improve because they have attended classes?
- In what ways are the children better off because they have spent a morning at school?

The curriculum alone cannot provide quality education but it can help to improve the quality of life of the learner. The school environment alone cannot provide quality education but it helps to keep children healthy and safe. Regular attendance alone cannot ensure quality education but it can help learners to succeed. Often the everyday routines and the education process help children to grow. When these are affected, schools stop functioning effectively. Then educational quality can suffer.



Children come first!



The Chiang Mai province in Thailand has been badly hit by the HIV epidemic. Many children suffered emotional problems when members of their family died of AIDS. "Schools have to proactively promote the best interest of the child", a

project leader said. "We cannot have quality education when the physical, social and emotional needs of the children are not met."

The people of Chiang Mai launched a project to build 'child friendly' community schools and began planning the school activities around their needs. In their planning they considered health issues such as basic nutrition and they made sure all children were immunised. They also prioritised their physical environment, i.e. keeping toilets clean and providing clean water to drink. But most of all they tried to connect all children with adults who care about them and their emotional needs. Educators were trained to recognise and respond to emotional problems and they also tried to provide learning support.

"When I think of the whole HIV problem, it is too big for me", a educator said. "But then, when I think about the children in my class, I know what they need. When we put children first it becomes very clear what we as a school can do. When so many adults in our community are ill, our schools can't try big new projects. We can only cope with a small part. We try to concentrate on what is really important."^{xi}



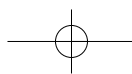
Educators influence the quality of education

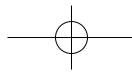
Quality education cannot be guaranteed by structures and resources alone. The physical running of a school is very important, but educational quality mostly depends on how the educators work and how they relate to the children in their class. Even poor schools do well when educators are committed and motivated. Quality education cannot happen without quality educators. Those who plan for quality education in the face of HIV must take this into account.

Discuss



- What are you doing about quality education at your school?
- How can your school benefit from investing in the professional development of educators, some of whom may be living with HIV?
- What does the school lose if they don't?
- Who is responsible for educator development programmes?





2. Understand what threatens quality education in your school

It is not always easy to see a direct link between HIV and the problems at school. It may be more helpful to take a general look at how widespread illness and death affect the quality of education.

Activity – Check whether the quality of education in your school is threatened

Here is a list of the most common problems you might face. Read through them and give each problem a score. This is how you score: 5 = this is a big problem for our school; 4 = this is a growing problem; 3 = we have this problem, but we are coping with it; 2 = this problem only affects a small part of our school; 1 = this is not a problem for us.

Educators

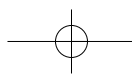
- | | | | | | |
|--|---|---|---|---|---|
| ■ Many educators get ill at the same time. | 1 | 2 | 3 | 4 | 5 |
| ■ There is no quick replacement for educators who are off sick. | 1 | 2 | 3 | 4 | 5 |
| ■ Some educators who are too sick to teach cannot be replaced until they have passed away. | 1 | 2 | 3 | 4 | 5 |
| ■ Many educators are unmotivated and tired. | 1 | 2 | 3 | 4 | 5 |
| ■ Many educators are struggling with illness and death in their families. | 1 | 2 | 3 | 4 | 5 |
| ■ Some educators can't cope with the workload. | 1 | 2 | 3 | 4 | 5 |

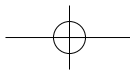
Learners

- | | | | | | |
|--|---|---|---|---|---|
| ■ The school struggles with learner absenteeism. | 1 | 2 | 3 | 4 | 5 |
| ■ A growing number of learners are demotivated and tired. | 1 | 2 | 3 | 4 | 5 |
| ■ A growing number of learners have emotional problems. | 1 | 2 | 3 | 4 | 5 |
| ■ A growing number of learners experience illness and death in their families. | 1 | 2 | 3 | 4 | 5 |
| ■ A growing number of learners have learning difficulties. | 1 | 2 | 3 | 4 | 5 |
| ■ A growing number of learners can't cope with the workload and fall behind. | 1 | 2 | 3 | 4 | 5 |

Finance and Facilities

- | | | | | | |
|---|---|---|---|---|---|
| ■ Classes are overcrowded. | 1 | 2 | 3 | 4 | 5 |
| ■ We are losing books and learning materials because classrooms are not well organised. | 1 | 2 | 3 | 4 | 5 |
| ■ It is a struggle to collect school fees. | 1 | 2 | 3 | 4 | 5 |
| ■ We have not budgeted for absenteeism. | 1 | 2 | 3 | 4 | 5 |
| ■ The maintenance of the school grounds is poor. | 1 | 2 | 3 | 4 | 5 |
| ■ We have no clean water. | 1 | 2 | 3 | 4 | 5 |
| ■ Our toilet facilities are poor. | 1 | 2 | 3 | 4 | 5 |





Discuss



Look at your scores:

- What are the biggest problems facing the quality of education in your school?
- How will HIV affect these problems?
- Is your school able to deal with these problems?
- How can good planning help?

Assess your school's strengths and weaknesses

In times of crisis and change it is easy to become depressed and to worry about the future. It helps to look honestly at your school. You will see that you have many strengths. Here are some questions to help you.

- What are your strengths as a school community?
- What opportunities do you have to improve the quality of education in your school?
- Which aspects of your school are at risk or weak?

Assess whether your school is getting the support it needs

Principals and SMTs are expected to provide quality education in their schools. This task is becoming more and more difficult. Because of the HIV epidemic there is a slow loss of skills and resources in school communities. Absent educators, sick learners, and non-involvement of parents are problems. Here are some questions to think about:

- What support does your SMT need from the SGB to keep up the quality of education at the school?
- What support does the SMT need from the district office?
- What support does the SMT need from the wider community?
- In the end, whose responsibility is it to provide quality education in the face of HIV?

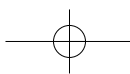
Discuss

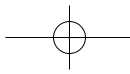


- As an SGB and SMT what should we aim to do to protect the quality of education in our school?

Activity - Go back and work on your HIV and AIDS policy

Now go back to the template on page 12 in Chapter 1 and write down what you aim to do about Priority 5: Protecting the quality of education.





3. Think of ways for schools to protect the quality of education

Schools need to stabilise their teaching efforts to protect the quality of education. Here are some effective responses from educators and managers. They have found ways to protect the quality of education despite their difficulties.

Discuss



“When we trained as teachers we learnt that the three Rs are important – reading writing and arithmetic. Now that AIDS is changing the face of our communities I think it is more important to spend time on the three Ls - literacy, life skills and loving children who yearn for affection and attention because they do not experience the basic closeness of family life. The first two Ls need special training. The last one does not.”

- What do you think of this statement?
- What are the three most important things educators should concentrate on in your school?

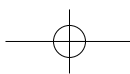


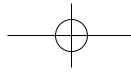
Classroom assistants make a difference.



Case study

Some schools use volunteers from the community. They help educators manage large classes and improve the caring contact children have at school. While the educator uses her professional knowledge to explain the work, the assistant provides personal support and care. She encourages learners to do their best and praises them for the work they do. Volunteers are often unemployed and would like to find regular work at the schools. While many schools cannot create more posts, they can budget for food parcels to thank the volunteers. ^{xii}





Keep children at school

Educators throughout the developing world have tried to maintain quality education. They use a variety of ways to keep vulnerable children at school. According to a recent international report some ways are:

- Providing at least one meal a day at school.
- Keeping half-day school hours to allow older learners to go to work.
- Arranging apprenticeships with local businesses to support learners who cannot afford school fees or uniforms.
- Structuring the curriculum around flexible timetables. This allows educators to do their work in shifts.
- Investing in self-study materials that allow older learners to study in study groups or with class assistants.^{xiii}

With a flexible timetable the school can offer quality education, even with a shortage of staff. Below is an example of a more flexible approach. Through this method one educator and one assistant can provide a literacy and numeracy programme for two classes in the foundation phase.

apprenticeships

- Ubuthwazi ukufunda nokubala
- vakleerlingskap
- ukufunda ngezobugcisa
- Borutwatiro

literacy and numeracy

- Ukukwazi ukufunda nokubala
- gelettertheid en syferkennis
- Ukwazi ukufunda nokubhala
- Bokwadi le go bala

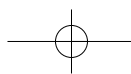
Class 1	Class 2
<p>Block 1: Developmental play Learners do puzzles, pre-reading and pre-writing activities, cutting, and <u>perceptual</u> worksheets, etc. Learners from Class 2 who struggle with reading can participate. Class is supervised by the assistant.</p>	<p>Block 1: Literacy hour Learners participate in a reading lesson appropriate for Class 2 readers. Advanced learners from Class 1 who enjoy reading can participate. The lesson is presented by the educator.</p>
<p>Block 2: Literacy hour Learners participate in a reading lesson appropriate for beginner readers. Learners from Class 2 who struggle with reading can participate. The lesson is presented by the educator.</p>	<p>Block 2: Literacy application Learners work on tasks that build on the literacy hour. They apply and practise their reading and writing skills. The tasks are prepared by the educator. The assistant supervises and supports.</p>
<p>Block 3: Numeracy hour All learners (Class 1 and 2) participate in a numeracy lesson with some formal teaching from the educator. Most of the time is spent on practical and <u>differentiated group tasks</u>. The class assistant supports learners in their different ability groups.</p>	

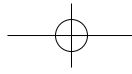
perceptual

- Uhlaka
- perseptueel
- Ngokuqondayo
- Ya tlhabololo

differentiated group tasks

- Imisebenzi ehlukiselwe amaqembu
- onderskeie groeptake
- Imisebenzi yamaqela eyahlukileyo
- Ditlhopa tse di farologaneng tsa tiro

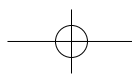


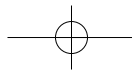


Use legislation to help schools to promote a flexible and caring response

Education White Paper 6 on Special Needs Education allows schools legally to move away from aspects of traditional schooling that make it difficult for learners at risk.

“Inclusion is about supporting all learners, educators and the system as a whole so that the full range of learning needs can be met ... Inclusion focuses on overcoming barriers in the system that prevent it from meeting the full range of learning needs.”^{xiv}





4. Look at how schools can manage absenteeism by working in partnership with districts



Case study



On her last visit to Jabula Primary School Mrs L could see that HIV was affecting the quality of education in her district. Of the 14 educators at Jabula, only 11 reported for work at the beginning of the second term. One educator was on maternity leave and the others had unexplained illnesses. Nobody talked about AIDS. Everybody knew that the two missing educators stayed away because they had used up all their sick leave and were too ill to work.

“One of the educators phoned us the other day,” the principal told Mrs L. “She said she won’t be back. She has been in hospital for a month now and her family refuses to visit her. She is lonely and she was crying on the phone. So we asked her class to write a card and some of our staff went to see her. It is very, very sad.”

The remaining educators at Jabula try to cover for the three missing colleagues, but they cannot cope with the additional work.

“I feel bad about the learners,” the principal confessed. “But when the Grade 6s sit with the Grade 5 class and do their work, at least they are getting something. We do not want the kids out of school, so we do what we can.”

Although Jabula Primary needs more staff, Mrs L knows she cannot simply appoint new educators. By law she has to wait until the absent educators have resigned or passed away. Her visit to the school helped her to see that HIV was a problem that was affecting the district. She is now looking for a solution that can help all schools, not only Jabula Primary.

Discuss



- What can Mrs L from the district office do about absenteeism at Jabula Primary school?
- Is there another way of dealing with absent educators?

Effective responses to absenteeism

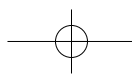
Educators try to help when their colleagues are frequently absent. They do not always cope with the extra work and the children miss out on teaching time. In Jabula Primary School, the school’s decision to deal with absenteeism by combining classes is caring and cost-effective, but the educators cannot keep going like this for a long time. It is also not developmental. The school is not improving – it is just trying to keep going.

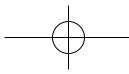
developmental

- -kokukhula
- ontwikkelings=
- (imisebenzi) ayiphuhlisi
- Ya tlhabololo

An effective response to absenteeism in your school should do the following:

1. It should pay attention to the immediate problem.
2. It should keep in mind long-term aims for quality education for all.





When you respond, ask yourself the following questions:

- Is our response to absenteeism caring?
- Is it sustainable?
- Is it cost-effective?
- Is it developmental?
- Is it appropriate?
- Is it well planned?

sustainable

- -simamisekayo,-miyo
- volhoubaar
- Ezinzileyo
- Ee tswelelang

A systematic response to absenteeism

Problem: Educators are frequently ill

Short-term response:

- Educators combine classes to cover for those who are ill.
- SMTs and educators talk about the stresses caused by absenteeism. They look for immediate ways of supporting each other.
- SGB members arrange visits to those who are ill.
- Contact Soul City for more ideas (see page 111 for contact details).
- Contact Gauteng Department of Education to talk about their Social Plan.

Medium-term response:

- Principal works with other schools in the area and creates a local list of retired educators and volunteers who can help at short notice.
- Schools form a cluster group and together set a fixed rate to pay replacements for their help.
- SGBs budget for paying short-term replacements.
- District office uses skills levy to train classroom assistants for schools which need medium- to long-term help.
- District officials work together with principals and unions to set clear guidelines for managing short and long absences of educators.
- Principals and/or Educator Support Teams link up with learning support services to get ongoing support for educators who are affected by HIV.

Long-term response:

- Districts create posts for class assistants.
- Look at how assistants can play a greater role in the classroom.

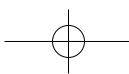
Discuss

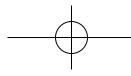


- As an SGB/SMT what should we aim to do in planning a systematic response to absenteeism?

Activity – Go back and work on your HIV and AIDS policy

- Go back to the template on page 12 and fill in what you aim to do in responding systematically to absenteeism (Priority 5).





5. Find ways to take action

Activity – An action oriented workshop for schools

- Organise a workshop with educators, parents and RLCs. Discuss what practical actions can help your school with problems that undermine the quality of education.
- Here are some possible actions to explore in the workshop:

Action 1 – Respond creatively

Problem statement: Increasing illness among learners and educators will lead to an increase in absenteeism. This, in turn, will affect the quality of teaching and learning in the school.

- Work in a group. Brainstorm creative ideas on how schools can respond to this issue

Problem statement: Educators are vital in providing quality education.

- Work in a group. Brainstorm creative ideas on how schools can support educators to be the best that they can.

Problem statement: Schools need to become more flexible and proactive in their approach to time-tabling, staffing and budgeting in order to protect the quality of education.

- Work in a group. Brainstorm creative ideas on how schools could be organised so that community members, assistants and parents can help the school.

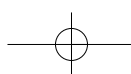
proactive

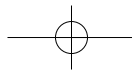
- lindela ukuthatha izinyathelo zokubhekana nesimo
- proaktief
- ukuzigqatsa
- Matlhagathaga

Action 2 – Find out about services and support

- Use the following table to fill in information about services and support that are available.

	Name of organisation	What type of help can they provide?	Contact person and details
State services	e.g. Social Services, SLES officials at District Office of the DoE		
Religious organisations			
NGOs			



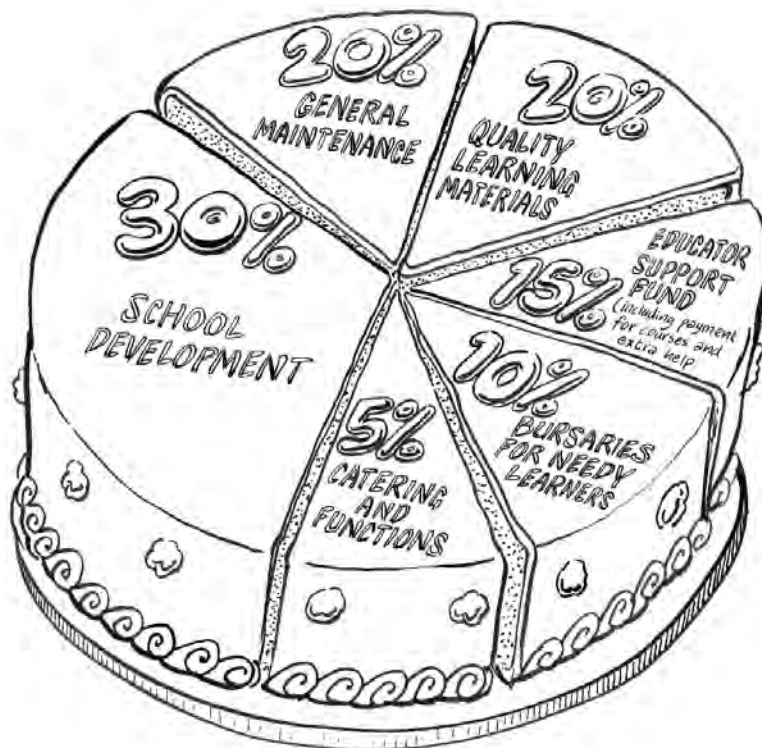


Action 3 – Find funding

Find out about funding strategies of the DoE as well as your district office.

- How will these strategies benefit your school?
- What do these funding approaches mean for your school?
- How can they help you to provide quality education in your school?

Action 4 – Budget for extra help



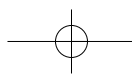
The SGB of Jabula Primary now spends their money on things that matter most.

Ask the finance team to draw up your own school's pie chart showing how the money is spent.

- How do you think the school's money should be spent so that you will have quality education?
- What will get the biggest slice?
- How big must the slice be for replacing educators and getting extra help?

Action 5 – No budget actions

- Rearrange the existing budget to show the priorities of the school.
- Set up school based support teams.
- Take part in courses and training provided by the district office.
- Listen with compassion to the experiences of educators and learners affected by illness and death.



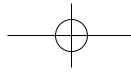
Action 6 – Look to other schools for ideas

Look at the example of Rebone Primary's HIV and AIDS Action Plan. What ideas can you get from it to ensure that your school can address Priority 4: Protecting the quality of education?

HIV and AIDS ACTION PLAN OF Rebone Primary for 2003			
Priority 4: Protecting the quality of education			
Date:	Participants:	Activities	Who is responsible?
Action	By when?	Budget?	
Develop a work place policy to manage absenteeism among educators.	<ul style="list-style-type: none"> a. End January. b. First week of February. c. Mid February to end Feb. d. Ongoing. 	<ul style="list-style-type: none"> a. Zero budget. b. Tea and biscuits for meetings will come out of regular staff catering budget. 	<ul style="list-style-type: none"> a. SGB and Rebone school based support team. b. SMT. c. Principal to connect with district office; SMT to prepare meeting. d. SGB.
	<ul style="list-style-type: none"> a. Identify the policy background and role of the teams. b. Meet with educators and union members who will serve on the task team. c. With the help of the district office, develop plans and procedures. Be clear on how the work place policy relates to labour regulations. d. Introduce new policy to all sections of the school community. 		

Priority 4: Protecting the quality of education

Activities	Resources needed	Who will support us?	Who/how will we monitor our progress?	Indicators of success
	<p>Policy documents. Time. Name and number of special needs co-ordinator responsible for the school. Workshop process. Time. Bring and share catering.</p>	<p>The district office; donations of food from people attending the meeting; SGB, SMT, RCL.</p>	<p>a. Report to SGB chairperson b. Report to principal. c. Report to SGB. d. Report to SGB; write a report and send to district</p>	<p>a. A document outlines the envisaged role of the support teams. b. Meeting takes place and educators understand role of support team. Educators are willing to serve on it. c. The meeting takes place. A document outlining the plans and role of the support team is developed. d. Meeting takes place. Ordinary members of the school meeting know about the support team.</p>



Activity - Work on your own Action Plan

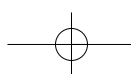
Work on the part of your action plan that deals with Priority 4: Protecting the quality of education. Look back at Rebone Primary School's action plan for guidance.

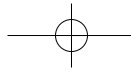
Action: Remember that the new policy will make a difference if it meets a real need. It will also need ongoing public support of the SMT.

Who is responsible? Involve the district office from the start. The school then shares the responsibility for quality education between the department and the school. Discuss the issues on the phone, if the district office is too far for a joint meeting.

Who will monitor progress: The district office will be partly responsible for monitoring the development of workplace policies. At the same time the SMT needs to monitor the progress at school level. It can then keep the district informed of the school's changing needs.

Indicators of success: In the end the most important long-term indicator of success will be how much value the school adds to the lives of its learners. This long-term aim should never be forgotten, even if the short-term indicators seem more practical and specific.





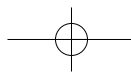
HIV and AIDS ACTION PLAN OF _____ for 200__

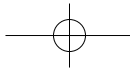
Priority 4: Protecting the quality of education

Date: 10 January

Participants:

Action	Activities	Who is responsible?	When?	Budget?	Resources needed	Who will support us?	Who/how will we monitor our progress?	Indicators of success





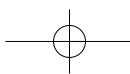
Summary

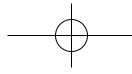
In this chapter you:

1. Found out more about how the HIV epidemic affects the quality of education.
2. Developed a clearer understanding of what threatens quality education in your school.
3. Thought of ways for schools to protect the quality of education.
4. Looked at how schools can manage absenteeism by working in partnership with districts.
5. Found ways to take action.

List of useful resources:

- Education White Paper 6 on Special Needs Education



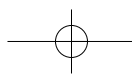


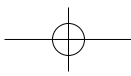
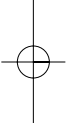
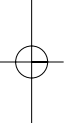
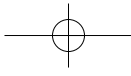
Making the HIV and AIDS policy work

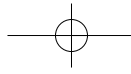


In this chapter you will:

- 1.** Develop a vision for a school that is strong enough to stand up to the HIV and AIDS epidemic.
- 2.** Understand what it takes to make the HIV and AIDS policy work in your school.
- 3.** Review your policy .







CHAPTER 6

Making the HIV and AIDS policy work

1. Develop a vision for a school that is strong enough to stand up to the HIV and AIDS epidemic

The Department of Education has declared the HIV epidemic a national emergency. Every school is expected to make the national HIV and AIDS policy work. After reading through this manual you will agree that the policy cannot only be a written document. It has to be used as a living document. It must guide and give new meaning to the everyday activities at school.

Picture this

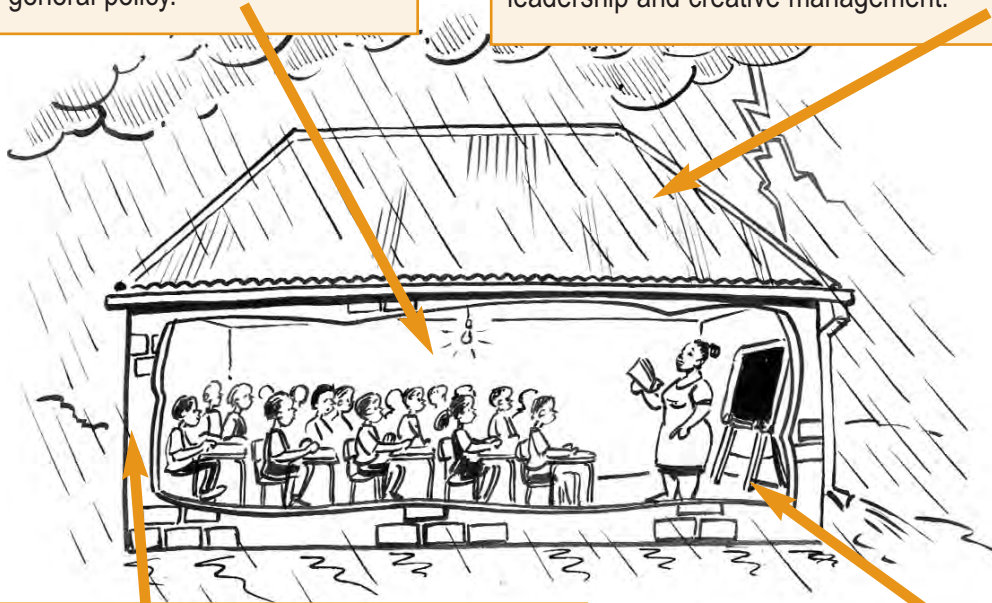
Imagine that your school community is like a house in a storm. Its ability to cope with the problems of the HIV and AIDS epidemic will depend on four things: the strength of the foundation, the quality of the roof, the capacity of the walls and the safety of the interior:

The interior is the quality of the learning and teaching including the effectiveness of life skills programmes. A well-decorated house gives meaning to the general policy.

The sheltering roof is provided by provincial and district managers who develop policies to protect the foundation from the storm. The **rafters** of the roof are the SMT and the SGB who provide clear leadership and creative management.

rafters

- daksparre
- Abahlengahlengisi
- Dithomeso

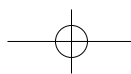


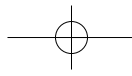
The load-bearing walls are made up of the human, material and financial resources that the school needs to do its work. They can also include partnerships and **networks** in the district. These partnerships work best if they are supported and protected by the roof.

The foundation is the school. School managers, educators and learners gather in a physical place every day. It is possible for every school to find a way to deal with the HIV epidemic.

networks

- Imikhakha yokuxhumana
- netwerke
- Uthungelwano
- Dithaeletsano kgotsa mafaratlhatlha a neeletsano





Be realistic

Many schools struggle to implement their HIV and AIDS policy because of the following:

- **Over-ambitious goals.** Plans fail when they focus only on the vision. They need to be realistic about whether there are enough time, resources and people to carry them out. Educators cannot do everything and have very little time for something extra.

It is often more effective to act on a smaller scale. Decide on small, realistic steps, using existing resources and structures.

- **Poorly defined aims and unclear actions.** This means that the plans to implement the policy are too general. Nobody is really sure what they are expected to do, by when and why. It is also not clear how everything fits together.

A clear plan of action can help schools to choose clear goals and to keep a sense of direction.

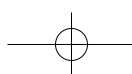
- **Weak leadership.** This can show itself when things become difficult. Nobody is prepared to take a stand and make difficult decisions or be proactive about situations that do not go according to plan.

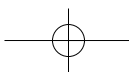
Leadership is not limited to the SMT or the SGB. People who act with honesty and compassion can help to show the way. They will be the first to admit that there is a problem and that some planning is needed to fix it.

- **Loss of interest.** Many projects start off with a lot of energy. Then people get tired and drop out, especially if the management team is weak.

Checking regularly on how well things are going is very important.

The school management (SMT) and, particularly, the principal have the final responsibility to protect the safety of the school and the quality of its education. The SMT need to be clear in their vision otherwise it is very hard for individual educators to work alone. In the end if motivated educators feel they are on their own they will give up or change schools.





2. Understand what it takes to make the policy work in your school

Activity - Assess whether your school has the capacity for action

In this activity you will find out whether you have the capacity to carry out your action plan. Use the following questions to help you think about these issues. Add your own questions as you need them.

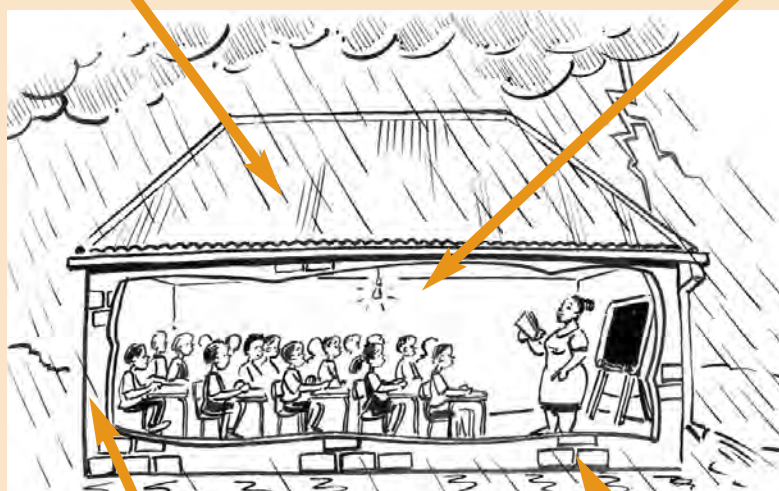
- capacity**
- Amandla okukwazi
 - bekwaamdheid
 - ulwazi
 - Mothamo

The sheltering roof.

- Do the leadership and management practices enable everyone to be open about HIV and AIDS?
- What is the general attitude towards people living with HIV?
- Are the SGB and SMT taking responsibility for the policy?

The interior.

- Do you talk about the HIV epidemic in a way that touches the lives of people in your school community?
- How are you linking HIV to the pressures in your daily work?
- Is what you are doing linked to the national policy?

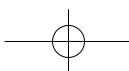


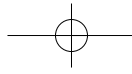
The load-bearing walls.

- What are some of the important human, material and financial resources of the school?
- Are you using these resources effectively?
- What else do you need to know?
- Who can help to make the HIV policy a success?

The foundation.

- What structures and committees work well at the school? (For example, the SMT, the soccer club or library committee?)
- Which structures help to make the school a more caring place?
- How can these structures help to make the HIV policy work?





3. Some examples of successful policy implementation

Some important things are needed for successful implementation. You need:

- Openness
- Compassion
- The right information
- Local support teams
- Coherence

Openness

In Uganda denial and discrimination against people living with HIV are quickly disappearing. People who openly disclose their HIV status are no longer feared or avoided. They are generally accepted and supported by family members and friends. People who speak publicly about their situation are admired for their honesty and courage.

These positive changes have happened because of Uganda's spirit of openness. Openness has taken many different forms. In some communities it has meant the end of denial about the reality of HIV. In others it meant that people began to talk about the way the disease affected everyone – the family, the community, the workplace.

For some people being open started with an HIV test. For some parents it started with talking to their children about sex. For some religious leaders it meant talking about HIV during pre-marital counselling. For some community leaders it meant not only talking about HIV at public meetings, but also setting an example in their private life.

Openness about HIV did not occur by accident. In Uganda openness was actively and consistently encouraged by politicians, the media and community projects.^{xv}

denial

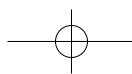
- Ukuphika
- ontkenning
- Ukungavumi
- Go ganela/Go ikganetsa

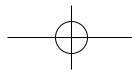
courage

- Isibindi
- moed
- Unesibindi sokwenza into
- Tlhotloetso

pre-marital

- -ngaphambi komshado
- voorhuwelikse
- Phambi kokuzimanya ngeqhina lomtshato
- Pele-ga-nyalo





Compassion



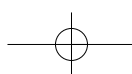
The right information

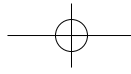
Your school and district need good up-to-date information on HIV and AIDS. This information enables them to respond effectively to the epidemic. Most of this information can be collected by the school from routine records, for example:

- Educator and learner absenteeism
- Learner drop-outs
- Numbers and causes
- Accurate records of chronic illness and death

Schools often struggle to use the support the state already provides, simply because they do not have the information they need. Here are some basic steps every school should follow:

- ID number: Make sure every child in your school has an ID number. As a school you can get application and administration forms from the Department of Home Affairs. Children without ID numbers are at risk, as it is very difficult to register them for any social security grants.
- Social grants: Make sure your school has a public display on all the social security grants that apply to children of school-going age. Some of the most important grants are: The General Child Grant, Foster Care Grant, Child Care Support Grant, Social Care Grant. (See list of references and contacts on page 111 for Soul City Booklets.)
- Referrals: Make sure the secretary and the co-ordinator of the EST have correct names and phone numbers of people who can help with referrals. Keep these numbers readily available.
- Follow-up: Keep records of your phone calls, the date you made a call, what help you asked for and what response was promised. These notes are very useful in following up problems and avoiding delay.





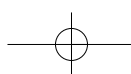
Local support teams

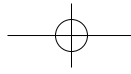
The Teacher/Educator Support Teams (EST), as suggested by the education White Paper 6 on Special Needs Education, should help schools with care and support. The teams are able to refer people to the right support services. They play a valuable role in supporting needy children. Local support teams are well positioned to manage partnerships with the district office and other organisations.

Although the national HIV policy calls for Health Advisory Committees, many schools cannot manage too many structures or committees at once. In such cases it may be better to invite a health worker and a member of the SGB onto the EST.

Coherence

A coherent response means that even the smallest response will be powerful if it fits in with the overall direction of the school policy. The first step is to start somewhere. It does not matter how small the action is – a small action is better than doing nothing.





Activity - Are you personally ready and able to respond?

Complete the following checklist.

Do I have the qualities which I need to implement my school policy?

- | | | |
|---|------------|-----------|
| ■ Knowledge of the disease and how it affects education. | Yes | No |
| ■ A personal commitment to make a difference. | Yes | No |
| ■ The ability to act on my beliefs. | Yes | No |
| ■ The ability to 'walk the talk' and be a model of good practice. | Yes | No |
| ■ Knowledge of policies and labour regulations. | Yes | No |
| ■ An up-to-date understanding of the situation. | Yes | No |
| ■ The ability to capture the imagination of the school community. | Yes | No |
| ■ Knowledge of the official structures, and how they work. | Yes | No |
| ■ Personal honesty and compassion. | Yes | No |
-
- How would you judge your personal ability to make a difference in your school?
 - What are your training needs?
 - What is the first thing you would do (if you could respond)?

walk the talk

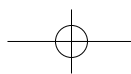
- -yenza njengoba usho
- maak soos jy praat
- Wenza njengokuba uthetha
- Dira ka fa go buiwang ka teng/Go diragatsha

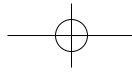
Create a school 'wish list' for responding to HIV and AIDS



Imagine you could send a wish list to the department. On this list you could put everything you need to fight the epidemic.

- What would you put on your list?
- Which of these wishes could you realise on your own?
- Which of these need the support of your local education district office?





4. How do you link the HIV and AIDS plan to your school development plan?

Once the school has a development plan, the information in this guide should become part of it. The guide and the plan should not be seen as separate processes. Instead they should be integrated. The planning process of this guide will be useful for schools beginning their development planning. The important point to remember is that HIV and AIDS planning should be a central part of school development planning. This is what is meant by mainstreaming HIV and AIDS into the school development plan.

mainstreaming

- Ukuxhumana emikhakheni ethile
- hoofstroming
- ukufaka emzileni
- Go ya ka tse di tona

- What does this mean in practical terms?
- How can the five priorities identified in your HIV and AIDS policy be linked to your school development plan [medium-term strategic plans]?

Preparing and implementing a school development plan is like going on a long journey with the whole school.

Have you done a situation analysis? Do you know the strengths and weaknesses of your school? Have you thought about the things that threaten the well-being of your school community? What opportunities do you see?

HIV marker: How is the HIV epidemic affecting your school?



Where are we now? What kind of place is this?

situation analysis

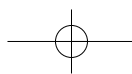
- Ukuhlaziya isimo
- situasie ontleding
- Ukuhlela imeko
- Go thalosa maemo

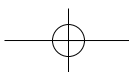
After you have analysed your situation, talk about the future. What is your vision for the school? What specific issue do you want to deal with first?

HIV marker: What does an HIV and AIDS-free school look like?



**Where are we now? Where do we want to go?
What is our first stop along the way?**





Who are the leaders who can manage the development plan? Who are the managers? Who has to be on the planning team?

HIV marker: Do you have someone with HIV and AIDS knowledge and experience on the planning team? Is there someone who will make sure the experience of people affected by HIV is not ignored?



Who will be in charge?

Has the school the ability to implement your plan? Make sure your development plan has a good budget. Who will support you? Talk about resources and possible problems along the way.

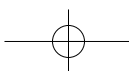
HIV marker: What about the health of everyone at school? Have you budgeted for unexpected illness, as well as care and support?

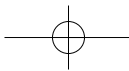


Will this bus make it? Is everybody well enough to go? What is the road like? Is there enough food? Do we have money for unexpected delays and repairs?

Break your big plan into small goals. What are the small effective steps that will take you where you want to go?

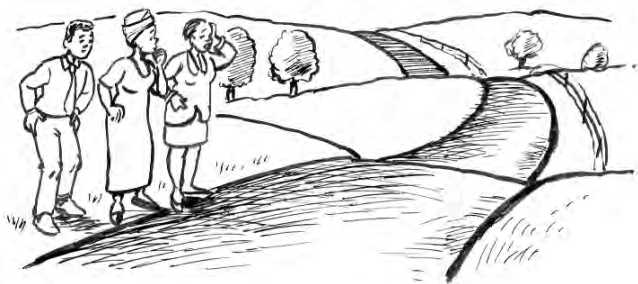
HIV marker: Do your goals include the priorities that you mentioned in your HIV and AIDS policy?





Do you have a plan of action that is clear enough to guide you along the way? Does it allow for creative changes, if problems come up?

HIV marker: Does your plan make a difference to people affected by HIV?



This road is worse than we thought. But look here, there is an alternative route.

Do you have clear indicators that will help you to keep track of your achievements and your ability to go on? Who will monitor the implementation of your plan?

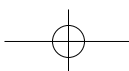
HIV marker: Do your indicators relate to the prevention of HIV. Do they relate to the care and support of those affected by AIDS?

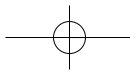
Hmm. Sweet water, grassy bank,
This is a river, we have arrived.
Car needs slight repairs.



Your HIV and AIDS action plan has to become part of the way your school thinks. The Department of Education has clearly identified a Medium-Term Strategic Framework (MTSF) as a response to the HIV epidemic. The specific outcomes of the framework should become part of every school's development plan.

You have now looked at developing general plans which keep HIV and AIDS in mind. You should also have a separate section in your overall plan that focuses on priorities discussed in this book.





5. Review your policy

Once you have gone through the process of developing your HIV and AIDS school policy, it is important to check that it includes everything that will make it a good meaningful policy.

Activity – Step back and review your policy

Ask yourself the following questions:

- Does the policy give clear information about procedures that are followed at the school?
- Does the policy take account of guidelines provided in 'The HIV Emergency Guidelines for Educators'?
- Does it set out the need for certain actions and say how these actions will be monitored?
- Does it mention specific partnerships and their purposes? Does it say what educators should do, and when they should hand over to health and/or social services or to community caregivers? Are procedures listed for liaising with health, social welfare and other community social workers? Those affected by HIV and AIDS can then be protected by a network of care.
- Are there clear steps to protect against discrimination?
- Does it include ideas about local funding, making the best use of community resources and getting more when needed?
- Does the policy say something about the training that is needed within the school?



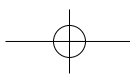
Summary

In this chapter you:

1. Looked at how to develop a vision for a school that can stand up to the HIV and AIDS epidemic.
2. Understood what it takes to make the HIV and AIDS policy work in your school.
3. Reviewed your policy.

List of useful resources

- National Policy on HIV/AIDS, Government Gazette of 10 August 1999, Government Notice NO 20372
- The HIV Emergency Guidelines for Educators
- Conference on HIV/AIDS and the education sector: Report and Sector Plan of Action
- HIV/AIDS: Care and Support of Affected and Infected Learners (Published by the Department of Health)
- Ethics and Values manual: Ben Parker; U Natal Unilever Centre for Ethics for SACE
- Medium-Term Strategic Framework (MTSF)
- Soul City Booklets
 - Grants for Children
 - Living Positively with HIV and AIDS
 - AIDS in our Community
 - Simanga's Choice
 - Soul City Workbooks
 - Choose Life – Living with HIV and AIDS in our World
 - Talking about HIV and AIDS
 - George's Story



Conclusion

Every school community needs courage to reflect honestly on the impact of the HIV epidemic. Once this process begins, it soon becomes clear that we are all living with HIV. In some way or another all our lives are affected by the virus and the breakdown it causes in our families, our places of work, and our society as a whole. We have to accept that the problems will not disappear overnight. As more and more young adults die of AIDS, schools will be called upon to care for children who grow, develop, live and dream – despite the presence of HIV and AIDS in their lives.

These are the reasons why we need a vision and commitment to action that will strengthen the education sector for the next twenty years.

A good way to develop such a vision is to:

- Take responsibility for the problems that directly affect you.
- Focus on those issues in your school that you can actually do something about. For example, you cannot prevent new HIV infections through sexual violence outside the school, but you can treat the girls in your school with respect. You can teach them to be assertive and aware of the risks they face. You cannot get rid of poverty in your community, but you can make sure you link with existing feeding schemes to provide at least one healthy meal a day. You cannot protect children from the breakdown of family life, but you can create many opportunities for children to experience care at school.
- Understanding the impact of the epidemic on South Africa as a whole.
- Use your knowledge of the epidemic to draw up affective action plans.



The best HIV and AIDS school policy will have a limited effect on the lives of learners unless we create a caring school climate. For many children the school is the most secure environment they experience. It provides one of the few opportunities for learners to develop their self-worth and personal confidence. These qualities, in turn, give them the will to make good choices and take charge of their lives.

Schools cannot do everything, but they can lead the way. As school managers, educators and members of the SMT or SGB you have the right and the responsibility to take action. This will protect the right of every child to be loved, develop and grow up feeling safe.

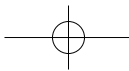
Additional resources

Although these resources are not directly referred to in the guide, schools may find them useful:

Need to find out what other resources are available from the Department of Health and Social Development

Guide for developing and sustaining youth clubs

Guide for developing peer education programmes



List of contacts

I AIDS IN EDUCATION

The Department of Education HIV and AIDS Unit	012 312 5178	
Conference on HIV and AIDS and the Education Sector	012 312 5911	http://education.pwv.gov.za
The HIV/AIDS Emergency Guidelines	012 312 5410	http://education.pwv.gov.za
South African Education and Training System.....		http://education.pwv.gov.za
Guidelines for Educators, Mitigating the Impact of HIV and AIDS on Education, Supply, Demand and Quality		http://www.unicef-icdc.org/research/ESP/aids/aids_index.html
Aspects of children affected by HIV/AIDS.....		http://www.unaid.gov/pop/health/caba/archive
International Institute of Educational Planning (IIEP) catalogue		information@iiep.unesco.org

2 WORKPLACE AND HR ISSUES

Education Management Information Systems:	012 312 5239	
Database for effective management of education systems		http://www.education.pwv.gov.za
Voluntary Counselling and Testing (VCT) sites in South Africa	0860 222 777	http://www.aids helpline.org.za/_sites_list.htm
Thethajunction – Lovelife's Toll-Free Sexual Information and Counselling line	0800 121 900	www.lovelife.org.za
Policy support – Planning and monitoring branch	012 312 5244	
Integrated Quality Management System (IQMS).....		http://www.education.pwv.gov.za
National and Provincial HR or HRD Directors –		
National	012 312 5466/7	
Gauteng	011 355 0281	
Eastern Cape.....	040 608 4253	
Free State	051 404 4291/2	
Kwa-Zulu Natal	035 879 3690	
Mpumalanga.....	013 766 5505	
Limpopo.....	015 290 7933	
Northern Cape	053 839 6500	
North West	018 387 3424/5	
Western Cape	021 467 2557/8	

3 CARE AND SUPPORT

AIDS Helpline & Dep of Ed. (DoE) Websites.....	012 312 0000	http://www.education.pwv.gov.za
Hospice Association of the Witwatersrand	011 483 1068	
Mofolo (Soweto)	011 982 5332	
South Coast Hospice.....	039 682 3031	
Wide Horizon Hospice	016 428 1410	

South African Red Cross Society

Western Cape	021 797 5360
Eastern Cape	041 585 6745
Free State	051 448 1259
Kwa-Zulu Natal	031 337 6522
Gauteng	011 873 5595

Department of Health	012 321 0000
Planned Parenthood Association of SA	011 880 1182
Society for Family Health.....	011 482 1427

AIDS Training, Information and Counselling Centre (ATICC)

Western Cape	021 797 3327
Gauteng	011 988 1064/5
Limpopo	015 290 2363
Kwa-Zulu Natal – Durban	031 300 3104/3020
Pietermaritzburg	033 395 1612
Mpumalanga – Nelspruit	013 759 2167
Witbank	013 690 6204
Eastern Cape – East London.....	043 705 2968
Port Elizabeth	041 506 1249
Queenstown	045 838 2233
Umtata	047 531 2763
Free State	051 405 8544

4 GENERAL INFORMATION

Helplines

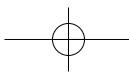
AIDS toll-free Helpline 0800	012 322	www.aids helpline.org.za
Thethajunction – Lovelife's Toll-Free Sexual Information and Counselling line	0800 121 900 (Hours: 1 - 9 pm Monday - Friday; 12 - 5pm Weekends)	

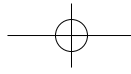
Other information – Free Brochures and Information

Red Ribbon Resource Centre	(011 880 0405)	http://www.aidsinfo.co.za
Soul City	011 643 5852	www.soulcity.org.za

Other

Joint United National programme on HIV/AIDS (UNAIDS).....	012 338 5294/5304	www.unaids.org
Medical Research Council.....	021 938 0911	





References

- i Nelson Mandela/HSRC Study of HIV/AIDS, 2002.
- ii Children on the Brink: A Joint Report on Orphan Estimates and Program Strategies. UNAIDS, UNICEF, USAID. Washington, July 2002.
- iii adapted from AIDS Brief for Sectoral Planners and Managers – Education Sector
- iv adapted from AIDS Brief for Sectoral Planners and Managers – Education Sector
- v What happened in Uganda? Declining HIV prevalence, behaviour change and the national response. The synergy project, Washington, 2000.
- vi Children on the Brink. A joint report on orphan estimates and programme strategies. USAID, UNAIDS, UNICEF. 2002.
- vii adapted from HIV&AIDS: Care and Support of Affected and Infected Learners. DoH
- viii Quote by Professor Kader Asmal, MP, Minister of Education (from Conference on HIV/AIDS and the Education Sector p.55)
- ix Government Gazette, 19 December 2001, No 22961
- x Quote by Sue Armstrong (from Caring for Carers, Managing stress in those who care for people with HIV and AIDS, UNAIDS Best Practice Collection, May 2000)
- xi adapted from Coombe: Chiang Mai report
- xii Sr. R Western Cape
- xiii Children on the Brink, Executive Summary, UNAIDS, 2000, pg 8-9
- xiv White Paper 6 pg 17
- xv Kaleeba, Kadowe, Kalinaki and Williams (2000) "Open Secret: People Facing up to HIV and AIDS in Uganda", London: Action Aid. pg 101-102)

