# Factors influencing access and retention in primary schooling for children and young people affected by HIV and AIDS: Case studies from rural Malawi

**Catherine M Moleni**

CERT, University of Malawi

Cover photo: © Catherine M Moleni

SOFIE is a three year Research Project supported by the UK Department for International Development (DFID) and the Economic and Social Science Research Council (ESRC). Its purpose is to strengthen open, distance and flexible learning (ODFL) systems and structures to increase access to education for young people living in high HIV prevalence areas in Malawi and Lesotho. It seeks to achieve this through developing a new, more flexible model of education that uses ODFL to complement and enrich conventional schooling. It also seeks to encourage application of the new knowledge generated through effective communication to development agencies, governments, development professionals, non-governmental organisations and other interested stakeholders.

Access to education and learning is being viewed as a 'social vaccine' for HIV but in high prevalence areas orphans and other vulnerable children are frequently unable to go to school regularly and are thus being deprived of the very thing they need to help protect themselves from infection. In this context sustained access is critical to long term improvements in risk and vulnerability and it requires new models of education to be developed and tested.

**The partners**

The research team is led from the Department of Education and International Development, Institute of Education, University of London and the research is being developed collaboratively with partners in sub-Saharan Africa.

**Lead partner**

The Department of Education and International Development, Institute of Education, University of London: Dr. Pat Pridmore and Mr. Chris Yates

**Collaborating partners**

The Institute of Education, National University of Lesotho: Dr. Thabiso Nyabanyaba.
Centre for Education Research and Training (CERT), University of Malawi: Ms. Catherine M Moleni
The South African Institute for Distance Education (SAIDE): Ms. Tessa Welch and Mr. Ephraim Mhlanga

---

**Disclaimer**

---

# Factors influencing access and retention in primary schooling for children and young people affected by HIV and AIDS:

## Case studies from rural Malawi

### Catherine M. Moleni

SOFIE Opening Up Access Series No 6

# Acknowledgements

# Abbreviations and local usage

| | |
|---|---|
| AGSP | Ambassador's Girls Support Project |
| AIDS | Acquired Immuno-Deficiency Syndrome |
| ARV | Anti-retroviral |
| CBE | Complementary Basic Education |
| CBO | Community Based Organisations |
| DFID | Department for International Development |
| EMIS | Educational Management Information Systems |
| FGD | Focus Group Discussion |
| FPE | Free Primary Education |
| GVH | Group Village Headman |
| HIV | Human Immuno-virus |
| HSA | Health Surveillance Assistant |
| MOE | Ministry of Education |
| NAC | National Aids Commission |
| NGO | Non-Governmental Organisation |
| ODFL | Open, Distance and Flexible Learning |
| PEA | Primary Education Advisor |
| PTA | Parent-Teacher Association |
| RSA | Republic of South Africa |
| SADC | Southern Africa Development Community |
| SHN | School Health and Nutrition |
| SMC | School Management Committee |
| SWO | Social Welfare Officer |
| TA | Traditional Authority |
| TB | Tuberculosis |
| TDC | Teacher Development Centre |
| VCT | Voluntary Counselling and Testing |
| WFP | World Food Programme |

| | |
|---|---|
| *anamasiya* | Orphans |
| *anasuzulidwa* | Release of a surviving spouse to return to home village and re-marry |
| *chokolo* | Widow inheritance, usually by deceased man's brother |
| *chidyamakanda* | 'sugar daddy' |
| *dambo* | Land bordering rivers – used for growing crops and vegetables. |
| *ganyu* | Casual hired labour/piece work for money or food. |
| *lobola* | Dowry (bride-price) |
| *mwana geni* | Small-scale business/vending done by children |
| *phala* | Porridge made from maize and soya |
| *olimbiktsa* | Someone who motivates/provides support |
| *sing'anga* | Traditional healer or herbalist |
| *ulowoka* | Patri-local settlement of family within matrilineal tradition |
| *kaunjika* | Cheap second-hand clothes, usually shipped in from overseas |

# Table of Contents

# List of Tables

# 1 Introduction

This report presents findings from the second phase of the SOFIE[1] research project. This project aims to investigate ways of improving retention and increasing access to learning for children and young people affected by HIV and AIDS by helping to develop new, more flexible models of educational provision. In this introductory section, a brief background to Malawi is presented. Issues of access and retention in primary schools in Malawi, in relation to children and young people affected by HIV and AIDS, are also highlighted, providing a rationale for the purpose and design of the research project. The design of research project is briefly outlined and the main research activities of this second phase – school-based case studies – are summarised, before a more detailed discussion of the methodology is presented in Section 2.

## 1.1 General background of Malawi

Malawi is a small, landlocked country in sub-Saharan Africa (SSA), with a population highly dependent on agriculture, much of which involves subsistence farming[2]. Over 85 percent of the population is found in rural areas. Population density is relatively high compared to other countries in the region, with resultant land shortages. Malawi is divided into three administrative regions – the northern, central and southern regions – that reflect historical, socio-cultural and political differences. The population structure is characterised by a high dependency ratio, with almost half (45%) of the population below 15 years of age.

A former British colony, Malawi gained its independence in 1964 and in 1966 became an official one-party state, to remain so for the next thirty years under the leadership of Dr. Kamuzu Banda. The early nineties saw the start of political changes in Malawi and in 1994 the country's first multiparty elections were held. One of the new democratic government's first acts was to introduce free primary education (FPE), heralded as a key strategy for poverty alleviation.

Currently ranked 166 in the Human Development Index (HDI), Malawi is one of the poorest countries in the world, with over half of the population (52.4%) categorised as 'poor' and just under a quarter (22.4%) described as 'ultra-poor'(NSO, 2005). Poor health and social indicators characterise poverty in the country: low literacy levels, a high under-five mortality rate, widespread malnutrition and a life expectancy at birth of just 37.5 years (NSO, 2005). Malawi, like its neighbours in sub-Saharan Africa, has been severely affected by HIV and AIDS. Nationally, the estimated HIV and AIDS prevalence in adults (15 to 49 years) in 2005 was 14 percent. Prevalence rates in rural areas are lower than in urban centres, although the gap is narrowing[3] and the absolute number of people living in rural areas who are HIV+ outnumber urban dwellers by roughly three to one (Bryceson, Fonseca and Kadzandira, 2004). The majority of new infections are amongst young people (15–24 years), with young women more four times more likely to be infected than young men[3] (NSO, 2005).

---

[1]    This report is part of a wider three-year  DFID-ESRC joint funded research project 'Strengthening Open and Flexible learning for Increased Education access in high HIV prevalence SADC countries' (SOFIE), based at the Department of International Education and Development, Institute of Education, University of London.

[2]    Recent Demographic and Health Survey (DHS) data from Malawi, indicates that 57 percent of economically active men and 70 percent of economically active women are small-scale subsistence farmers (NSO, 2005).

[3]    In the earlier 2000 Malawi Demographic and Health Survey (DHS), HIV prevalence rates for urban and rural areas were estimated at 23% and 12%, respectively.

## 1.2 Access to education for children affected by HIV and AIDS

A rights-based approach to access to primary education, as enshrined in EFA goals, goes beyond narrow definitions based solely on enrolments, but is committed to providing equitable access to learning - and ensuring completion – for various vulnerable groups (Barrett et al., 2006; Lewin, 2007). Lewin (2007: 33) argues that initial access – measured by enrolment - cannot be meaningful unless it leads to secure enrolment and regular attendance, equitable opportunities to learning and resultant progression through the grades at the appropriate age. Conversely, exclusion from education refers not only to non-enrolment or permanent dropout from schooling, but can take the form of temporary withdrawal, irregular attendance, enforced absenteeism and poor performance and participation due to discrimination or the psychosocial impact of HIV and AIDS (Lewin, 2007; Pridmore, 2008).

In Malawi, where a policy of Free Primary Education (FPE) has been in place for more than a decade, relatively few children have *never* attended school (Streuli and Moleni, 2007). However, despite high initial enrolments, primary education in Malawi remains inefficient, with consistently high repetition and dropout and low completion rates. Thus, large numbers of children are denied access in its broadest sense, and are at risk of permanent exclusion (Kadzamira and Nell, 2004). Against a context of underlying poverty, recent literature suggests that in sub-Saharan Africa a disproportionate number of these are likely to be children orphaned or made vulnerable by HIV and AIDS (Pridmore and Yates, 2006; Semali, 2007; UNESCO, 2007). In adopting an understanding of access as one encompassing sustained attendance, progression and equitable opportunities for learning, this research study acknowledges that economic arguments based on a narrow supply and demand framework, although powerful, are not sufficient to gain a fuller understanding of the situation of many educationally marginalised children, especially those affected by HIV and AIDS. As such, any discussion of schools' accessibility has to address a range of social processes, as played out in communities, homes and schools.

Within the literature on the impact of HIV and AIDS on children's educational outcomes, there is a substantial body of research that examines the nature of the relationship between orphan status and enrolment. Recent reviews of largely quantitative research show that enrolment differentials between orphans and non-orphans, are highly contextualised and country-specific (Ainsworth and Filmer, 2006; Bennell, 2003; Pridmore, 2007). In Malawi, evidence from recent national household survey data suggests that orphan status alone is not a strong determinant of whether a child is or is not enrolled in school (NSO and UNICEF, 2007). Looking beyond enrolment to a more meaningful picture of access, there are several studies that indicate that orphans are likely to be disadvantaged in terms of school attendance and attainment (Ainsworth, Beegle and Koda, 2005; Bennell, 2005; Bicego, Rutstein and Johnson, 2003). Evidence from Malawi is limited. An earlier, small-scale survey of 11 schools (5 primary and 6 secondary) did show, however, that whilst absenteeism was high for all children, it tended to be higher amongst orphans (Kadzamira et al., 2001). The debate is further complicated by difficulties inherent in using orphan status as a proxy for the impact of HIV and AIDS on children's educational access. Whilst there is strong evidence that orphan rates correlate with HIV prevalence rates (Ainsworth and Filmer, 2002), not all parental deaths can be attributed to AIDS. Furthermore, as argued by Boler and Carroll (2003) parental death is only one of many difficulties to arise as AIDS impacts on children's households. A recent cross-national review of the barriers to conventional schooling faced by children and young people affected by HIV and AIDS highlights a range of household, community and school-based factors, including: changing patterns of household organisation and child migration; increased poverty and demand for child labour; trauma and abuse; discrimination and a loss of social cohesion; lack of educational support and poor quality of education provision (Pridmore, 2008). More needs to be known about how the wide

spectrum of economic, social and psychological disadvantages faced by many orphans and other children made vulnerable by HIV and AIDS impacts on their educational access and attainment within the country-specific context of Malawi – and what factors can potentially support such children's retention in school.

Evidence from research in Malawi and neighbouring SADC countries suggests that not enough is being done in schools to support orphans and other children affected by HIV and AIDS (Bennell, 2005; Kadzamira et al., 2001; Kendall and O'Gara, 2007; Pridmore and Yates, 2006; Robson and Sylvester, 2007). Pridmore and Yates (2006) note that education sector responses to HIV and AIDS tend to focus on curriculum-based interventions and teacher training, rather than direct support for those affected by HIV and AIDS. Kendall and O'Gara (2007) argue that FPE policies are not sufficient to ensure inclusion and support for vulnerable children in the context of HIV and AIDS. They further state that such children have specific needs that have to be actively addressed by schools and collaborating partners if equitable access is to be achieved. Drawing on lessons from non-formal education, there is a call for education systems and conventional schooling to become more flexible and accessible to all children, including those affected by HIV and AIDS (Hepburn, 2001; Kadzamira et al., 2001; Robson and Sylvester, 2007). Pridmore and Yates (2006) conclude that, in the context of HIV and AIDS, a powerful argument can be made for new models of schooling that reach out to young people who face difficulties in accessing education. It is within this context that a three year research project coordinated by Department of Education and International Development, Institute of Education has been set up to explore the potential role of open, distance and flexible learning (ODFL) in Malawi and Lesotho (both countries with high HIV prevalence) in overcoming barriers to educational access and attainment presented by HIV and AIDS (see below).

## 1.3 Background to the research

This report presents findings from the second phase of the SOFIE research project. The research focuses on young people affected by HIV and AIDS and aims to improve their access to learning and increase retention through the use of ODFL strategies that complement and enrich conventional schooling.

For the purposes of the project ODFL is defined as those learning opportunities which attempt to "reduce barriers than can often inhibit learning and to enhance access…barriers [that] may be a result of the physical separation of learners from teachers, or due to the inability of learners and teachers to meet at mutually exclusive times" (Hodgson, 1993: 85-86, cited in Pridmore and Yates, 2006). The main features of ODFL systems include "some combination of multimedia packages, learning workshops, counselling and tutorial support, modular courses, flexible timetabling, negotiated curricula and support through guidance" (Pridmore and Yates, 2006).

The SOFIE project is guided by the following central research question:

> *To what extent can barriers to education access and attainment presented by HIV and*
> *AIDS be overcome using open, distance and flexible learning (ODFL) as a complement*
> *to conventional schooling?*

The project commenced in April 2007 with the preparation of five background papers to review factors that influence access to schooling in high HIV prevalence countries, provide a situational analysis of education sector responses to issues of access for vulnerable groups, including ODFL initiatives, and provide background and policy context to the study, with a focus on Malawi and Lesotho.  As well learning more about what ODFL initiatives, structures

and networks are currently in place that effectively deliver education to vulnerable young people, these papers informed the design of the subsequent empirical research.

The design of the empirical research follows a mixed methods approach, which consists of two sequential phases (Creswell, 2003). In this design, qualitative multiple case studies are first used to collect and analyse data to provide rich, contextual data on the factors influencing the schooling of children affected by HIV and AIDS inform the development of an ODFL intervention. The second phase, the intervention, will use an experimental design to assess the impact of the intervention on the retention and attainment of pupils in primary schools in high HIV prevalence areas in rural Malawi. Embedded within this second phase will be the collection of additional qualitative data to evaluate the processes involved in the intervention and elaborate on the findings of the intervention. The rationale for using mixed methods is that the combination of both qualitative and quantitative approaches allows for a more comprehensive understanding of the issues inherent in the research problem (Creswell and Plano Clark, 2007; Morse, 1994).

## 1.4 Research team and timetable of main activities

Research activities for the case studies took place during January to April 2008. Following the selection of the districts, the principal researcher held initial planning meetings in both districts with district staff and non-governmental organisations (NGOs) to finalise the selection of schools and identify community based organisations (CBOs) who would be willing to participate in the research. In March 2008, CBO representatives plus two research assistants, who were to join the principal researcher as the research team, underwent a 5-day training session. They were also introduced to the purpose of the research and assisted in the piloting and development of the research instruments.

The research assistants were recruited from a pool of young people frequently used by research centres at the University of Malawi. One male and one female research assistant were recruited, both with previous experience of qualitative research methods and good language skills in both Chichewa (spoken in Phalombe) and Chitumbuka (spoken in Mzimba). The CBO representatives were all young school-leavers – all male - who were volunteering with CBOs working with orphans, out-of-school youth and/or households affected by HIV and AIDS. Whilst it was not anticipated that the CBO representatives would conduct interviews, all members of the research team contributed to the refining of the research instruments. The CBO representatives also provided valuable information on the specific settings of the selected schools, assisted in negotiating entry to communities and advised on numerous logistical issues once in the field.

Visits to case study schools in Phalombe took place over a period of two weeks in March 2008. On return, a break for the school holidays gave time to complete transcribing and translation of the interviews and to familiarise the research team with the Chitumbuka translations of the instruments. Visits to case study schools in Mzimba South were completed by April 2008. Additional data on pupil attendance was collected in a later visit to schools in October 2008.

## 1.5 Report structure

The following sections of this report present, firstly, a discussion of the methodology developed for the initial case studies (Section 2), including the research questions and design; the research sites and the sampling of participants. This continues with a description of the methods of data collection and highlights ethical considerations and limitations of the study. Section 3 provides greater detail on the context of the case studies and presents a

cross-case analysis and discussion of the findings[4]. In Section 4 the report concludes with a summary of the key findings and the implications for the design of an open and flexible educational model for intervention.

---

[4] In the report, names of the case study schools have been changed, as have the names of any individuals referred to.

# 2 Methodology for the case studies

## 2.1 Research design

As noted above, and working within an interpretative paradigm, a multiple case study design was developed as part of a formative research strategy to inform a forthcoming intervention package for the SOFIE project. The qualitative data collected will contextualise the intervention and provides insights into the perceptions and experiences of children and young people affected by HIV and AIDS. In doing so, the research aims to answer the following questions:

- *What are the factors at school and community level that influence access to learning and retention in conventional primary schools for children affected by HIV and AIDS?*

- *To what extent do schools support access to learning and retention of children affected by HIV and AIDS?*

- *What educational strategies can be used to support and complement conventional schooling to improve access to learning and retention of these children?*

The research was essentially explorative in nature, providing detailed, in-depth descriptions of factors at work within schools and communities that can either support or raise barriers to the access and retention of children affected by HIV and AIDS. Case study design lends itself well to situations where it may not be possible, or desirable, to distinguish the issue under investigation from its context (Yin, 2003:67). This has important advantages for gaining insight into issues of access and participation in education, where a multiplicity of factors is likely to influence any particular child's schooling. As case study research works within 'bounded systems', it is important to establish the unit of analysis for the research (Yin 2003, Creswell, 2007). In this study the unit of analysis is the primary school and its immediate catchment area, identified as varying numbers of discrete clusters of villages around the school.

A multiple case study design was adopted to explore how issues of access and retention play out across several contexts. The use of more than one case anticipates and addresses possible criticism of the validity of the findings from a single-case design and explores a particular phenomenon or concern, rather than being of solely intrinsic value (Stake, 2000; Yin, 2003). Guided by this, two cases were located in separate districts of contrasting socio-cultural contexts: Phalombe and Mzimba South. Two additional cases were selected from the same two districts to further support and strengthen conclusions drawn from the findings. The two districts contrast with each other in terms of differing inheritance patterns (i.e. matrilineal and patrilineal).This choice was informed, in part, by the literature on the impact of orphanhood and HIV and AIDS on the well-being of children, which suggests differential effects within matrilineal and patrilineal societies.

**Text box 1: Defining orphans and children affected by HIV and AIDS**

Estimates suggest that over half a million children in Malawi have been orphaned by AIDS-related deaths (UNICEF/UNAIDS/USAID, 2004). The government follows international convention by defining an orphan as "a child who has lost one or both parents because of death and is under the age of 18 years" (Government of Malawi, 2005:11). Yet such conventions create tensions with the Malawian context and local concepts of what defines a child and an orphan. Kadzamira et al. (2001) argue that the government definition of an orphan is too restrictive, because many school-going children are 18 years or over, particularly at secondary level, and, as such are still heavily dependent on adult support. Conversely, culturally, once an adolescent has borne a child and/or is married, they are assumed to have adult status and thus might be excluded from requests for information on numbers or circumstances of orphans in communities. This is of particular concern with regard to school dropouts, many of whom would quickly enter into marriage. In order to avoid such exclusion, this study did not strictly adhere to a definition of an orphan based on age and, at the same time, actively sought out adolescent parents or those in early marriages.

The term 'sibling-headed household' (rather than child-headed household) is used to describe households where siblings and/or other close relatives (such as cousins) are living by themselves after the loss of adult support, again without strict limits on age. Sibling-headed households, although a relatively new phenomenon, come close to the traditional concept of orphanhood, which is strongly equated with the loss of material support. In discussions, it was not unusual to find participants in the case studies to refer to a change in circumstances for orphaned children, such as increased material support or financial independence, which would render them no longer orphans. The government definition of a vulnerable child as one who "has no able parents or guardians, is staying alone or with elderly grandparents or lives in a sibling-headed household or has no fixed place of abode and lacks access to health care, material and psychological care, education and has no shelter" is perhaps a more encompassing and culturally accessible concept (Government of Malawi, 2005:11), although the heavy influence of donor agencies in Malawi and widespread media coverage of programmes targeting orphans, has meant that many are now familiar with a more westernised concept of an orphan.

Whilst quantitative research into the impact of HIV and AIDS on children in Malawi, has often focused on orphan status (Crampin et al., 2003; Floyd et al., 2007; Sharma, 2006), this is problematic, not only because of assumptions that all orphans are AIDS-related, but that this can exclude many other children directly affected by HIV and AIDS (Streuli and Moleni, 2007). For the purposes of this study, the term 'children and/or young people affected by HIV and AIDS' includes, but is not limited to, those having lost a parent or guardian to AIDS; those who have HIV+ parents or guardians; those with parents or guardians who are in poor health or chronically ill as a result of AIDS-related diseases or symptoms or those living in households caring for the chronically ill; those who themselves are HIV positive.

However, as well as this 'predicted' contrast, the chosen cases also differ in other historical, geographical and socio-cultural contexts. Within each district the case study school is located within either a rural or semi-rural setting (defined as within 2km of a rural trading centre). Although this variation could weaken the replication of findings within pairs of cases, the design gains by illuminating potentially different situations and experiences within a similar socio-cultural context.

## *2.2 Sampling*

## Selection of districts

The two districts were selected according to criteria agreed by the SOFIE project team. These included: high HIV prevalence rates, high dropout rates in primary schools and contrasting socio-cultural contexts (see above). Another concern was that the project should not enter districts where there was already a high level of donor intervention. It was agreed that the research should focus on rural districts, as enrolment is lower and dropout higher than in urban centres. Characteristics of the two selected districts – Phalombe and Mzimba South – are summarised in Table 1 below.

## Selection of schools

Case study schools were purposively selected from a larger group of 40 schools (20 in each district) randomly sampled for the proposed intervention under the SOFIE project. In Phalombe the sampling frame for these 20 schools consisted of all government primary schools within the district, excluding junior primary schools and schools further than 10km from the nearest secondary schools. In Mzimba South, the same criteria were used, although due to the much greater size of Mzimba South compared to Phalombe, the sampling frame was restricted to one Traditional Authority (TA), TA M'mbwela. This gave a sampling frame of 70 schools in Phalombe and 60 in Mzimba South. Case study schools were selected in consultation with district government staff and extension workers who helped identify areas of particularly high HIV and AIDS impact and schools believed to have high rates of dropout. Another criterion for selection was that that local CBO or NGOs were working in the areas and willing to participate in research activities. A description of each school is presented in Section 3.

**Table 1: Summary of characteristics of selected districts**

| Characteristic | Phalombe district | Mzimba South district |
|---|---|---|
| Inheritance pattern | Matrilineal | Patrilineal |
| Tribe | Predominantly Lomwe, some Yao settlements | Ngoni/Tumbuka |
| Religion | Predominately Christian, small minority of Muslims | Christian |
| HIV adult prevalence (15-49 yrs )[5] | 16% | 14% |
| Net primary attendance rates[6] | 73% | 92% |
| Dropout rates[7] (Standard 6) | Boys 9%, girls 12% | Boys 10%, girls 12% |
| Repetition rates (Standard 6) | Boys 12%, girls 11% | Boys 17%, girls 13% |

---

[5]     National AIDS Commission sentinel sites data 2003 (NAC, 2003)
[6]     Data from Malawi Demographic Health Survey (DHS) 2004 (NSO, 2005)
[7]     Drop out rates and repetition rates from EMIS data, 2007 (MoE, 2007)

## Sampling of participants

Purposive non-random sampling was used to obtain samples of participants within each case study. Through a 'funnelling' process described below, children identified as from households affected by HIV and AIDS were sampled as a sub-group of a wider sample of orphans and other vulnerable children. Tentative lists of orphans and other vulnerable children– both pupils and those out-of-school – were compiled during initial meetings held at each school with various stakeholders (members of CBOs previously identified as working with orphans and vulnerable children and/or involved in home-based care activities; School Management Committee (SMC) representatives; school heads; village heads and government extension workers). Resulting discussions produced rich data about the household circumstances of orphans and vulnerable children in the communities. At this stage, ethical concerns about linking given names with 'AIDS research' in open meetings, meant that there was no specific focus on identifying HIV and AIDS affected households. Lists were subsequently compared with available documentation and/or local knowledge of CBOs and government extension workers (e.g. lists provided by health surveillance assistants) in order to verify the names given and highlight any households known or suspected to be affected by HIV and AIDS. These initial processes of identification and verification varied at each research site, but in all situations the research team was guided by the knowledge of those living and working in the communities.

From these initial lists, 12 pupils from Standards 5 to 8 (6 male, 6 female) were invited to participate in half-day mini-workshops. Names of children and youth recorded as out-of-school were compared to school records in order to identify those who had dropped out of school in senior classes within the last one to three years. Numbers out-of-school children and youth of invited to the mini-workshops were slightly over-sampled to allow for non-attendance, but despite this, equal gender composition of the participations was not always achieved (see Table 2), as several of those who confirmed attendance did not appear on the day of the activities (see Section 2.7).

**Table 2: Showing numbers of children/youth who attended mini-workshops, by case study school**

| Activity | Duma | | Namalongo | | Kamunda | | Pamoza | | *Total* | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | M | F | M | F | M | F | M | F | *M* | *F* | *T* |
| **Out-of-school workshop** | 2 | 6 | 6 | 3 | 8 | 4 | 5 | 5 | *21* | *18* | *39* |
| **Pupils workshop** | 6 | 6 | 5 | 7 | 6 | 6 | 6 | 6 | *23* | *25* | *48* |

In the final 'funnelling' of the sampling process, visual representations of household circumstances and participants' life histories produced during mini-workshops, as well opportunities provided to talk to and observe participants informally, informed a final purposive sample of 6 children and young people per case study site for follow-up interviews. In this selection, the main criterion was to identify those from households known or suspected to be affected by HIV and AIDS, although care was also taken to try and ensure coverage of a range of different household circumstances.

This final sample is summarised in Table 3 below. The age of pupils who were interviewed ranged from 14 to 17 years; for out-of-school ages ranged from 15 to 24 years. As Table 3 shows, more than half of all young people interviewed were double orphans, perhaps not surprising in the context of HIV and AIDS. All but one of the single orphans had lost a father. Of the single orphans, four were not living with the surviving parent and in three of the households the mother was in poor health, with symptoms associated with HIV and AIDS.

Five of the young people interviewed lived in sibling headed – households[8]; three (all out-of-school) were heading the households themselves.

**Table 3: Numbers of young people interviewed, by case study school, showing selected characteristics.**

| School | Gender | | Orphan status | | | Schooling status | | Sibling-headed household |
|---|---|---|---|---|---|---|---|---|
| | Male | Female | Single (father died) | Single (mother died) | Double | In-school | Out-of-school | |
| **Duma** | 3 | 3 | 1 | 0 | 5 | 4 | 2 | 2 |
| **Namalongo** | 2 | 4 | 3 | 0 | 3 | 3 | 3 | 2 |
| **Kamunda** | 4 | 2 | 2 | 1 | 3 | 3 | 3 | 1 |
| **Pamoza** | 2 | 4 | 2 | 0 | 4 | 4 | 2 | 0 |
| *Total* | *11* | *13* | *8* | *1* | *15* | *14* | *10* | *5* |

## Sampling of other participants

In addition to the sample of young people affected by HIV and AIDS, several other groups of people participated in the research: guardians of interviewed children, teachers, SMC and Parent-Teacher Association (PTA) members, parents and several key informants living and/or working in the schools' catchment areas (see Table 4). Parents and guardians of the young people interviewed were sampled on a largely opportunistic basis – those who were available and willing to be interviewed during a household visit. A number of individuals had been identified as possible key informants prior to arrival at the case study schools: school heads, village heads and government extension workers, such as primary education advisers (PEAs). Throughout the week spent at the school, additional key informants were identified and approached for interviews as more was learnt about the roles and responsibilities of various individuals and groups within the communities. Teachers and PTA and SMC member were invited to join Focus Group Discussions (FGDs). The SMC chair and/or PTA chair assisted in the selection of approximately equal numbers of male and female members. In three of the schools, all teachers were invited to participate. In Namalongo, where teacher numbers were greater, teachers from senior classes were invited.

**Table 4: Groups of participants, by gender and by school**

| Participants | Duma | | Namalongo | | Kamunda | | Pamoza | | Total | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | M | F | M | F | M | F | M | F | M | F | T |
| **Teachers** | 6 | 1 | 5 | 2 | 3 | 1 | 2 | 5 | 16 | 9 | 25 |
| **Guardians** | 2 | 2 | 4 | 2 | 1 | 6 | 3 | 4 | 10 | 14 | 24 |
| **Key informants** | 5 | 2 | 5 | 2 | 5 | 1 | 6 | 0 | 21 | 5 | 26 |
| **FGD members (SMC/PTA)** | 4 | 2 | 3 | 4 | 4 | 3 | 4 | 3 | 15 | 12 | 17 |

---

[8]  Although, officially the term sibling-headed households refers to young people under the age of 18, the term is used somewhat more loosely here. It also includes those who grew up in such households at the time they dropped out of school, which included those young people currently heading households, but are now over 18 years in age.

## 2.3 Methods and tools for data collection

Several methods and multiple sources of data were used, including interviews, focus group discussions, document collection, informal observation and participatory tools used during mini-workshops.

### Participatory tools used during mini-workshops

Separate half-day mini-workshops were held with in-school and out-of-school children and youth. The objectives of the mini-workshops were two-fold: to provide space for young people to explore and discuss the barriers to schooling faced by orphans and other vulnerable children; and to aid selection of several young people for follow-up interviews (see section 2.4) A series of drawing and writing activities took place, drawn from a wider 'toolkit' of participatory research techniques. These techniques are listed in Table 5 below.

**Table 5: List of participatory techniques used during mini-workshops with pupils and out-of-school children and youth**

| Activity | Description | Information produced |
|---|---|---|
| Problem trees | Participants draw a 'tree', with the roots representing causes of the problem under discussion; the roots representing the consequences | Causes and consequences of absenteeism & dropout. |
| Pair-wise ranking | Using a matrix listing several identified issues, each issue is paired against another (using symbols drawn on cards) and participants chose which they feel is the more important. Scores for each issue are calculated and a final ranking produced. | Ranking of causes of absenteeism & dropout, by gender. |
| Household diagrams | Participants depict their households through drawings, indicating relationships to the participant. | Household composition, showing ages and schooling of other children. |
| River of Life | Participants draw a 'river', and as the river winds, the line goes up or down representing visually the high and low points in their lives. | Depiction of major events in participants' lives. Also indication of points when their schooling was affected |

Household diagrams and 'river of life' drawings were used to identify young people for follow up interviews. 'River of life' drawings also provided important insights into critical events in the young people's lives and how these impacted on their education. Young people indicated on their diagrams (by placing a sticker) times when their access to learning had been impaired. Perceived reasons for absenteeism, withdrawal and permanent dropout amongst orphans and other vulnerable children were highlighted using 'problem trees' and a pair-wise ranking technique. Working with 'problem trees', participants identified a range of causes for absenteeism and dropout and then ranked those they believed to be the most important using pair-wise ranking (see Figure 2). The summarised results of the pair-wise ranking by school, indicating girls' and boys' separate responses, can be found in Appendix 1. Plenary sessions were used to discuss emerging issues and make recommendations.

**Figure 1: Example of 'river of life'. 14 year-old male pupil, Namalongo School**
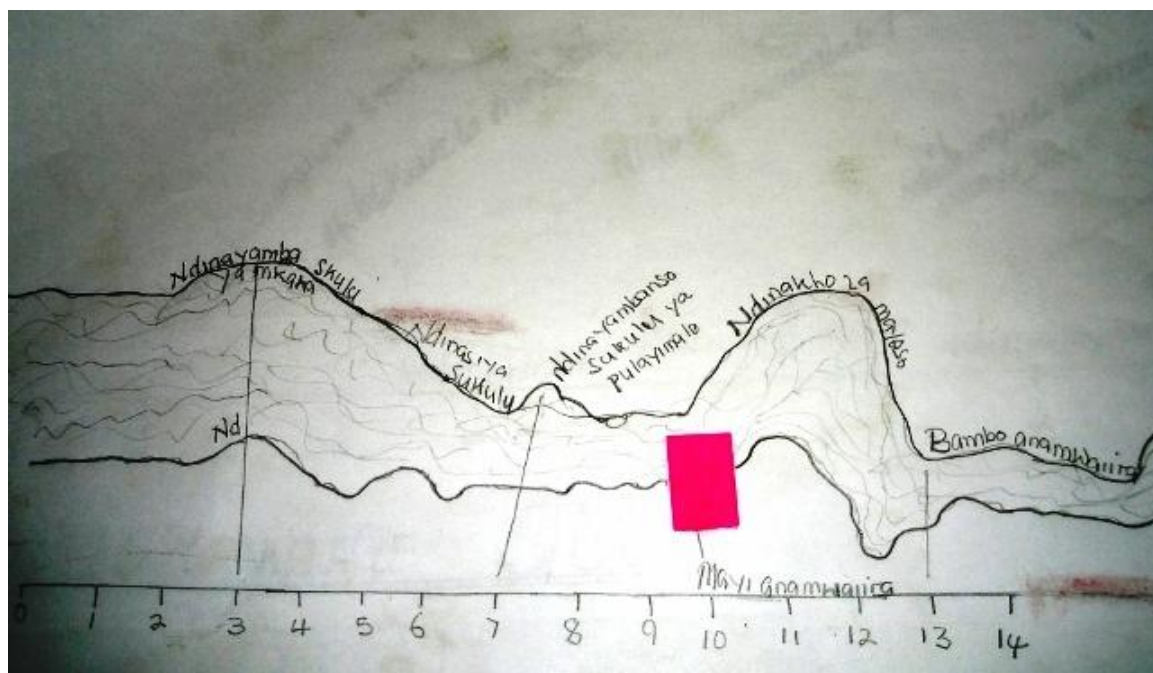


## Interviews

In-depth, semi-structured interviews were held with selected young people who were known or suspected to have come from households affected by HIV and AIDS. The interviews were held at the young person's home and conducted by trained research assistants of the same sex (see Section 1.3). Drawings produced by the young people during mini-workshops were used to stimulate discussion during the interviews. In particular, they were asked to take the interviewer through their 'river of life' drawings, describing the key events that had been highlighted and discussing to what extent these events had affected their schooling. During visits to households, a second research assistant interviewed the guardian or parent separately. When the parent or guardian was not available, alternative arrangements were made to meet them at a time suitable for them. The interviews were conducted using a semi-structured interview schedule to verify information on the child's circumstances and life events and to gather parent/guardian's perspectives on education and their child's schooling. Where permission was given, all interviews with children and their parents/guardians were recorded using a digital recorder. Short summary reports were written up by research assistants following the interviews. Semi-structured interviews were held with key informants living and/or working in the schools' catchments areas. Questions focused on issues of educational access and retention, the impact of HIV and AIDS on schooling, school and community links and support for children affected by HIV and AIDS.

## Household roster and observation sheet

During household visits, a short, structured household roster and observation schedule was completed, with information provided by the parent/guardian. Information was gathered on household composition, deaths in the household and the socio-economic status of household members.

**Figure 2: Example of pair-wise ranking matrix: reasons for absenteeism, Pamoza School**



## Focus Group Discussions

Focus group discussions were held with SMC/PTA members and teachers. In adaptation of a method used by Brinkman et al. (2007) in their study into the competencies of rural development professionals in tackling issues of HIV and AIDS, four short case stories were read out at the start of the FGD session to focus the thoughts of members and stimulate discussion. Ensuing discussions focused on difficulties faced by orphans and other vulnerable children in their communities in relation to accessing learning, the specific disadvantages faced by children affected by HIV and AIDS and issues of support for orphans and children affected by HIV and AIDS. The FGD with teachers explored additional issues related to the inclusion of children affected by HIV and AIDS in their schools.

## School checklist

A short, structured school checklist was used to gather quantitative data on the individual schools (enrolment, numbers of dropouts etc.) and collect information on the school environment. Additional data on pupil attendance was collected during second school visits later in the year (see Section 1.4)[9].

---

[9]    This data was collected during visits to schools as part of a wider baseline survey for the intervention phase of the project. Attendance data – disaggregated by orphan status – not available during the case study visits, but was recorded following distribution of registers adapted for that purpose at that time.

**Observation**

During the week's activities, informal observation of school events (assembly, break time, club activities) and lessons with senior pupils (approximately 2 per school) was conducted. Unstructured field notes were used to record observations of interactions between pupils and lesson delivery to look for examples of exclusionary practices.

## 2.4 Data management and analysis

Recorded interviews and FGDs were transcribed by research assistants in the field and subsequently translated into English. Where audio recordings were not produced, full reports were written up by the interviewer from detailed notes taken during the interviews. Short mini-workshop reports were also written up and included English translations of participant's materials and notes taken during plenary sessions. As a quality control exercise, independent readers compared English translations against the original texts and audio recordings. All typed transcripts and reports were up-loaded onto Nvivo software for coding and analysis. Written and visual data from problem trees and pair-wise ranking matrices was analysed by school and group (pupils, out-of-school, teachers), categorised and recorded in tabular form. The emerging categories were used to expand an initial *a priori* list of codes informed by the literature. Close reading of the texts yielded additional issues and themes that were incorporated into the coding. Categorical aggregation of issues emerging from the coded text and preliminary analysis provided a framework for further analysis and presentation of the data (Cresswell, 2007). These categories (or themes) were used in a cross-case synthesis to compare findings across the four schools and highlight similarities and differences. Both quantitative and qualitative data was used to provide brief descriptions of the context of each case study.

Data from multiple sources (child interviews, guardian interviews, river of life drawings and household rosters) was used to build up a picture of the background and life history of the index children interviewed. Data was entered into a table summarising several key characteristics and was used to write up detailed vignettes. Examples of these vignettes are presented in Sections 4, 5 and 6 to illustrate further the findings under discussion.

## 2.5 Ethical issues and concerns

Initial community meetings were a key entry point into the communities. Trained CBO/NGO representatives familiar with the study were able to ensure that proper protocol was followed and permission to enter villages negotiated. Concerned that the collection of names of orphans and other vulnerable children would raise false expectations regarding future distribution of aid, this issue was addressed frankly and transparently during the meetings.

A critical ethical concern in this study was that the process of identifying children and households to participate in the research should not contribute towards children being stigmatised in schools or the communities. During initial community meetings care was taken to ensure that the focus of research was described as issues of access of vulnerable and orphaned children, rather than specifying those affected by HIV and AIDS. Where later corroboration was sought regarding affected households, this was done on a one-to-one basis with government extension workers, CBO/NGO staff and/or school management

The funnelling process of selection of children meant that selected children were initially part of a wider, more heterogeneous group, so that fellow pupils were less likely to suspect that they had been chosen because of specific criteria. All children were aware beforehand of the arrival of the research team and that some pupils would be invited to participate in their activities. Children were told simply that they were to be selected to represent children of

their age. Similarly, out-of-school youth, invited verbally to attend by CBO staff or extension workers, were told that they would be representing school dropouts. Despite this, during mini-workshops several of the young people were quick to realise that they had been chosen for their orphan status. This was not necessarily construed negatively however, as some of the pupils appeared comfortable and happy with the opportunity to articulate the concerns of 'us orphans'. At no point during mini-workshops were issues of HIV and AIDS discussed unless raised by the young people themselves. Care was also taken to ensure that informed, verbal consent was sought and received at each stage of the research process.

Prior to and during visits to case study schools regular contact was made with the districts' social welfare office and extension workers. In Phalombe where visits to households of out-of-school youth revealed situations of near destitution and ill health amongst household members, social welfare officers were informed of names so that they could follow up.

## 2.6 Limitations and challenges

One limitation of the use of a case study approach is that it is not possible to generalise up from case studies to a wider population. However, as noted above, the selection of multiple cases does address such a limitation by strengthening confidence in the external validity of the findings. Furthermore, as this research was designed to first and foremost to inform innovation in and through schools - schools located in similar settings to the case studies - it could be argued that generalisability beyond the immediate sample of intervention schools is not a primary objective of this phase of the research.

A challenge faced in all cases was a lack of up-to-date records at schools. Apart from Namalongo, schools did not have complete records of school dropouts and attendance registers were not all regularly up-dated. Both the schools in Mzimba South did not have detailed, recent records of orphans or other vulnerable children in their care. Another challenge was the difficulty in reaching out-of-school youth who had dropped from school within the last year. In schools in Phalombe, a number did not turn up to the mini-workshops, although invited. It is possible that the proximity of the meeting places to the school was a deterrent. In Mzimba, several of the girls identified as recent dropouts had married and, as is the custom, moved elsewhere to their husband's villages. This skewing in favour of participants who had dropped out two or three years earlier is reflected in the older age range of participants in the out-of-school mini-workshops. A similar concern was that few of the key informants interviewed were female. All school heads were male, as were the executive members of the PTA and SMC in all schools. Where attempts were made to seek out female community leaders, few were found.

# 3 Context of the case studies

This section first provides a description of the four case study schools and their surrounding communities. It includes participants' perspectives on the impact of HIV and AIDS at their schools and whether children affected by HIV and AIDS face additional disadvantage in accessing learning. It draws on findings from preliminary activities with orphans and other vulnerable young people during mini-workshops, as well as interviews with key informants.

## 3.1 The case study schools

Table 6 offers a comparison of the four case study schools by selected characteristics. Narrative descriptions of each of the schools follow below.

**Table 6: Selected characteristics for case study schools**

| Characteristic | Schools | | | |
|---|---|---|---|---|
| | **Duma** | **Namalongo** | **Kamunda** | **Pamoza** |
| Location | Rural | Semi-rural | Remote | Semi-rural |
| Proprietor | LEA | Roman Catholic (integrated) | Roman Catholic | CCAP |
| Enrolment  (2008) | 1162 | 2222 | 926 | 910 |
| Gender parity ratio (girls: boys) | 1.05 | 1.01 | 1.06 | 0.91 |
| Gender parity ratio (senior classes) | 1.06 | 0.98 | 0.94 | 0.83 |
| No of teachers | 8 | 18 | 5 | 8 |
| Female teachers (%) | 1  (12%) | 8   (44%) | 1  (20%) | 5   (60%) |
| Pupil: teacher ratio | 1: 145 | 1: 123 | 04:05:00 AM | 1:113 |
| No of classrooms | 14 | 16 | 6 | 12 |
| Pupil: classroom ratio | 1: 83 | 1 : 139 | 1: 154 | 1: 75 |
| Pupil: toilet ratio | 1: 96 | 1: 185 | 1: 58 | 1: 45 |
| School performance (% selected to secondary) | 27% | 45% | 18% | 19% |
| Repeaters in senior classes (2008) | 4% | 17% | 9% | 20% |
| Dropouts from senior classes (2007) | 7.8% | 3.2% | 11.1% | 6.4% |
| Orphans | 16% | 18% | 13.00% | 16% |
| Double orphans | 4% | 6% | Not available | Not available |

## Duma Full Primary

Duma Primary is a remote rural school in the north of Phalombe near Lake Chirwa. It is located several kilometres from the nearest minor trading centre on a dirt road that branches from a main unimproved dirt road leading to the Mozambique border. The school has an enrolment of over a 1000 pupils, but is run by just 8 teachers, two of whom have arrived within the last year. Class sizes for the infant sections are close to 300 pupils per teacher, although this number dwindles to around 60 pupils per class in the senior classes (see Table 6). According to the PTA Chair part of the reason for the large enrolment is that Duma has a good reputation for teaching and many children come there from further a field.

The school buildings consist of three brightly-decorated classroom blocks and an office block recently built under a DFID-funded construction programme and several older blocks in poorer condition. Blocks of well-constructed toilets and hand washing facilities were also provided under the same programme, although the latter do not function as the school borehole is broken and there is no other water source at the school. The area in which school is situated has a high water table of brackish water and access to clean water is a big concern for local inhabitants. Malaria and bilhariza are common illnesses amongst pupils.



**Figure 3: A newly constructed classroom block at Duma Primary**

The school compound is tidy and well swept. All senior pupils are expected to stay behind after classes at least 2 days a week for 'manual labour' to clear the grounds. The responsibility for cleaning classrooms lies with the girls only, however.

Interactions with girls at the school found them particularly quiet and submissive and two of the children interviewed independently revealed that one teacher at the school sexually harasses the girls.

Whilst the school head noted that pupil attendance is generally good, both he and the PEA agreed that absenteeism is high during the fishing season, especially amongst boys, some of whom will go and stay at the lake - often for several weeks at a time – eventually leading to permanent dropout. This is reflected in the schools records, which show that a higher proportion of boys dropped out the previous year compared to girls. Key informants observed that absenteeism and dropout is generally higher amongst orphans and children from poorer families.

The catchment area of the school consists of some 13 villages. The majority of these belong to the matrilineal Lomwe tribe, which is the main tribe in the district. There is a small settlement of members of the Yao tribe who originally migrated in from neighbouring Zomba district. The Lomwe are predominately Christian whilst the Yao, also matrilineal, are Muslim. Under the matrilineal system, on marriage the husband is expected to settle in the wife's village and decisions about children's welfare and schooling can often be dictated by the maternal uncles rather than the father. According to key informants, divorce is high in this area and there are many female-headed households. Households are heavily reliant on subsistence farming and, although some may supplement this through small-scale trading and sale of surplus crops or farm produce, there is much evidence of poverty in the area: poor housing, lack of farm inputs, few livestock etc. There is poor food security, with heavy rains and waterlogged soils often causing damage to the staple crop, maize. In times of hunger, many households resort to *ganyu* (hired labour) in attempts to earn cash or food. Duma is the residence of the Group Village Headman (GVH), who is also chair of the School Management Committee. He notes an increased interest in education amongst community members in recent years and he himself is keen to support the school and ensure children are in school. Key informants describe a good relationship between the school and the community, which largely revolves around support for school development activities.

**Namalongo Full Primary**

Namalongo Full Primary is a large school on the outskirts of sprawling trading centre in the south of the district. This area is also close to the Mozambique border and there is regular cross-border travel and trade, with some households owning land in Mozambique. A large market is held once a week trading in crops and household goods. The school is located adjacent to the TA's office and hosts the Teacher Development Centre (TDC) for the area. Namalongo enrols over 2000 pupils and infant and junior classes are streamed. Even so, with only 18 teachers, class sizes are still large. The school is integrated, with around 14 blind students attending classes. They are supported by a specialist teacher and a resource centre – and all board at the school. Namalongo is a high performing school, with almost half of its pupils selected to secondary school.

The school buildings consist of 2 quadrangles of classroom blocks: one of older blocks, still in relatively good repair; a second built during the 1990s when the school was a centre for refugees fleeing the Mozambique civil war. The toilets are few and in poor condition. Water is available from a borehole at the TDC and a newly built standpipe. There is large playing field which is also used by the surrounding communities for recreational activities. The construction of a small kitchen and storeroom is underway for the school's feeding programme funded by World Food Programme (WFP). As well as the provision of *phala* to all pupils, home rations are provided for all female orphans and male double orphans.

Community leaders and PTA/SMC members agreed that the introduction of the school feeding programme has had a positive impact on enrolment and attendance of pupils. However, the proximity of the trading centre remains a concern - absenteeism of pupils is high during market days when pupils, especially girls, are sent to sell wares. Boys were also said to be attracted to the trading centre to find *ganyu* or watch video shows. Key informants did contend that the problem of dropout at the school was limited. School records do show that the percentage of children dropping out in 2007 was relatively low compared to other case study schools (see Table 6) - and a comparatively high repetition rate for senior classes suggests that there is relatively strong retention amongst senior classes. The school head raised concern, however, about extended periods of withdrawal, such as during the harvesting season when children look for casual labour and some families even migrate to the north of the country to work on tobacco estates. Key informants agreed that irregular attendance and withdrawal is closely associated with household poverty and that orphans and girls are more likely to drop out permanently.

The school has a wide catchment area. There is some inward migration from other districts, but the majority of community members are Lomwe. Although matrilineal, *ulowoka* is a common practice in this area, where the wife will settle in the husband's village. Traditionally, if widowed or divorced she is expected to return to her own village taking any children from the marriage. Participants in FGDs described 'property grabbing' as another common practice, with relatives of the husband seizing any assets from the marital home. There is a strong tradition of farming in the area with much of the produce to the surrounding area and as far as Blantyre - the main industrial city in the south.

Whilst in the past education was not seen necessary for farming activities, community members note a change in attitudes in recent years. The GVH also observed that greater opportunities for access to secondary education and employment in the area have increased interest in education. Apart from one minor land disagreement, key informants agree that there is a good relationship between the school and the community, with community members supporting the development efforts of the school. The school provides a meeting place for many community-based activities, including sports activities, traditional dances and other youth activities.



**Figure 4: School pupils practicing traditional dances at Namalongo Primary**

## Kamunda Full Primary

Kamunda FP is a rural school some 25 kms north of Mzimba boma in TA M'mbwela, Mzimba South. It is situated on high land several kms along an unimproved road. The school is surrounded by a mixture of fields and scrub amongst scattered villages. The school buildings are basic burnt brick structures - originally community-built - with iron sheets and breeze block windows. One classroom block has mud floors with mud benches, the other has been improved, but the concrete floors are broken and there are no chairs. With insufficient classrooms, two classes either learn outside or in a small church next to the school. There are several mud-thatch toilets scattered around the campus, but they are in poor condition with no doors and are rarely used by pupils. A borehole adjacent to the school is shared with local villagers. With an enrolment of over 900 pupils and only 5 teachers, the school is seriously understaffed. Currently the school operates a split shift system, where junior classes arrive later in the morning, as infant classes are finishing for the day. Some classes are curtailed, however, and the school head admits that they do not follow a full daily timetable.

Key informants noted that, whilst many households struggle to send their children to school, absenteeism is notably higher during the months when food is scarce. In the communities around Kamunda this falls during first term. The school head explained that some children withdraw for much of the first term, or even fail to enrol, and that enrolment really only stabilises during second term. Key informants also noted that any permanent dropout from school is generally associated with older girls getting married and a few boys that leave to find work. The PEA noted that girls who are orphans are particularly vulnerable to dropping out, and that the relative wealth of men returning from South Africa, where many go to find work, can attract girls into early marriage to find support. School records for Kamunda showed that 14.8% of girls dropped out in 2007 compared to 8.6% of boys (see Table 7).

**Figure 5: Kamunda Primary, showing community-built classrooms**

Communities around the school are predominantly Tumbuka or Ngoni. These tribes follow a patrilineal system whereby *lobola* (usually cattle) will be paid on marriage by the husband's family. Any children from the marriage are considered to belong to the paternal village and if the husband dies or divorces the wife, the wife may return to her village, leaving the children behind. The practice of *chokolo* allows the brother (or other relative) of the deceased husband to marry the widow. With the advent of HIV and AIDS this practice is becoming less popular. Alternatively, if settled in the village she may be invited to remain and the elders assign someone to assist in working her fields. In this rural area, traditional practices of hospitality and respect were observed to be strong. In the latter case, for example, women and youth were frequently seen kneeling down when stopping to greet a male elder on the road. Polygamy is also practised. Migration to South Africa is common, with many men travelling there to find work - often over a period of several years - leaving behind one or more wives and children. Proceeds from these trips can be seen in some of the surrounding villages – a few of the houses are well built with iron sheets and solar panels. Cattle are considered the wealth of a household and the ox-cart is a common mode of transport. During FGD discussions community members reflected that over recent years attitudes to education have changed, with more and more people seeing the importance of sending their children to school. The relationship between the school and community is described as a good one, with several key informants remarking on the contributions made by communities to school development projects, such as the burning of bricks. A common concern is lack of teachers at the school.

**Pamoza Full Primary**

Pamoza FP is a long-established school located within a trading centre close to the Zambian border, to the far west of Mzimba South. The trading centre gains prestige from also being the seat of the Paramount chief for the region. Despite this the area is fairly remote, connected only by poor roads to other towns in the district. The school is built in a central location close to the offices of the traditional leader and the health clinic, facing a row of more than 10 teachers houses, some of which are rented out privately. A TDC, recently electrified, stand adjacent to the school buildings. The school has recently been re-built under the DFID-funded programme and the new classrooms are well-built and attractive with small painted borders on the outside walls. Permanent cement tables and benches furnish these classrooms. The programme also saw the construction of a headteacher's office, staff room and toilet blocks, although a system of using rainwater to flush out urinals and provide

water for washing hands is not functioning and the blocks smell badly, despite regular cleaning by pupils. With 12 classrooms in total, all children learn inside, but with only 8 teachers, none of the classes are streamed and class sizes in the infant section are well over 100 pupils.

According to the PEA and the school head, overall attendance has improved over recent years. They attribute this to mobilisation campaigns of NGOs and the new buildings, which attract pupils. The SMC noted that some villagers still do not do enough to ensure their children go to school, however, and all key informants agreed that absenteeism is high during the hunger period of January to March. Absenteeism is also high during weekly markets. As many as a fifth of all pupils enrolled in senior classes are repeating the year. Whilst the proportion of boys and girls dropping out from senior classes is similar, the poor gender parity ratio in favour of boys shows an overall lower enrolment of girls, with girls making up only 80% of pupils in senior classes. Key informants agreed that those that do drop out permanently are mainly over age pupils, girls, and orphans.



**Figure 6: School Head's office and staff room at Pamoza Primary**

As with Kamunda, communities around the school are Ngoni or Tumbuka, practising a patrilineal inheritance pattern. Cattle remain a symbol of wealth and there is a strong tradition of brewing and consumption of beer. Cultural norms and practices are more fluid in this area, however, as many villagers regularly travel to other parts of the district and the country for work and trade.

Several prominent families have members who were well educated and secured jobs in the civil service and armed forces, although many are now since deceased. Clusters of once well-built houses can be seen around the school, although many have fallen into disrepair. Households support themselves in several ways: through subsistence farming, cross-border trade in crops and other goods, market vending and running small grocery stores, video shows etc. in the trading centre. These incomes may be supplemented by remittances from family members working elsewhere, including South Africa.

The school is seen as a community meeting place by many around the school - meetings, choirs, clubs all regularly congregate there after the school day is finished. Despite this, the relationship between the school and the surrounding communities is sometimes strained. The SMC noted concern about the inappropriate behaviour of some teachers and some community members commented on high absenteeism amongst teachers, mainly to do private business. It was an open secret at the school that one of the male teachers had had repeated affairs with female pupils.

## 3.2 In summary: patterns of attendance, repetition and dropout

Whilst the extent and reasons for poor attendance and withdrawal from school differed amongst the four schools, some common issues emerged. Firstly, several key informants believed that changing attitudes to education and key interventions have helped to improve pupil attendance and retention in recent years**. Underlining this, at Namalongo, where school feeding has been introduced proportionally fewer children dropped out compared to other case study schools (see Table 6). Secondly, irrespective of overall attendance, key informants at all four schools observed that there were distinct periods of time during the school year when absenteeism rose and remained high, often for several weeks at a time. Thirdly, both semi-rural schools raised the proximity of trading centres as a concern with regard to pupil attendance. Even at Kamunda, where the weekly market is several kilometres away, teachers noted a marked absence of pupils on those days.

**Table 7: Percentage of pupils who dropped out of senior classes in 2007, by sex**

| School | Pupil dropout from senior classes 2007 (%)* | | |
|---|---|---|---|
| | Female | Male | Total |
| Duma | 7.6 | 11.8 | 7.8 |
| Namalongo | 4.9 | 1.7 | 3.2 |
| Kamunda | 14.8 | 8.6 | 11.1 |
| Pamoza | 6.0 | 6.7 | 6.4 |

* no. of pupils dropped out in previous year, as percentage of total no of pupils enrolled

The proportion of pupils dropping out is higher in the more remote schools (Kamunda and Duma), whilst the two semi-rural schools show comparatively higher repetition rates. This suggests a possible scenario where pupils in these schools have more opportunities to remain within the schooling system, whilst those in the rural schools, particularly Kamunda, may be all the quicker to leave permanently. In both schools in Phalombe, permanent dropout was said to be strongly associated with household poverty. In Namolongo and Kamunda the proportion of female pupils dropping out was higher than for male pupils. In Duma, more of the male pupils had dropped out, reflecting key informants comments about boys leaving school to join fishing at the lake.

In comparing the attendance of pupils recorded as orphans against non-orphans, in two of the schools (Namalongo and Kamunda) there was little significant difference between the mean percentage attendance of orphans and non-orphans in Standard 6 – and in Duma attendance amongst orphans was actually slightly higher than for non-orphans (see Table 6). In contrast, at Pamoza the attendance (and enrolment) of orphans was very poor compared to non-orphans, with no female orphans attending the week selected for data collection Record keeping for orphans at Pamoza had not been updated since first term, however, and it maybe that some of the orphans said to be enrolled had since dropped out. Of concern also is the low numbers of female orphans enrolled in Standard 6 at Kamunda, suggesting that a significant proportion had dropped out prior to entry into senior classes. Overall, these attendance rates suggest - with the exception of Pamoza – that orphanhood itself is not a strong determinant as to whether enrolled pupils attend classes or not, but that it could place them at greater risk of dropout. Unfortunately, information on numbers of dropouts by their orphan status was not available in school records. However, key informants from all four schools agreed that in senior classes girls are more likely to leave school early and that orphans of both sexes are at greater risk of permanent dropout.

**Table 8: Mean weekly attendance (%) of Standard 6 pupils (term 2) in case study schools, showing gender and orphan status**

| School | Weekly Attendance of Standard 6 pupils (%)* | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| | Orphan | | | Non-orphan | | |
| | Female | Male | Total | Female | Male | Total |
| Dindi | 84.4 (n=9) | 82.2 (n=9) | 83.3 | 78.8 (n=17 | 78.9 (n=18) | 78.9 |
| Nazombe | 100.0 (n=17) | 93.3 (n=27) | 95.5 | 96.3 (n=60) | 94.7 (n=38) | 95.7 |
| Kalweya | 100.0 (n=1) | 82.9 (n=14) | 84.0 | 84.4 (n=54) | 83.7 (n=49) | 84.1 |
| Edingeni | 0.0 (n=5) | 47.5 (n=8) | 29.2 | 88.0 (n=149) | 83.2 (n=124) | 86.2 |

*mean weekly attendance (sum of daily attendance/5) as proportion of pupil enrolment (n).

### 3.3 Impact of HIV and AIDS

Both districts where the case study schools were located were chosen, in part, because of their relatively high rates of HIV prevalence (see Table 1). In terms of ethnicity, the dominant tribe in Phalombe, the Lomwe, has the highest rates of adult HIV prevalence of any ethnic group in Malawi (19%). Similarly the Ngoni, who are the dominant tribe in TA M'bwera in Mzimba South, show a high rate of HIV prevalence (14.5%), particularly compared to the overall adult prevalence rate in the Northern region (8.1%) (NSO, 2005).

In TA Mmbwera, the migration of men to South Africa to find work has resulted in large numbers of *de facto* female-headed households and, according to district-level key informants, increased rates of HIV and AIDS. Migrant worker were said to frequently take additional wives or girlfriends during their extended stays in South Africa, so that on return they bring an increased risk of exposure to HIV. The polygamous structure of many households further compounds this problem. Some cultural beliefs and practices such as *chokolo* and certain night dances were also said to increase the spread of HIV infection.

Despite this, in Kamunda, key informants at the school were reluctant to acknowledge any significant impact of HIV and AIDS in the area. The school head argued that, being a more rural, less developed community, AIDS was not a common disease and the SMC chair felt that HIV and AIDS had little impact on the education of children in the area. The PEA and community leaders, however, noted that HIV and AIDS had resulted in increased number of orphans in the area many of whom faced difficulties attending school. District-level key informants stated that impact of HIV and AIDS was greater in larger, more urbanised trading centres. The border trading centre close to the Mozambique where Pamoza FP is located was said to be particularly hard-hit. Multiple deaths within once prominent families in the area were openly attributed to HIV and AIDS; leaving remaining family members, including many orphans, in much reduced circumstances. The school itself had also directly experienced the impact of HIV and AIDS – it had recently lost two teachers, a married couple, whose deaths were openly acknowledged as due to HIV and AIDS. Currently, one teacher at the school is receiving ARV medication. The PEA for Pamoza noted that he has lost 8 teachers to AIDS in his zone (13 schools) in recent years.

In Phalombe, there was less direct acknowledgement of specific households affected by HIV and AIDS. In more general terms the presence of HIV and AIDS in communities was

strongly associated with increased poverty and insecurity, particularly in the more rural areas. Orphaned children were perceived as having little material support and often being required to fend for themselves. In addition, the two school heads noted that HIV and AIDS in the wider school communities has resulted in reduced participation of parents and other community members in school development activities. One key informant, an NGO worker, observed that the spread and impact of HIV and AIDS is fuelled by high rates of separation, divorce and subsequent re-marriage in the district, increasing the vulnerability of women and children. This was said to be particularly common in the area around Lake Chirwa, where young men come to find casual work during the fishing season. During this time, their increased income can attract girls into sexual relationships, which may result in informal marriages.

Certain commonalities in the impact of HIV and AIDS on the case study schools emerged during interviews and focus group discussions. All school communities had experienced increased numbers of orphans described as lacking parental care and adequate material support. In all schools over a fifth of the children enrolled had lost at least one parent (see table 7), a proportion significantly higher than the percentage of orphans nationally (12.6%). Apart from some ambivalence amongst school management at Kamunda school, all key informants agreed that HIV and AIDS had contributed to increased absenteeism and poor performance amongst learners. In the two Phalombe schools, key informants also noted that coping strategies of households or individual children affected by HIV and AIDS would often result in school dropout.

In order to gauge whether children coming from households affected by HIV and AIDS are seen to face additional, specific difficulties in accessing learning, key informants were asked whether such children had the same chances to learn and participate in school as children from other potentially vulnerable groups, such as those from poor households. A similar question was posed during FGDs with teachers and community members.

**Table 9: Responses to 'do children affected by HIV and AIDS have the same chances to learn and participate in school, as other vulnerable children?**

| Responses (n = 23) | School | | | |
|---|---|---|---|---|
| | Duma | Namalongo | Kamunda | Pamoza |
| Community FGD | mixed | no | mixed | no |
| Teachers FGD | no | no | no | no |
| School Head | yes | no | yes | mixed |
| SMC Chair | yes | yes | yes | mixed |
| CBOs | no | - | no | no |
| PEA | no | no | no | no |

In the two more remote, rural schools, debate amongst community members brought mixed responses, with some members insisting that children from poor households are equally disadvantaged in terms of schooling, whilst others arguing that the additional burdens of the ill-health of parents in affected households negatively impacts on children's attendance and performance. Some representatives of school management argued that the lack of discrimination in schools meant that children affected by HIV and AIDS faced little comparative difficulty accessing education in relation to other children from poor households (see table 8). However, the majority of respondents across all school communities (19 out of the 24 interviewed), including all PEAs, teachers' groups and CBO representatives, concluded that children coming from households affected by HIV and AIDS suffer greater, additional constraints in accessing learning and participating in schooling, particularly for those in households where a parent is chronically ill. These and other constraints will be discussed in more detail in following sections below.

# 4  Household and community-related factors: Findings and discussion.

This section presents emerging issues and themes concerning household and community-related factors that impact on the schooling of children affected by HIV and AIDS. It focuses on drawing out those factors that directly influence school attendance, withdrawal and dropout, performance and participation in class of such children. It should be noted that no one factor necessarily stands in isolation, but either compound or mitigate constraints on schooling to varying degrees. In addition, several contextual factors also emerge, as part of the wider social milieu of young people's lives.

## 4.1 Ill-health in households

Across all school communities visited during the case studies the majority of key informants, community members and teachers' groups agreed that children coming from households affected by HIV and AIDS suffer greater, additional constraints in accessing learning and participating in schooling. One of the main reasons given for this was the difficulties faced by children with chronically ill parents or guardians. One such constraint mentioned, common across all four school communities, was that much of the burden of care for sick parents or guardians would fall to the children in the household, particularly the elder children. A male participant of the community FGD in Duma explained:

> The sick person will require more people to look after him/her[10]. The children will be given all sorts of chores like 'go and wash this', thus they can't go to school.

In addition, children are likely to take on additional household tasks that the sick adult could no longer perform, such as looking after younger siblings, drawing water, cooking and other household chores. According to cultural norms, much of the care-giving roles and household tasks are female responsibilities and, consequently, girls often bear the brunt of this work. Some tasks are more likely to fall to boys, however, such as looking after cattle and other livestock.

> If one's parents are infected, especially if it is the mother, all household chores are done by the learners. They cannot go to school.          *PEA, Pamoza FP*

> Let's say two houses are infected, but from one family comes a boy, the other a girl. Now, according to our customs as Malawians, women are the ones who mainly look after the sick. Likewise it means the girl will be more affected, because she will have to be near the sick person to give water, cook porridge for the patient, turning the patient, all these the girl child does. Then for cooking to take place you need firewood. Taking all this, it will need a girl child, because of our culture, whilst the boy may just command the girl to cook ...so after giving instructions to the sister, then the boy child has some time to go to school.
> *Male teacher, Namalongo*

Whilst reflecting on the increased number of tasks taken on by children of ill parents, some FGD participants described such young people as facing a reversal of roles; becoming responsible for the upkeep of the household.

> There are many problems. The children will have to get soap for the parents. They will be dependent on them. They will have to do *ganyu* to get medicine. They are in school and this will make them drop out to look after the sick.
> *Male teacher, Kamunda*

---

[10]     All pronouns in Chichewa and Chitumbuka are gender neutral, hence the occasional slightly awkward translation.

Discussions with teachers and community members at Duma, Namalongo and Pamoza revealed that in addition to household tasks, children from affected households would also be called upon to escort their sick parents to obtain medical care, or to collect medicine on their behalf. In rural hospitals, a 'guardian' system requires family members to remain with the patient, to prepare meals and wash clothes. If a sick parent is admitted, then the child might be expected to take up this role. At Duma, one teacher gave such an example:

> She [a female pupil] stayed two weeks without coming to school. When she came back… I asked her why she had not been coming to school. She answered that her mother had fallen sick and she was looking after her in hospital.

One of the young people interviewed, a Standard 8 girl who stays with her mother and younger sisters at Duma, explained her situation:

> Sometimes I am absent, but not much …only when my mother is sick. I would be looking after her, escorting her to the hospital as there is nobody else to help her.

In such comments, there is a sense of isolation – that in rural communities such as Duma, with relatives close by, children ill forced to take on the role of primary care-givers, even when this means their absence from school. This may well reflect a loss of social cohesion, with extended families' and communities' ability to support each other becoming strained (Pridmore, 2008). However, as one male teacher from Namalongo hinted at during the FGD, this may also be due to an unwillingness of parents suffering from AIDS-related illnesses to ask for help outside the immediate family, perhaps because of fear of stigma or discrimination.

> It comes to a critical point when the infected try anything: going to the hospital, to a *sing'anga* and such like - and in all these errands someone else cannot be sent, it's the children who are sent…this means children are not going to school.

Interviews with young people from households affected by HIV and AIDS indicate a further potential level of disruption in schooling as households fragment and members re-locate during times of chronic ill-health, either to seek medical care[11] further a field or to return to their home villages and their own kin. During interviews, three out-of-school youth and one pupil spoke of accompanying their sick parents at such times. An 18 year-old girl, who left Namalongo school in Standard 5, described how she had gone with her father back to his home district when he fell ill; and remained there until his death. Throughout this time she did not attend school (see Vignette 4: Akuzike's story).

In other situations the children might be left behind under the care of an older sibling or adult household member. In two of the interviewed pupils' households, the female heads of the households – both step-mothers, second wives to their late fathers - were chronically ill and were attending hospitals in distant towns. The children had remained with older sisters in their early twenties. In a third case, the mother of one pupil at Pamoza had recently returned from an extended stay in the Tuberculosis (TB) ward at the district hospital. During that time the household had been responsibility of an older brother. In such scenarios, there remained some semblance of continuity in terms of enrolment in school. However, the absence of the household head had other indirect impacts on pupils' access to learning, most notably through the severely reduced circumstances and low productivity of the households (see Vignette 1: Nellie's story).

---

[11]    This might include either larger, better-equipped hospitals or treatment from traditional healers.

Nellie is a 17 year old girl enrolled at Pamoza school. Her father died when she was young and for the last decade the family has been staying in her mother's home area - in a house close to the school. As well as her mother, she stays with two older brothers and three younger cousins. Her mother is HIV positive and in very poor health. She was in hospital for several weeks last year – on the TB ward – at which time revealed her HIV status to her children. During that time Nellie was not attending school, but was, in her mother's words, "just crying all the time."

Her mother's period of hospitalisation was during the rainy season and, subsequently, little was done in the family's fields, so there is little hope of any harvest. Her mother spoke of her concern that she cannot support the family as she used to and that the children often have to fend for themselves. Previously, she had been involved in small-scale trading at the local market, selling various food stuffs, but had stopped as her health had deteriorated. Nellie's elder brother occasionally gets part-time work as a builder and looks for ganyu to earn money to buy food. Much of the household chores, including caring for her mother, fall to Nellie.

Despite the household difficulties, Nellie said that her mother does encourage her to go to school and provides her with the basic necessities, such as notebooks, ball point pens and a uniform. At the time of the interview, Nellie was attending school, but, according to her mother, was often absent. She was repeating Standard 8, having failed the PLSCE exams the previous school year. Another brother, enrolled in the local Community Day Secondary School, had not attended school the whole of the previous term, because they had not managed to pay the school fees. Nellie said she hopes to continue with her schooling, but could say little about her plans for the future.

Nellie's story also illustrates that, in addition to the responsibilities taken on when parents or guardians fall ill, for many children this is also a time of great uncertainty and anxiety, potentially further increasing the isolation and social exclusion of the child (see section 5.3). Discussions across case study schools suggest that for some, extended periods of ill-health of parents can be just as disruptive to schooling as their subsequent orphanhood. Illustrating this, a female teacher from Duma school spoke of one boy who was out of school for two years whilst his mother was ill, but returned following her death.

> This child's mother was sick, the parents were divorced…and since the boy was the eldest in the family, the rest were his sisters, he was responsible for looking after his sick mother. I think this also made him stop schooling. Now his mother is dead and maybe that's why he now comes to school, encouraged by the ones who he is staying with.

Similarly, one of the pupils interviewed in Kamunda was out of school for almost two years during the ill-health and decline of his mother, only to return to school soon after she had died.

## Summary points
- Children, especially girls, living in households with chronically ill parents and guardians face an increased burden of responsibilities in terms of care-giving, collecting medication, carrying out chores and supporting household productivity. Such tasks can reduce their access to schooling. Some children may be called upon to act as 'guardians' for parents when hospitalised (Phalombe schools).
- When chronically ill with AIDS, some parents re-locate to seek better medical care or return to their home villages. Children made to accompany their parents often temporarily withdraw from school.
- Extended periods of ill-health of a parent or guardian are times of great anxiety for children and can be just as disruptive to their schooling – if not more - as their subsequent orphanhood.

### 4.2 Orphanhood, fragmented households and discrimination

**Death in the household**

The loss of one or both parents is likely to have significant social, economic and psychological impact on the welfare of a child. In terms of specific impact on access to learning and retention at school, the literature from SSA presents a picture which is complex, nuanced and often country-specific (see Pridmore, 2008). From the case studies, a picture emerges of the death of a parent or guardian leading to a wide range of different scenarios which have varying degrees of impact on orphaned children's access to learning: scenarios influenced by the number of deaths within the household, the prevailing socio-cultural norms and the specific circumstances of newly formed households.

The most immediate impact of a death in the household is the absence of children from school to attend the funeral. Although the length of such ceremonies has been curbed in recent years, they can still last several days. Such absenteeism is acknowledged as a concern amongst key informants and guardians, but few would go against the social norms that require participation in funerals. Interviews with young people and their guardians indicated that several of the pupils were reluctant to return to school as they tried to adjust to their new situations. Even if they returned, the period of re-adjustment could be quite lengthy, impacting on their general performance. One boy from of a sibling-headed household in Namalongo explained, "It was during the time after the father's death… all of us did not go to school, because we were affected so much". The uncle of a female pupil at Namongolo FP stated:

> When her mother died she was in standard 5. She did not want to go to school. Her performance went down, but after one year she started picking up. I guess she had come to terms with her mother's death.

Where the loss had been of a single parent and children remained in the same households, with continued recourse to support for their schooling, some noted relatively little impact on their retention. One young man, Chisomo from Duma, who left school in Standard 5 spoke of the earlier death of his father, "It was not a problem, because I still had one parent. So this parent was fending for us so that we go to school… I continued with school. I did not stop…" However, interviews with young people affected by HIV and AIDS indicated that the cumulative effects of HIV and AIDS on households often resulted in a series of shocks that impacted negatively on pupils learning and retention. In a few cases, multiple deaths in households left children fending for themselves. Chisomo continued, "…but when mother died things went bad, since as children we were on our own." In another case, one young woman from Duma, told how she had lost her grandmother (whom she was staying with during her early schooling) returned to her parents, who both died, then remained in the care of an elder sister, who also died. At this point, with no means of support and in dire poverty, she had left school.

**Sibling-headed households**

Amongst sibling-headed households identified during the case studies, a range of scenarios emerged, with household members' ability to access school often dependent on their gender and position in the household. In cases where the selected young people had been the *de facto* heads of the households, all but one had all left school and were responsible for providing support for younger siblings (see Vignette 2: Chisomo's story). In another case, one of the female pupils interviewed had the support of an elder brother who had recently married. Despite a temporary withdrawal, she had remained in school, albeit under difficult circumstances. In yet another case, though, the household head, an elder, unmarried

brother had forced his younger sister, Wezi, to leave school in order to cook and perform other household chores. He explained:

> Since my mother died I was staying alone…that time I was a school boy and when things got tougher and I realised that I cannot continue staying alone... I remembered that I had relatives and I went to granny and asked if they can allow me to be staying with Wezi so that she can be helping me with some cooking.

In both the above cases the household heads were now themselves school dropouts. The only case where all members of a sibling-headed household were in schools was a family of four siblings at Namalongo who were receiving some support from the TA and other well-wishers.

Key informants, teachers and community members across the case study schools acknowledged the presence of sibling-headed households in their communities, although the impression gained was that such cases were more common in Phalombe. During focus group discussions in Phalombe, several examples were given of the difficulties faced by such households. One example narrated by a community member in Namalongo illustrates this:

> We have some orphans in our village.  They live on their own.  One day I noticed that someone was stealing my cassava so I went there early in the morning and climbed a tree.  After sometime one of the orphans came and started uprooting the cassava and started eating it…I asked him why he was doing this he just said 'hunger'.  I felt sorry for him and because I know how they struggle at their home. I uprooted several plants and gave them to him to eat with his siblings…orphans who live on their own face terrible things.

Key informants and members of FGDs across all schools agreed that children in sibling-headed households were often absent for extended periods of time and were particularly at risk of permanent dropout. Discussions confirmed that in many cases the eldest sibling would leave school in order to support younger siblings.

**Vignette 2: Chisomo's story**

Chisomo is a 21 year old young man who dropped out of Duma school when he was in Standard 5. His father died when he was around 8 years old, followed by his mother when he was 15 years.  He has recently married and has a young child. His wife is 19 years old and also a double orphan. He supports his family, including two younger brothers, through *ganyu* – working in other people's maize fields and rice paddies. His ambition is to own a bicycle.

Talking of the death of his parents Chisomo says that his father's death had little impact on his schooling, as he still had his mother, who provided for the household. After the death of his mother however, he describes life as 'a misery'. Staying in a sibling-headed household with his elder sister and younger brothers he remembers that they frequently lacked food and other basic necessities. He said that they would often return from school to find no food at the house.  In addition, fellow pupils would mock him when he went to school poorly dressed. After about a year he left school to assist his sister with earning money. Later the sister married and left the boys on their own.

Chisomo states that following the death of his mother he received no assistance or support from the school or from other community members. He said that although he enjoyed school and was 'pained' when he left, he disliked the heavy discipline at the school and would often sneak away from school if given punishments.

After a break of about two years his younger brothers have now returned to school. He explained that his wife now assists him ensuring that they go to school – before his marriage he would often go to the lake to earn money, leaving his younger brothers alone, with no one to send them to school. He complained, however, that last year they were out of school again, sent home repeatedly for not having uniform. Only after he was able to raise the necessary money to purchase these did they return.

## Arrangements for orphaned children

Whilst sibling-headed households were present in all school communities, community members and teachers agreed that in most cases where a surviving spouse was not present (because of their earlier death, divorce and/or re-marriage) members of extended families would take up responsibility for the children. Elders or close relatives would meet to discuss and make arrangements for the care of the children. In some cases, even where there was a surviving spouse, the children did not always remain in their care. Supporting earlier findings by Mann (2002), such initial arrangements were said to be made with little or no consultation of the children as to their wants and might involve the splitting up of siblings into different households. Interestingly, a few of the children interviewed - all in school - had later made their own decisions to change households, as a result of perceived ill-treatment where they had been staying.

Although influenced by socio-cultural norms, the changing patterns of households in response to the impact of HIV and AIDS revealed a considerable degree of heterogeneity within the case study sites, with children migrating between households on one or multiple one occasions. Many of the examples of arrangements for orphaned children described by focus groups involved the migration of children back to either their fathers' or mothers' home areas, villages perhaps rarely visited or unfamiliar to them. Many would end up in the care of grandparents, a situation fuelled by the deaths of other responsible adults within extended families or the customary return of a surviving spouse to their own home area, often to later re-marry (see Textbox 2 below).

## Intra-household discrimination

Whilst any move to a new area and a new school is likely to be unsettling and possibly disruptive, this was not raised as an issue by research participants. The impact on schooling of the migration of children affected by HIV and AIDS between one or several households was rather seen to relate to the specific circumstances to be found in the new households. During focus groups across all case study schools, the issue of discrimination within households was raised as a constraint on access to learning and retention at school. A general perception was that some orphaned children receive less care than other children in their household: that they might be bought fewer clothes or be given a lesser share of food, blankets, soap and other basic necessities. In one worrying example, the PEA at Duma explained how some female pupils had been given uniforms, shoes, books, blankets and other materials under a programme to support orphaned girls in school, but these were taken from them in their households and shared out amongst the other children. Others noted that orphans are used as little more than house servants, taking on almost all household chores at the expense of their schooling. A few spoke of verbal abuse and discouragement, even violence.

Discussions with pupils during a mini-workshop at Pamoza also highlighted such discrimination. One female pupil explained.

> Guardians do force children to do the chores or else they beat the children. They tell them to work and not go to school. If they go to school they say you should not come back home after the classes…others tell you, "you should just go and get married, who is going to pay school fees for you?"

Amongst the young people interviewed, half of those who were staying with relatives other than their parents believed that they were treated differently from other children in the household. This was generally described as being bought fewer clothes and other basic

necessities, including, in some cases, school materials. A male pupil from Duma, who was staying with his grandparents and an uncle not much older than himself, said:

> We are treated differently. As you know my uncle has got both his father and mother here, while I have none, so they make sure that he gets his needs while I am left to go to the lake … clothes, schooling needs like exercise books, pens; we differ in these things.

A female pupil at Pamoza also described her experiences:

> You will see that the material of my fellow children clothes is of high standards more beautiful than mine and sometimes they might not buy me [any clothes]… sometimes I bathe without soap while the other children do. I bathe in water only without soap… they also insult me… sometimes say I should go to Lilongwe to stay where my mother is [chronically ill in hospital].

She went on to describe how her elder sister, whom she was staying with, regularly kept her out of school to attend to household chores. She said that her sister would even follow her to school and force her to return, beating her in the process (see Vignette 3: Madalitso's story). Two female pupils described being subjected to violence by guardians, though in both cases the girls had since left for other households.

---

**Textbox 2: Changing household patterns of children affected by HIV and AIDS**

In Phalombe district, almost all of the young people interviewed were staying in their maternal villages. Several had been staying elsewhere with their parents at the time of the death of one or both of their parents (where they had settled their fathers' villages in neighbouring Mulanje district or Mozambique) and had returned to the maternal village on the death of the father or, in one case, during the ill-health of the mother. In two cases, the subsequent death of the mother, saw the children taken in by maternal uncles. In one case, the practice of *anasuzulidwa,* the releasing of the husband to re-marry on the death of the wife, meant that the death of mother also led to the absence of the father. Only in one case, in Namalongo, were the children staying in the paternal village, where they had settled under the practice of *ulowoka* (the husband taking a wife to his village). Again, the releasing of the surviving spouse, this time the mother, saw the children left on their own as the mother returned to her home area.In Mzimba South, there was greater variation in the arrangements made for the children, although the majority of them were staying in paternal villages. In two cases where the households had been in towns where the father had had employment, the children had returned to the paternal village on the death of the parent - in both cases to stay with grandparents. In three cases the children had been staying with the mother in the maternal village following either the death of the father or, in one case, the divorce of the parents. In two of these cases, however, the children subsequently returned to the paternal villages at the insistence of the paternal grandparents, who stated that the children 'belonged' to them under the custom of payment of *lobola*. In another situation, the mother on becoming ill left for her home village, leaving the children behind in the paternal village. In two cases, following the death of the mother, the children were staying with their fathers' second wives, brought up alongside her own children, despite the father being either absent or dead. In one other case, which exemplifies the increasing instability of some children's lives as households fragment, one young man had joined his father in town when his father moved there to access medical care, had stayed on with his father's second wife after his father's death, then returned to stay with his mother in the maternal village until she left to re-marry, then stayed with his    maternal uncle who subsequently left for RSA, leaving him behind to join his brother's household.

In both districts, where no adult relatives were available - often due to multiple deaths within extended families - or unwilling to take on orphaned children, then they had no option but to continue as sibling-headed households.

Some key informants noted that discrimination within households can be borne of frustration at the additional costs borne by the household hosting orphaned children. The PEA at Duma commented:

> These days their aunts/uncles give such children too much work and if they complain, they say ill words to them, such as "your mother died of this disease, we don't have enough food here for you, I have to work hard to feed you."

A few related this to wider issues of social cohesion – the breakdown of the extended family and adoption of a more westernized notion of family. The PEA at Pamoza, where the Ngoni culture would have traditionally seen several family groups eating together, commented:

> This time the cost of living is high, each one looks after their own family - this extended family is not there. People have learnt to eat at tables; they don't go to the cooking pot. There is no more communal living in the village. In the past, orphans could easily be cared for in that way. But this time, it is everywhere – people thinking of money only.

Another act of discrimination against orphans within communities is the practice of 'property-grabbing,' whereby on the death of the father, relatives from the male side will snatch property, land and belongings from the surviving widow and/or children. This practice appears to be particularly common in Phalombe, with teachers and community members from Namalongo, listing many examples. The following exchange is illustrative of such examples:

| Male SMC member: | When her husband was alive he was saying that everything belonged to his wife and children, but the moment he died relatives chased her away. They started sharing things amongst themselves, even bags of clothes. They said 'this house does not belong to you, our relative built it. |
|---|---|
| Female SMC member: | The wife went away with very little |
| Male PTA member: | They even took the iron sheets from the toilet and used them as roofing for their house …that's how things are in Phalombe. |

At Kamunda, teachers and community members noted that property-grabbing is not common in their area, stating that the patrilineal system of *lobola*, is supposed to guarantee support of orphaned children by the male side. In Pamoza, however, teachers noted that despite this custom, some relatives still take property or cattle, which is supposed to benefit the children. Three of young people interviewed had been subjected to 'property-grabbing'. One female pupil from Duma described her experience (see Vignette 5: Titani's story):

> My father's brothers took most of the belongings that our father left. They took kitchen utensils, plates, pots, pails and livestock and also removed the wooden door from the house that we were staying in with our father …my father's brothers left us suffering without anything to live on.

## Summary points

- The death of a parent and any subsequent period of re-adjustment impacts negatively on children's attendance and/or performance at school. Whilst the presence of a surviving spouse can offer some continuity and support retention, multiple deaths in a household or within the extended family greatly increase the children's vulnerability to social exclusion and permanent dropout from school.

- Although in the absence of a surviving spouse the extended family will usually make arrangements to take in any orphans, at all sites respondents acknowledged the presence of sibling-headed households in their communities. Members of sibling-headed households are particularly vulnerable to temporary or permanent withdrawal from school. This is often dependent on their position in the household and their gender. In all but one case, those heading such households were out of school, supporting younger siblings.
- Orphaned children living with members of the extended family are often perceived to face discrimination within such households: in terms of welfare, resources and assigned chores. In some cases this can affect their access to – and support for- learning. A few children spoke of verbal and physical abuse. 'Property-grabbing' was seen as another example of discrimination against orphans (Phalombe).
- A lack of proper care for some orphans was blamed on a loosening of social cohesion as the increased costs of supporting extra children impact on traditional values of kinship and communal living.

### 4.3 Household shocks, poverty and the working child

A key commonality amongst research participants was that orphanhood was conceptualised as a 'lack of support', which was largely equated with a lack of material support. The picture of a child affected by HIV and AIDS that emerged from discussions was of someone struggling to meet basic needs, living in households facing greatly reduced circumstances. Those individuals and households seen as particularly vulnerable were orphans who had lost both parents, those living with grandparents, households supporting sick parents and sibling-headed households.

> This [HIV and AIDS] has made children to drop permanently, if the children's parents have died, the children will face problems. They don't have anyone to support them. Instead, they just dropout permanently, because both parents are gone or either one has gone leaving the other sick. They lack support and dropout of school.
>
> *PTA Chair, Namalongo*

> This disease is causing a lot of problems, because both parents can die leaving the children as orphans without anybody to support them or if there is any then it's old people who are already weak … this disease is causing a lot of problems. It doesn't leave a person, both father and mother die.
>
> *Group Village Headman, Duma*

As discussed earlier, the impoverishment of households may start long before the death of a parent, during extended periods of ill-health, as their labour is foregone and households struggle to cover additional costs of caring for those who are sick. Households where adult members fall sick during the planting season are particularly badly affected (see Vignette 1: Nellie's story). Somewhat ironically, households that have struggled to support themselves during the ill-health of household members, are also likely to face the additional burden of paying for well-attended funerals. One community member in Namalongo suggested: "It is also possible that during death [bereavement], the little money which was with parents is also finished". The uncle of one female school dropout from Pamoza, noted the difficulties faced during the ill-health and deaths of his brother and sister-in-law.

> When there is a sick person you suffer a lot and you don't rest. Even the deaths, I was responsible for everything, be it planks [wood for coffins], food etc.

Supporting findings from these case studies, research into rural livelihoods in Malawi underlines the serious impact of HIV and AIDS on household productivity and purchasing power as the labour capability of households is lost through illness and mortality and scant

resources are diverted to the care of the sick and funeral costs (Bryceson, Fonseca and Kadzandira, 2004; Doward, Mwale and Tuseo, 2006; Robson et al., 2006). Furthermore, as mentioned above, asset-stripping through practices such as 'property-grabbing' can also further impoverish households.

Many of the households visited during the case studies lived in poor conditions, with few assets and surviving on subsistence farming, the sale of crop surpluses, artisan activities and/or unskilled, hired labour (*ganyu*). A few received irregular remittances from relatives living and working elsewhere. Where households had little regular access to cash, food security was particularly poor since households were unable afford farming inputs such as subsidised fertiliser.

## Lack of food and basic necessities

Discussions during mini-workshops with orphans and other vulnerable young people highlighted a strong association between household poverty and food insecurity and pupil absenteeism and withdrawal from school (see Appendix 1). The lack of food and basic needs were ranked highest as the causes of both absenteeism and dropout across all schools. Pupils from Pamoza noted that even if they attend, hunger can impact negatively on their participation and performance. One girl said:

> When children are hungry they have not eaten anything they cannot learn and they feel sleepy because they have not taken any food. They think of their hunger and they do not get what the teacher is saying.

Patterns of poor food security in rural Malawi include a distinct 'hungry season'; a time when the previous year's stocks have run out and the new season's crops are not yet harvested and maize prices rise. School heads for Duma, Kaumunda and Pamoza schools all said that absenteeism was higher in such times, as families struggle to cope. The head at Pamoza explained:

> There is high absenteeism during the months of February – March, when there is famine. Instead of going to school the whole family, parents and children, can go for ganyu to find food.

In addition to the problems of finding sufficient food, the lack of other basic necessities was also a concern. As with food, focus groups noted that this 'lack of support' would lead to children spending time away from school as households, or themselves as individuals, sought out ways of providing for basic necessities. Clothing was a particular concern raised by young people during mini-workshops. One female pupil from Pamoza stated:

> When we do not have enough clothes or the clothes are dirty and we have no soap to wash clothes, we are absent from school, because we are looking for soap to wash our clothes… when we put on dirty clothes our school friends say bad words… so because of poverty pupils fail to go to school.

Socio-cultural norms expect children to bathe daily, put on body lotion (usually petroleum jelly) and clean clothes and be neat in appearance. When a lack of basic necessities prevents this, children, particularly adolescents, are likely to feel uncomfortable going to school. Teachers reinforce these requirements and school regulations insist on the wearing of uniform – an additional cost for the household to bear[12]. Discussions with teachers at

---

[12] With the influx of second-hand clothing (*kaunjika*) into the Malawi economy, the purchase of uniforms is likely to be more expensive than buying other clothes at the local market.

Pamoza also underlined how issues of clothing become gendered and expose girls to additional harassment. One male teacher noted:

> Girsl face more problems. Say if a boy and a girl comes from a poor family, for the boy, even if he were to wear worn out shorts, it will be ok with him, in contrast to a girl wearing a worn out skirt.

A female teacher continued:

> What happens to a girl when at 15 and is not dressed properly, maybe her breasts are exposed; boys begin to touch her. If the clothing is torn they will touch her.

Clearly in areas with high levels of underlying poverty and food insecurity, the lack of food and basic necessities impacts on many children, not just those affected by HIV and AIDS – a fact argued by a few key informants. However, many research participants indicated that HIV and AIDS -affected households are amongst the most vulnerable and less able to respond to the reduced circumstances they find themselves in. The school head at Duma noted that pupils in already vulnerable households, such as sibling headed households, were particularly at risk of extended withdrawal from school or dropout during times of hunger. Eighteen out of the twenty-four guardians or household heads interviewed stated that hunger was one of the main problems faced by their households.

### *Ganyu* and other household labour

Bryceson, Fonseca and Kanzandira (2004) noted that one consequence of the reduced productivity and impoverishment of households affected by HIV and AIDS is the increased use of *ganyu* as a coping strategy. Interviews with household guardians across the school communities indicate that, for many, this was indeed the case. Often this was represented as a distinct shift in household economic activities. The mother of Titani, a female pupil at Duma, explained:

> We do ganyu in people's gardens so as to find money to buy food, soap. All these come from ganyu… When my husband was alive I wasn't even thinking of doing this.

The young man heading a sibling-headed household in Namalongo similarly commented, "In the past we did not know about doing ganyu…We came to know ganyu after the death of our father ".

Research from neighbouring Tanzania argues that in addition to children from households affected by HIV and AIDS taking on much of the burden of care-giving, they are often required to work to "fill the gap" left by the impact of adult illness and mortality on household labour and income generation (Dachi and Garrett, 2003). Interviews with young people reflect this trend, with *ganyu* supplementing often meagre returns from subsistence farming. In several cases such work seemed incompatible with children's sustained access to school. As noted earlier, in all but one of the sibling-headed households visited, the eldest had dropped out of school in order to seek out *ganyu*. Those interviewed believed that they had little option but to focus on finding food and other necessities, reflecting the comments of the Group Village Headman at Duma.

> Pupils stop thinking about the importance of school, that should they continue with school their poverty can some day end. What they think about is survival. They just think about ganyu.

One of the female pupils interviewed noted how, following the death of her parents, she had withdrawn temporarily from school to earn money through *ganyu*, only to return about a year

later after circumstances improved. Yet in other situations, pupils were able to remain in school, but spent much of their free time taking up *ganyu* and farming activities to provide much-needed support for the household and/or themselves - free time that could have otherwise be spent studying. This was particularly common amongst households headed by grandparents. However, the picture revealed by these case studies is more complex than simply that of children's work resulting in exclusion from learning. In several cases, again particularly in Phalombe, children affected by HIV and AIDS were using *ganyu* to support their schooling needs when financial support from within the household was not forthcoming. One male pupil at the mini-workshop in Namalongo spoke of using earnings from *ganyu* to pay for extra tuition offered at the school. And in Duma, two of the male pupils interviewed stated that they would go to the lake during school holidays to pay for school needs such as uniforms and notebooks.

---

**Textbox 3: Examples of ganyu – interviews with households**

*Phalombe*
- Working in rice paddies
- Weeding and banking in maize fields
- Harvesting maize
- Shelling maize
- Working for fishermen at the lake (Duma only)
- Carrying sacks at maize mill   (Namalongo only)
- Grazing cattle and other livestock
- Carrying water for building work and market restaurants

*Mzimba South*
- Working in maize fields
- Harvesting maize
- Grazing cattle and other livestock
- Carrying crates at bottling plant   (Pamoza only)

---

Discussions with several key informants as well FGD participants included observations on the gender dimension of children's work. Teachers and community members indicated that boys had greater recourse to work outside the home and more options by which to earn money. One male PTA member from Namalongo noted, "A boy goes to do *ganyu* and goes to have tea and he is happy, but a girl cannot go anywhere to do *ganyu*, only prostitution". However, such discussions often revealed as much about prevailing gender stereotypes, perhaps, as the reality on the ground. This extract from an FGD with community members at Pamoza is revealing:

| | |
|---|---|
| Male participant 1: | Boys sometimes brave the situation but girls they easily give in, you will find that most of the times are crying. Boys can live without proper clothing, girls cannot. Boys more easily go for *ganyu* than girls, |
| Female participant: | That's why there is a saying…a boy child is not an orphan but a girl child |
| Male participant 2: | Boys are strong in mind while girls are weak. Even if they can come from one family, both from poor family, a girl has a lot of difficulties adapting to the situation compared to the boy. A boy child can go out with friends and do some *ganyu*, for example herd cattle, to have his problems solved, but not with a girl child. |

Whilst some activities are traditionally not open to girls (e.g. cattle herding or fishing), in contrast to perspectives reflected above, several of the girls from households affected by

HIV and AIDS spoke of their involvement in *ganyu*, working alongside their brothers or other household members to contribute to household incomes. This was more common in Phalombe district. Evelyn a young woman in Duma, who supports her younger sister and her own two children named *ganyu* activities as her main source of income. Three other girls, two of them pupils at Duma and Namalongo and one a school dropout, spoke of earning money through *ganyu* and small-scale vending activities.

## Household tasks

What is apparent, however, is that the brunt of unpaid household tasks falls to girls. A crude measure of this was obtained by asking all interviewed pupils what they did in the way of household tasks. Table 9 lists the responses given. Across all schools, girls were involved in a wider range of chores compared to their male counterparts. Few boys noted much involvement in household tasks, with most working in the household's fields and/or grazing cattle. Several boys said, however, that such activities were often limited to the weekends. The response of the one boy who admitted to cooking for the household was revealing (author's emphasis). He stated, "Sometimes *when my sister is not around* I do cook, wash plates. "

**Table 10: List of chores carried out by pupils, by gender**

| Responses | Girls (n= 7) | Boys (n= 6) |
|---|---|---|
| Cooking | 7 | 0 |
| Cleaning plates, pots & pans | 6 | 1 |
| Fetching water | 6 | 0 |
| Sweeping floors and surroundings | 5 | 1 |
| Washing clothes | 4 | 1 |
| Bathing younger children | 3 | 0 |
| Pounding maize | 2 | 0 |
| Going to maize mill | 2 | 1 |
| Farming (going to fields) | 2 | 4 |
| Collecting firewood | 1 | 0 |
| Washing nappies | 1 | 0 |
| Herding cattle | 0 | 2 |
| Working in vegetable garden | 0 | 1 |
| Sent on errands | 0 | 1 |

Five of the eight female pupils interviewed spoke of the negative impact of household chores on their schooling. Several stated that these left them insufficient time to study, contributing to their poor performance. Girls in households where the mother or adult female was sick were particularly affected, sometimes required to be absent from school (see section 4.1).Two girls who complained of discrimination from guardians described how excessive household chores had resulted in temporary withdrawals from school (see Vignette 3: Madalitso's story).

Just as girls were said to take on more of the responsibilities of care-giving and chores in a household where a parent is ill, some participants commented that a similar situation would occur where children to fend for themselves. One male teacher at Namalongo said:

> Even in times of death, the boy may fetch food, but it remains the duty of the girl to cook, and if they are school children it means again it's the girl who is to look after them, making sure that they have taken a bath etc…So the girl child has a big load. For instance, the girl asks herself, 'if I go to school who is going to go to the maize mill?' She looks at time, 'If I go to school, I will knock off at 1 pm. When will I look for

relish and cook food?', while the boy will be just looking at the girl to do all this. So she absents herself to do these chores at home.

This is indeed reflected in the case of Wezi, mentioned earlier, who left school permanently in order to carry out household chores to support her brothers. There was also some limited evidence, however, of boys being absent or withdrawing from school to take on unpaid household tasks. For example, one out-of-school youth from Kamunda, left school at the insistence of his grandfather to take over responsibility for herding the households' cattle, a task previously carried out by his late uncle. During his interview he stated "If there was no work like herding cattle, I would have continued with school ".

**Vignette 3: Madalitso's story**

Madalitso is a 16 year old girl in Standard 7 at Pamoza. Her father was a business man who regularly went to Republic of South Africa (RSA). He had three wives, all of whom stayed at the same village. His death on his return from an extended stay in RSA was attributed to AIDS. Two years later Madalitso's mother died of TB and soon after that Madalitso went to stay with her elder sister, who had recently married. She complained that the sister did not allow her to attend school regularly during this time and that she was often required to do chores and attend the sister's young child. In Standard 3 she left school for a year. She repeated a further 2 school years, which she blamed on frequent absenteeism. She then ran away from her sister to return to the paternal village where she stayed with her step-mother (one of her father's other wives). However, the step-mother is now also ill and is staying in Lilongwe with her brother to get medical treatment. The sister has since divorced and has returned to the village, where she helps to support the family by petty trading and selling food on market days. Madalitso is concerned about her schooling. She admits that she finds difficulties in reading and writing - and complains about her sister's treatment. She is still sent to chores, including long trips to the maize mill and looking after her sister's children. She notes that her sister pulls her out of school if she has chores for her to do - and beats her if she refuses. She is keen to finish primary school, saying her heart would break if she didn't, but there seems to have been no supplementary or remedial work provided by teachers to assist her poor reading and writing skills.[13]

## Summary points
- Households affected by HIV and AIDS are greatly impoverished by the impact of illness and mortality and children often lack adequate support. Some of the most vulnerable are those who have lost both parents, living with grandparents, supporting sick parents or living in sibling-headed households. Many households affected by HIV and AIDS are characterised by poor food security, limited access to case and a distinct shift towards involvement in unskilled, hired labour (ganyu).
- Increased poverty within households impacts on access to learning primarily through a lack of food – which affects both attendance and performance – and other basic necessities, particularly clothing (including uniform) and soap. Poorly dressed children are more likely to face exclusion from school.
- Children are often required to work to support their households or find food and other basic necessities, resulting in reduced time for study, increased absenteeism and/or withdrawal from school, sometimes permanently. Some children, particularly boys, work to provide for their school needs

### 4.4 Marriage, pregnancy and transactional sex

In Malawi the literature on girls' education highlights pregnancy and early entry into marriage as important reasons for girls' drop out from school, both at primary and secondary level (Davison and Kanyuka, 1992; Hyde and Kadzamira, 1994; Kadzamira and Chibwana, 2000).

---

[13] Following these case study interviews, the research team has since learnt that Madalitso has dropped out of school and is now married (September, 2008).

With sexual activity as a prelude to marriage, many girls may also find themselves pregnant. Despite a change in policy in the mid-1990s to allow pregnant school girls to return to school following the birth of their child, there is little evidence to indicate how many girls actually re-enter school. Strong anecdotal evidence suggests however, that few take up this opportunity (Streuli and Moleni, 2007). At the four case study schools visited none of the school heads could name any girl who had returned to school following known pregnancies.

Although emerging as an issue at all case study schools, early entry into marriage was a particular concern in the more remote, rural schools. In Kamunda, where communities maintain strong ties with tradition, both teachers and pupils indicated that girls in senior classes often receive proposals of marriage from men and that this marks a period of courtship and subsequent marriage during which girls disengage from schooling and ultimately drop out. In Duma, community-based key informants stated that some adolescents consider themselves 'mature enough' for marriage and drop from school.  In both Phalombe school communities, households seemed to have less influence over an adolescent's entry into marriage compared to Mzimba.

With specific reference to children from households affected by HIV and AIDS, research participants across all schools agreed that orphaned children, especially girls, would marry at a young age to 'run away from problems' at their current household. Such problems might include discrimination or violence, but were generally assumed to be poverty-related, a 'lack of support'. A few participants noted how some households would pressurise girls to marry early to relieve them of the burden of supporting them. In all scenarios, the assumption was that the husband would be able provide better support. These findings concur with an earlier study of gender and primary schooling that identified poverty as one of the critical driving factors of early marriages, as girls look to marriage to provide material support (Kadzamira and Chibwana, 2000). Out-of-school youth at Kamunda highlighted some of the reasons why vulnerable children might enter in to marriage. One female dropout said:

> Children are getting married early when they have no parents to support and look after them.  They want to start getting support from their husbands if they get married. Others marry because their parents or guardians are failing to support the children's needs. Others as well get married when the parents remarry after one parent dies. The parent who remarries leaves the children alone or with their grandparent.

Teachers from Duma and Pamoza gave examples of girls from households affected by HIV and AIDS, former pupils, who had left school and were now married.

> Her father died.  Since the father died they were staying with their mother and there was no enough support.  In the end the girl just got married, but very young.
> *Male teacher, Pamoza*

> Her mother was sick so she was doing business to support the family and then got married.  I think just to get help.                            *Female teacher, Pamoza*

> There was one girl who had only one piece of clothing, whenever she went home, for her to change clothes, she was relying on her brother's wife's clothes...whenever she borrowed these clothes there was verbal abuse from the in-law. She was being told that she should just go and get married. She did not sit for her Standard 8 exams. She dropped out and she is now married.
> *Male teacher, Duma*

Of the out-of-school youth interviewed, four of the five girls had been married at an early age[14]. All mentioned that expectations of material support were a primary consideration. In three of these cases, however, the girls had already left school, a decision which they attributed to poverty. Two of these girls, both around fifteen at the time, were largely fending for themselves after multiple deaths in their households (see Vignette 4: Akuzike's story). In such instances, therefore, marriage can be seen as a copying strategy for girls in vulnerable situations, entered into *following* disengagement and dropout from school. This reflects findings of a recent study of Demographic and Health Survey data from 20 SSA countries that argued that rather than pregnancy and/or marriage being the primary reason for girls leaving school early, the social-economic circumstances that predispose girls to early entry into marriage or risky, sexual behaviour are also those likely to increase their risk of dropout: factors largely related to poverty (Lloyd and Mensch, 2006). Interestingly, according to recent government figures from Malawi, less than 15% of girls dropped out of primary school in 2007 because of pregnancy or early marriage compared to over 40% who left due to 'household responsibilities' (Ministry of Education, 2007). For girls, once out of school, socio-cultural pressures and prejudices against young woman staying alone would make entry into marriage inevitable. Another of the interviewed girls, a school drop out from Pamoza, revealed a disturbing story of her elder brother being paid to set her up in a marriage with an older man as a second wife, much against her will.

**Vignette 4: Akuzike**

Akuzike is 18 years old and out-of-school. She stays close to Namalongo school in very poor conditions – a small, leaking building with no toilet. She supports a younger cousin and her own 2 year old daughter by *ganyu* and petty market trading. In addition to working in other people's fields, she cooks and sells ground nuts, *mandaz*i and sugarcane at the local market. She also keeps a small garden.

Her father became ill when she was young. She went with him to Mulanje, his home district, where he was to be cared for throughout his illness. She said she did not attend school during this time. On her father's death she returned to her maternal village to stay with her mother and re-enrolled at Namaongo school. She stated that they lived in very poor circumstance, but got assistance from a well-wisher, Mrs Machoko, who bought her uniform and notebooks for school. When she was about 13 years old her mother died and she went to stay with her elder sister.

Sometime after this, when she was in Standard 5, she dropped out of school in order to help her sister earn money to support the household. Her sister then also died and Akuzike stayed with relatives for a while until she was discovered to be pregnant and got married. She states that she got married to get additional support from the man. The marriage did not last long however, the husband was chased out of her village for not working and failing to contribute to the renovation of a house. For about two years following the death of her sister, Akuzike was being supported by a local orphan care group. They provided some food stuffs and clothes and she also went for learning activities at the centre in the afternoons. The centre stopped assistance when she was found to be pregnant.

Indications are that Akuzike had relatively poor engagement with school - perhaps stemming from the extended period of time she was out of school during father's sickness. She did not show interest to return and later said she no longer admires friends who are at school, as she is used to her situation. Her health was not good at the time of the interview, with a large lump on the side of her neck, for which she is taking traditional medicine.

---

[14]     All the five girls interviewed had subsequently separated from their husbands and in four of the cases, leaving them supporting young children.

In addition to marriage, there is some research evidence from Malawi to suggest that girls orphaned or made vulnerable by HIV and AIDS are at greater risk of entering into informal, transactional sexual relationships, often with older men with ready access to money[15] (Bryceson, Fonseca and Kadzandira, 2004; Kadzamira and Chawani, 2003). In Pamoza, community members spoke of how orphaned, vulnerable girls are open to such abuse. One male participant stated:

> Here there are also some men who cheat girls that they can provide everything to her so long as she meets her sexual desire or get married. This is another problem which makes orphan to dropout of school…Some people who have money to help, instead of helping they take advantage of this to abuse these adolescents. They end up impregnating them and then leave such girls.

In all focus groups, however, members also described vulnerable girls as 'immoral' and 'prostitutes' who actively seek such relationships:

> A girl would say my skirt is torn, I have no soap; no food when she knocks off from school. She will just stay and in the end she starts prostitution to find money for cassava.
> *Female community member, Nazombe*

> Without support such girls rush for men…she will use her body
> *Male teacher, Kamunda*

It is unclear whether such perspectives actually reflect an element of personal agency in girls' involvement in transactional sexual relationships or simply underlines a stereotypical positioning of girls as responsible for male sexual behaviour. A more important observation is that such risky behaviour may often be the consequence of increased vulnerability brought about by the affects of HIV and AIDS. A female community member at Pamoza offered a more sympathetic perspective:

> When the orphan is a girl child, you find that she has now started moving around looking for men so that she can find some assistance. This is common in this area. But the problem begins when the child lacks parental care, she lacks food and clothes so only for her to survive, she starts indulging in such behaviours.

Whilst a common perception amongst FGD members was of a sort of inevitable drift from the envying of friends, fuelled by poverty, into sexual liaisons and/or drop out, one female teacher at Namalongo, however, stressed that this depended on the individual child and the advice and guidance received at home. Discussing one of the case stories related at the start of the focus group, she noted:

> I think the girl alone, apart from the issue of clothes, she had problems… It seems that there was no encouragement from the grandmother… I have examples of some girls who continue with school with a single cloth… She concentrated at looking at others to say, today so-and -so has worn this, instead of taking her time and waiting for her future.

Sadly, the low uptake of condom usage amongst adolescents in Malawi (Munthali, Chimbiri and Zulu, 2004) means that such transactional relationships are likely to end in girls becoming pregnant. Thus, not only curtailing girls' access to education, but greatly increasing their risk of HIV infection.

---

[15] Known locally as *chidyamakanda* (literally 'eater of young girls) or sugar daddies.

**Summary points**

- For girls affected by HIV and AIDS, early entry into marriage is largely a coping strategy in the face of inadequate material and emotional support and/or discrimination within their households. Entry into marriage can occur subsequent to the process of a girl's disengagement and dropout from school, largely as a result of poverty-related issues.
- The vulnerability of girls from households affected by HIV and AIDS also leaves them open to abuse and involvement in transactional sex relationships, which, if resulting in pregnancy, will greatly curtail further access to education.

## 4.5 Household attitudes and support for schooling

### Attitudes to education

During interviews, parents and guardians were asked, given their household circumstances, whether they believed education to be important. Almost all professed a belief that education was important and that they wished their children could continue with their schooling. Although, the majority had little or no education themselves, they perceived education as important for both boys and girls for a number of reasons related to improved knowledge and literacy, opportunities for future employment and to avoid risky behaviour.

> Education is important very, very important. You can get good things because of education. You can't steal if you are educated. One has good knowledge
> *Grandfather to out-of-school youth from Pamoza*

> The importance is that when he can excel in his studies then in future he will be self reliant and I will also be helped by his success. He will get employed. That is the importance of going to school.
> *Grandmother to a male pupil at Pamoza*

> The advantage is that these boys and girls when going to school, they prevent getting pregnant and marrying early. They avoid get infected with diseases because of staying idle whilst their friends are in school.
> *Elder brother to a female pupil at Namalongo*

Despite the dominance of farming and trade in the local economies, there was a common belief across communities that education was an important route to salaried employment. Although perhaps unrealistic, given high levels of unemployment in rural Malawi[16], this was said to reflect a shift in attitudes based on the increasing number and visibility of educated and working individuals from their communities, or within their own families:

> In these recent times people have now realized that schooling is important because they now see the fruits of education from what other educated people are doing … like being employed, building a nice house… all this is happening because they went to school .
> *Female community member, Kamunda*

---

[16]    In 2004, amongst 20-24 year-olds, 43% of females and 29% of males had not been employed in a period of 12 months. NSO. (2005), *Malawi Demographic and Health Survey 2004* Calverton, Maryland: National Statistical Office (Malawi) and ORC Macro.

> Some of us want our children to get an education. In the past nobody was making it to the University but now we have some who went.
>
> *Male PTA member, Namalongo*

> When children are educated one can manage to get employed as a teacher or health worker in government, for example. My other daughter who is working is doing so because the fruits of finishing school before entering in other things.
>
> *Mother to out-of-school youth, Namalongo*

A few key informants also noted that community mobilisation campaigns by national and international NGOs had influenced people's attitudes to education in recent years. Several guardians said that greater levels of education and improved job opportunities would allow young people greater independence in the future, something seen as critical for orphans. In addition, many expressed expectations of future support for themselves and/or other family members. Such views were common across all school communities.

> According to my opinion I want this one to get educated…What will happen when I die? Who will she stay with? She should proceed with school.
>
> *Grandmother a female pupil at Pamoza*

> When they continue with education they will get good jobs and assist us with our needs, as we are old and sick most times. So we will get assistance from them, if the spirit of going to school is in them till they finish.
>
> *Grandfather to a male pupil at Duma*

Some guardians raised doubts as to whether they would be able to raise the necessary fees for secondary school, so that their children could proceed beyond primary level. There was little suggestion, however, that this has reduced demand for primary education. A typical comment, in this case from a guardian in Namalongo illustrates this, "I want her to finish primary education. If we have trouble in future paying school fees, let it be, but she should finish primary".

All interviewed guardians at Namalongo said they were satisfied with what was being taught at school, as were the majority at Pamoza and Duma. In Kamunda, the response was mixed, with half of the participants noting that not all subjects were taught (see Section 6.1). Most of the parents and guardians of out-of-school youth expressed disappointment that their children left school early, but suggested that they had had little influence over their final decision to leave school.

The expressed views of parents and guardians of children affected by HIV and AIDS suggest a relatively high demand for education, although how that is expressed in practice is likely to depend on a wide range of factors, not least poverty levels within households. As discussed earlier, issues of intra-household discrimination, perceived gender roles and demand for children's work also impact on their support for schooling. It should be noted that in some cases, guardian's expressed views on the importance of education were in direct contrast to situations described by the young people themselves, or observed during household visits. Even where guardians were said to provide encouragement, some pupils would be left to make the decision whether they went to school on a particular day or not. One grandmother explained that her ward, a female pupil at Kamunda, would be left to get herself to school.

> She wakes up, goes to collect water, takes a bath and goes to school. Even if I have slept at a funeral[17] I find that she has already gone to school. I don't force her, I just talk too her `my child, continue schooling because you are an orphan and this can help you in future'.

This sense of personal agency and responsibility underlines the pupils' motivation to learn (see Section 5.1), but also highlights a lack of close supervision from some guardians that strikes a discord with their expressed desire to see their children educated. Other pupils, especially girls, complained that guardians gave them various household responsibilities that kept them out of school (see Section 4.3).

## Material and emotional support

In terms of financial support for direct school costs – pens, notebooks, uniforms etc – most pupils indicated that they were currently receiving such support, albeit often limited. Several guardians spoke of struggling to raise money to buy these basic items:

> Well, I buy them uniform, I pay for mock exams for Brenda, it comes to about K1,600 for the two of them… I struggle to raise the money, when I fail I go to my uncle to ask for help but generally I am the one providing for the children
> *Elder brother in sibling-headed household, Namalongo*

> Ah this time, we don't pay fees since school is free, so when we get money we just buy soap, maize to eat. As for uniform we buy with money realized from *ganyu* but, I am not sure about the future. I don't know if they will continue with school...
> *Mother to female pupil, Duma*

Several pupils also noted that family members living and working elsewhere would send money or bought items to support their schooling, though rarely on a regular basis. This was more commonly mentioned by pupils from Mzimba South. In Phalombe, in Namalongo, a household of four children living alone were able to continue with their schooling with some financial support from the TA, her being the sister of their late father. In Duma, however, pupils in three of the households visited said that they largely provided for their own school needs. In two cases, the guardians were elderly grandparents who said they were too old to work. The pupils, both boys, raised funds by going to the lake, working on other people's boats. In the third case - a girl - sold sugar cane[18].

Amongst the out-of-school youth in Phalombe, in all cases but one, the individual named as responsible for providing direct financial support for school needs had died. In every case this had been a household member. In contrast to interviewed pupils, none of the out-of-school youth appeared to have had recourse to further assistance from other family members within the household or extended family upon the death of the one providing support. However, in one case – the exception - an 18-year-old girl in Namalongo described how a well-wisher had stepped in at the time (see Vignette 4: Akuzike's story):

> My dad used to buy me clothes for school, pencils, books, the time he was alive. Madam Matemba[19] bought me uniform, other clothes and pencils when my dad died. She told me not to leave school.

---

[17] It is common practice in Malawi that on hearing of a death in the village, people would gather at the house of the bereaved family to condole the family, usually remaining there until the funeral the next day.

[18] This type of small-scale vending is known as *mwana geni*, literally 'child business'.

[19] Name changed

In Mzimba South, four of the five out-of-school youth interviewed indicated that at the time they left school they were receiving little or no financial assistance for direct school costs. One young man who dropped out of school at 15 years of age following his return to his maternal village, explained:

> My uncle told me to come home, so when I came I could not afford notebooks, books and for me to go to the garden and raise money for these things was difficult so I just dropped out.

He also noted that, following his mother's re-marriage and subsequent move away from the village, there was no one to insist he went to school.

As suggested above, closely linked to material support for school, young people raised the issue of emotional support or 'encouragement' – of someone to take an interest, motivate them and ensure that they attend school[20]. The lack of such encouragement, which was strongly associated with orphanhood, was ranked as one of the main reasons for dropout amongst out-of-school youth at Namalongo. One boy commented, "If I had had my father I would have finished school…most boys need encouragement".

This idea of emotional support and encouragement in relation to attendance and retention at school, was something given less consideration by communities, who focused more on the physical deprivations of orphans. It was only mentioned by very few key informants, although PEAs for both Mzimba South schools highlighted it as an additional constraint on pupil's retention. At Pamoza, the PEA related this in particular to the loss of or ill-health of the mother, explaining that in the culture of that area responsibility for the care and supervision of children was very much with the women. Teachers at Namalongo and Pamoza both highlighted that, in the face of other difficulties such as poverty, pupils need reassurance and encouragement to endure and proceed with school. They argued that many orphaned children lack this additional support. At Namalongo, one female teacher related it to her own situation:

> I think the poor ones have less problems, because the parents are still alive and they can encourage their kids to just accept the life they are living. And assuring them that if you work in school and do well, it means you shall live good life. .. But this other child from affected families lacks encouragement. In the due course of the sickness, parents may die and the children will have nobody to encourage them…Even if we are to ask each other here, you will learn that most of us come from poor families, but we had parents - that is why we are working.

Underlining this, a young man who had supported himself and his younger brothers after the death of his mother, stated (see Vignette 2: Chisomo's story):

> … there was nobody to force us to go to school since we were all children…If there were people who could encourage me to go to school my future would have been bright. There was no one who encouraged us. They were just looking at us as we went herding livestock. If there were people who could encourage us we would have continued with school.

In sharp contrast to this, a young female pupil, also from Duma, spoke at length of the encouragement received from her mother and how this gave her the strength to continue with school, despite living in an impoverished situation (see Vignette 5: Titani's story).

---

[20]    In Chichewa such individuals were described as 'olimbiktsa', which in translation means 'someone who strengthens another', which is probably closer to an idea of providing what might be called moral support – an active rather than a passive role.

> The one who encourages and supports me is my mother, no one else does this to me...There is a lot of that our mother is doing to us to enable us go to school. She gives us advice and also encourages us, by not allowing us to be absent anyhow...Sometimes we could go to school without eating anything in the morning, we could wear dirty clothes, bath without soap and no body oil … still our mother told us to go to school

Across all schools, there was a notable difference between those young people in school and those who had dropped out. Amongst pupils, all but one were able to name someone whom they felt provided some sort of 'encouragement' in regard to their schooling. This was generally fairly low-key - in the form of advice or words of support and/or making sure they had left for school that day. Some pupils also noted, however, that such support included looking through their notebooks or, on rare occasions, assistance with school work.

In contrast, out of seven of the out-of-school youth who mentioned a parent or guardian who provided such support, in five cases the person named had died whilst they were at school. Thus, as with material support for school needs, responses from pupils show that following the death of parent(s), many were able to draw continued emotional support from their guardians, fellow siblings or the extended family. This appears not to have been the case for out-of-school youth. Thus, against a background of underlying poverty and erratic financial support for schooling, active encouragement and emotional support might contribute to whether young people affected by HIV and AIDS persevere with their education or not. Only in three cases did pupils name teachers as providing encouragement, highlighting a gap in the school's support for the emotional needs of children affected by HIV and AIDS – and indicating a potential role for future support.

### Vignette 5: Titani

Titani is a 14 year old girl repeating Standard 8 at Duma school. She lost her father two years previously to an AIDS-related illness. She stays with her mother and younger sisters. Following the death of her father, her uncles took much of their property and they were forced to move to a different house. Titani notes a significant change in household circumstances - her father was a small-scale farmer, selling several cash crops and they were well provided for. Now there is a struggle to meet all their basic needs, and they would sometimes go to school hungry. Titani said that following the loss of her father and the ensuing financial difficulties she no longer felt good about going to school, but her mother would force her to go.

Titani has a strong respect and love for her mother who works hard to support the family and makes sure that they attend school. The mother seeks out *ganyu* to earn money. Titani occasionally helps her in this. She has a good network of friends (all female pupils) who discuss their problems and encourage each other to remain in school. The mother is sometimes sick, however, and Titani is sometimes absent from school to care for her. She expressed concern that when her mother is sick this affects her concentration and participation in class. Titani has a lot of household chores to do to assist her mother, but she appears to bear them stoically, saying she has to help her mother since her mother already does a lot for them. Although repeating standard eight, she is hopeful about finishing school and continuing her education to find work and support the family.

**Summary points**

- Attitudes of parents or guardians of orphans and other children made vulnerable by HIV and AIDS suggest a relatively high demand for education, although the extent by which this is supported in practice depends on range of factors related to poverty, demand for children's work, perceived gender roles and intra-household discrimination.
- Most of the children affected by HIV and AIDS who were enrolled in school were receiving some material support for direct school costs (notebooks, pens, uniform) either from household members or family living and working elsewhere, albeit often very limited and/or on an irregular basis. There were a few examples of pupils supporting their own school needs (Phalombe).
- In contrast, in almost all cases, those children and youth who were out of school had seen the loss of those individuals responsible from providing material support for school costs and had not had further recourse to assistance.
- In the context of underlying poverty and erratic material support, active encouragement and emotional support has been shown to have a positive impact on children's motivation, school attendance and retention.

# 5  Psychosocial factors: findings and discussion

This section discusses some of the psychosocial factors that emerged from the case study findings, factors that either support the continued schooling of children affected by HIV and AIDS or result in additional constraints on their access and retention. It highlights issues related to children's own motivation and personal agency as well as the psychological impact of HIV and AIDS and how they respond. It also examines the role of peer groups in supporting children's schooling.

## *5.1 Motivation and decision-making*

Interviews with pupils affected by HIV and AIDS indicated a strong motivation to learn and stay in school. Many expressed the belief that this would afford them a 'bright future', such as allowing them to secure future employment (see Table 11). As with the views of guardians, such attitudes were attributed in part to the successes of others observed in their communities. In addition, when asked what they felt were the most important things in their lives, the majority of pupils across all schools mentioned education – studying, reading, school. The remainder mentioned material items (clothes, shoes, school materials) or religion.

**Table 11:  Responses from pupils affected by HIV and AIDS, giving their reasons for continuing with school**

| Reasons given | No of responses ( n = 13) |
|---|---|
| **To continue with education**<br><br>Because I want to know how to read and when I reach standard eight if I find someone to support me to continue with my education I will continue.<br>*16 year old female pupil, Duma* | 3 |
| **To have a better future**<br><br>Because I know that if I become educated you can live a better life in future.<br>*15 year old male pupil, Kamunda* | 4 |
| **To find employment**<br><br>I wish to work in future, to get employed.<br>*16 year old female pupil, Pamoza* | 3 |
| **To avoid being associated with friends who are drop outs**<br><br>If I drop out people will say that I have dropped out because of my friend, but let him stay at home while I continue with school so that people can see the difference. *15 year old male pupil, Duma* | 3 |

Amongst the out-of-school youth interviewed most expressed real regret at having left school and several said they continued to associate with friends who were still in school. Several noted a desire to have remained in school if circumstances had been different. One young man from Kamunda who had left school at the insistent of his grandfather, said:

When my friends have knocked off from school I ask them what they have written…I think if I was still at school I would have learnt this.

In Mzimba South schools, several of the pupils interviewed - plus their guardians - also emphasised the importance of education in becoming self-reliant and independent. This was perceived as particularly important because of their orphan status. Comments from a 17 year old female pupil from Pamoza, illustrate this:

We should work hard at school. When we are educated then this means the end of being an orphan. .. because we will be self reliant.

## Summary points

- Interviews with pupils affected by HIV and AIDS indicate a strong motivation to learn and stay in school, with education seen as an important route to a secure future. Those children and young people out of school expressed regret at leaving school early.

## 5.1 Peer pressure and social networks

A perception amongst several school-based key informants and teachers was that, in general terms, pupils, especially boys, are often pressurised by their peers to absent themselves from class or drop out from school permanently. School dropout said to be due to association with other young people who had already left school. This was rarely mentioned specifically in relation to the impact of HIV and AIDS, but was seen as a more general concern. Although a few of the pupils interviewed mentioned incidents of themselves and friends skipping classes, this type of peer pressure was not seen as major cause of absenteeism amongst the young people themselves and was ranked low as a reason for dropout (see Appendix 1). Indeed, amongst the young people interviewed, only one young man gave this as a reason for his dropout. It seems that this was associated with the fact that he was older than many of his fellow pupils. He explained:

People were saying 'you just leave school. You are too old for Standard 6…so I dropped, why should they tease me?'

Whilst for children affected by HIV and AIDS who have a history of absenteeism and repetition being seen as 'over-age' might indeed bring pressure to bear on their persistence at school, most of the out-of-school youth interviewed indicated that final decisions to leave school were more closely linked to issues of poverty and subsequent household or individual coping strategies, including early entry into marriage.

A more common form of pressure from peer groups mentioned – and one linked specifically with children affected by HIV and AIDS - was that of 'envy' or 'admiring friends', which would lead to a desire to copy or acquire what their friends had. During FGDs, several discussions highlighted how orphaned pupils and others from households made vulnerable by HIV and AIDS might envy pupils from less impoverished households, particularly in terms of their clothing. This was mentioned particularly in relation to girls and their perceived feelings of shyness and shame at their own appearance. In the Phalombe case study schools, discussions highlighted envy of their more well-to-do peers as one of the root causes of girls entering into sexual relationships - largely transactional in nature – and subsequent pregnancy or marriage and withdrawal from school (see Section 4.4). In Namalongo, out-of-school youth who attended the mini-workshop ranked this as one reason for pupil drop out. During discussions one girl explained:

Some girls envy their friends when they have better clothes and other things at school. They find boyfriends to provide them with similar things. They fall pregnant and leave school.

One of the out-of-school youth interviewed at Namalongo, dropped out of school after starting an affair with a relatively wealthy young man and, subsequently, became pregnant. During the interview she often complained of a lack of financial support within the household during the ill-health and death of her father, comparing herself unfavourable with her peers:

What I did not like when I went to school, it was like there were people from well-to-do families who were properly dressed and had money to spend at school.

Her mother blamed her dropout on her desire for the greater financial support offered to her by her then boyfriend.

In contrast to key informants' assumptions about peer group pressure, discussions with pupils from households affected by HIV and AIDS suggest that friendships formed within peer groups *can* reinforce positive attitudes to education and provide support for their learning and continued retention at school. Across all four schools, the majority of pupils interviewed (12 out of 14) identified their closest friends as fellow pupils. When asked what they did when spending time with their friends, the majority emphasised discussion of school-related issues. In several cases, mostly amongst girls, this involved encouraging each other to work hard in order to finish school and find employment and to avoid behaviour that would put them at risk of exclusion from school, such as involvement in sexual relationships.

…telling each other to concentrate on education for us to get good jobs in future after completing with our education.                                    *Female pupil, Duma*

We encourage each other to work hard in class ... For example I might say 'we should work hard at school' and they all agree.
*Female pupil, Namalongo*

*…we do advise each other not to have relationships with boys … advise each other not to fall in love!*                                    *Female pupil, Duma*

Several pupils, both boys and girls went further to say that one thing they disliked about school was pupils initiating sexual relationships with fellow pupils, reiterating a stance probably preached by teachers and/or sexual health messages that this leads to early pregnancies and 'contracting diseases'. A few pupils – again predominantly girls, described how their close friends would provide support during difficult circumstances: lending clothes or school materials, discussing problems or offering consolation when feeling sad or mocked by others.

I and my friends we talk of the problems that we are facing, like lack of soap to wash clothes, lack of body lotion, lack of pocket money to buy food when at school…I am happy when I'm with my friends as I forget my problems as we discuss how to go about some of the problems.
*Female pupil, Duma*

Sometimes when my sister has refused to give me soap, she gives me some from her house. [pause] My friend is kind.
*Female pupil, Pamoza*

> We share everything and help each other …Like maybe you are walking in the road
> and you can meet someone who keeps saying something to you that you don't like…
> I do ask my friend to help me sort out the issue.
>
> *Female pupil, Namalongo*

In addition to such support, over half of pupils, both boys and girls, described how they and their friends study together and assist one another with school work. This might be during a few moments snatched during class breaks or when out of class, or in afternoons after the school day is over. In line with cultural norms of social distance amongst adolescent boys and girls, the majority of pupils (9 out of 14) said that their peer groups and close friends were of the same sex. Although a few noted that in these days of 'gender', girls and boys could mix as friends to discuss 'school things'.

## Summary points

- Pressure from peers to leave school early was generally *not* seen by young people affected by HIV and AIDS as a direct cause of their decision to drop out.
- Indirectly, envy and admiration of more well-to-do peers, was seen as a potential root cause of girls' dropout, leading them to enter in transactional sexual relationships and subsequent pregnancy and/or marriage.

## 5.2 Anxiety, low self-esteem and isolation

Despite the resilience of children affected by HIV and AIDS in the face of often very difficult circumstances, many of them go through periods of anxiety, uncertainty and even despair. Across case study schools, key informants, teachers and community members made repeated references to the anxiety felt by orphans and other children affected by HIV and AIDS; their worries over the future or their current circumstances, their feelings of neglect and low self-confidence. Of those key informants and focus group participants who argued that children affected by HIV and AIDS face additional disadvantages in terms of learning and retention, several highlighted the psychological impact of caring for those chronically ill.

> Because of sick parents the child will start worrying … The household with a sick
> person will be full of anxiety.                                    *Male teacher, Duma*

> But a child whose parents are infected cannot do well. S/he will just be thinking of
> his/her parents…s/he will have a lot of thoughts.          *PTA Chair, Namalongo*

Several key informants and community members spoke from personal experience of caring for orphans. A common reflection was that such children 'think a lot' about their late parents and can no longer 'feel proud' or confident. Participants observed that orphans often feel their lack of parental care and support because of the reduced circumstances they find themselves in. This was mentioned to illustrate the difference between orphans and other disadvantaged groups, such as children coming from poor households. Bereaved children were said to have difficulties adjusting to their new circumstances and often felt unfairly treated, whether real or imagined. A few key informants noted that this made some of them withdrawn or unruly and difficult to teach.

> … the child whose parent are poor is already used to those problems, while the other
> child who has just lost parents finds such problems at that particular moment…
> When the child who has just lost parents misses a meal s/he thinks of the late
> parents, whilst the one whose parents are alive knows that come rain or sunlight they
> will have a meal at the end of the day, or they can sleep on empty stomach, but they
> take it as normal life compared to one who has just lost parents.
>
> *Female community member, Pamoza*

> They feel shy amongst their friends, they are not confident of themselves. They think they are neglected and they think that people think of them in a different way, so they feel shy, rejected and disconnected. They suffer psychologically.
>
> *School Head, Namalongo school*

> Those from affected families, it's like they start new life after the death of their parents. So they see the new life very strange. …     *Male teacher, Namalongo*

> In class they can look miserable, they lack concentration because of thinking too much…also can be rough and rude. They think that people in the community don't want them that they are not supported and they feel rejected. So, they can behave abnormally – they can be rude to teachers and not do as they are told. Teachers cannot ask them to do anything.
>
> *PEA, Kamunda*

Most key informants and teachers noted that the main impact of pupils' psychological problems was on pupils' participation in class and, subsequently, their performance. A few noted that this may eventually lead to dropout. Some participants acknowledged that any psychological impact on schooling depended on the attitudes and character of the individual children.

> But there are some orphans which have negative attitude. Much as you can help and assist them, they don't appreciate. What they have in their mind is that they are orphans and they don't concentrate in class. But giving the same help and assistance to other orphans they appreciate and do well with their education.  So it's just a mind set of other orphans.     *Male teacher, Namalongo*

During interviews with young people affected by HIV and AIDS, several spoke of the times of their parents' death or ill-health prior to death as times of great anxiety and sorrow. Unused to self-reflection, comments were often sparse, but are believed to be indicative of their feelings. Reflecting comments from key informants and focus groups, a few mentioned concern over the loss of support:

> I was not happy when going to school, since I had lost the person who was assisting me.
>
> *Male pupil, Duma*

Others spoke feels of isolation and unhappiness:

> I was very lonely, because most of my friends I chat with have parents.
> *Female pupil, Namalongo*

> My life changed because when she was alive I used to be proud and happy, but when she passed away I wasn't really happy. I was not happy.
> *Male pupil, Duma.*

Young people's acknowledgement and description of the psychological impact of the death or sickness of a parent or guardian on their schooling varied amongst participants, with no distinct patterns emerging across schools. During discussion of classroom experiences, all pupils said that most of the time they participated well in class. Two pupils from Namalongo, both in sibling-headed households, stated that they were classroom monitors. Similarly, all out-of-school youth interviewed said that, whilst in school, they had generally participated well. However, of those young people who spoke of their emotional state during previous times of trauma, the majority (8 out of 14) did acknowledge that the situations they found themselves in had had negative impact on their participation and performance in class during those specific times. Several indicated that they had been determined to continue with their schooling, but had had difficulties engaging in class activities.

Sometimes I could be lost in thoughts and later remind myself that I am in class.

*Male pupil, Duma*

I was just sitting – I had a lot of thoughts.                 *Female pupil, Duma*

In class I could follow a little, but I was full of sorrow…I was telling somebody else to answer instead of me.

*Male pupil, Kamunda*

A few, however, noted that, while saddened by the death of a parent, they did not feel this had significantly affected their performance at school. They related this to coming to terms with the bereavement and the need to think of their future. Interestingly, in each of these situations the young person in question had earlier spoken of strong support from a surviving parent or guardian. In sharp contrast, for two boys, the psychological impact of the ill-health and death of a parent was directly associated with an extended period of withdrawal from school. In this first exchange, a 16 year-old boy from Pamoza spoke of an earlier withdrawal from school following the death of his father (see Vignette 6: Bornwell's story).

I        What effect did the death of your father bring to your life?
R       We were living sorrowfully, my mother was crying throughout. This affected me also.
I        Did the death of your father affect your schooling?
R       Yes, my mother's attention from me was taken away, she was deeply touched. She could not even help me with my school work.
I        So, this affected your schooling?
R       Yes, and because I was also deeply touched by his death… I dropped because I was thinking of the situation at home.

In the second exchange, a 15 year old pupil from Kamunda, explains that he withdrew from school during his mother's ill-health, a period he estimated at over two years.

R       When my mother was sick I stopped going to school
I        All the time she was sick, you were not going to school?
R       Sometimes she could be ok, but this time she was very sick.
I        Why did you stop going to school?
R       I was very sorry. I felt pity
I        Were you assisting her?
R       Just feeling pity for her

These findings show that young people's psychological resilience and engagement with school differs greatly between individuals and is likely to be dependent on a host of factors, including their own personal motivation. Whatever their response, however, to the impact of HIV and AIDS on their lives, there are clearly critical periods of time where additional emotional support is required.

**Vignette 5: Bornwell**

Bornwell is a 16 year old boy who has just recently dropped out of school following a quarrel with a teacher over what he considered unjust punishment. He lives with his paternal grandparents at the same village where he grew up. His father died in 2002 and then the following year his mother fell sick. He accompanied his mother when she went home to her village, where she died.  He stayed at his maternal village for around another 2 years, then when his grandmother died, he returned to his paternal village. His paternal grandfather noted that Sandiwell's parents died of AIDS as did several of his father's siblings. He supports Sandiwell and other grandchildren  by  farming, although he complains he is old now and finds it increasingly difficult. He also receives occasional remittances from other children working in RSA .

The deaths in his family appear to have affected Sandiwell deeply and he withdrew from school for a lengthy period of time following death of his father, mother and then his grandmother. He states that is was his mother that was encouraging him to continue with schooling, but that after his father's death she 'was crying all the time' and that it took her attention away from him and she was no longer assisting him with school work. He relates his poor performance at school with the effects of the deaths on his mental well-being and with subsequent repetition of classes. He also said that fellow pupils mocked him, saying that his father died of AIDS. His grandfather notes that Sandiwell is often short-tempered, withdrawn and difficult to get along with.

## Summary points

- Children bereaved by HIV and AIDS or caring for the chronically ill suffer much anxiety over their current or future circumstances, lack confidence and feel neglected, often making them withdrawn or unruly in class.
- Children's psychological resilience and engagement with school following bereavement or during sickness of a parent or guardian differs between individuals. The main impact at such times was said to be on pupils' participation and performance in class; others noted little direct impact, but rather a determination to continue with school; for a few, the anxiety and distress of their personal circumstances was associated with an extended period of withdrawal from school.

# 6 Findings on school-related factors

In sections 4 and 5, the discussion of the findings related to the influence of factors at the household, community and personal level (including the influence of peer groups) on the access and retention at school of children affected by HIV and AIDS. This next section presents findings related to school-level factors.

The primary education system in Malawi is struggling with poor internal efficiency and low educational quality (Streuli and Moleni, 2007). As such, whilst the focus of this discussion is the school experiences of young people affected by HIV and AIDS and their specific situations, many of the issues arising related to more general issues that are likely to also affect the learning conditions of other groups of pupils.

## *6.1 School environment*

Issues of infrastructure and teacher numbers are important considerations in the quality of education provided in primary schools in Malawi and the participation and performance of pupils (Chimombo, 2005). Amongst the case study schools, within contrasting school contexts, there were clear differences in participants' perspectives of the relative importance of the pupils' learning environment in relation to their access to learning.

## School location and infrastructure

During mini-workshops, the distance required to travel to school was ranked as a major reason for absenteeism and dropout by young people at Namalongo and Duma, respectively. Interestingly, both schools were described by key informants as 'popular' – Namalongo because of the school feeding programme; Duma because of high pass rates – and had large catchment areas, despite the presence of other primary schools in the area. Thus, it might be, ironically, that household or individual decisions based on the perceived benefits of the schools put children under pressure to travel long distances to school – and for those from households affected by HIV and AIDS, this might not always be compatible with other household responsibilities. At Pamoza, teachers explained that during the rainy season, many pupils find it difficult to reach school because of surrounding flooded wetlands and rising rivers that cut off routes to the school.

Apart from travel to schools, most of the participants who raised concerns related to school environment were those from Kamunda, a rural school with poor infrastructure and insufficient classrooms (see Section 3.2). During discussions with pupils at mini-workshops, several said that they felt uncomfortable sitting on dust floors, especially as they had few clothes and did not always have soap to wash the clothes, which would quickly get dirty. During bad weather, those learning outside would often absent themselves from school.

## Staffing levels

A major concern at Kamunda, was the lack of teachers. With only five teachers to teach eight classes and a total enrolment of close to 1000 pupils, the school has adopted a split shift system, but even with that teachers rarely taught to the required timetable. Key informants perceived the teachers as hardworking, but struggling to cope. One guardian, a former pupil himself noted:

> When I was at school [pause] I think they were hard working and I was satisfied…
> and I think they are still doing a good job [pause], but the only problem is that we do
> not have enough teachers. When teachers are not enough there are no full services

> provided… they can not give full support to pupils. You will find that when the teacher is in another class, the other class has no teacher.

Pupils at Kamunda ranked the lack of teachers as the main reason for absenteeism at the school. They stated:

> Teachers are few and children do not have enough lessons, others decide not to go to school as they do not learn a lot…we might learn only two classes a day.

Such comments were confirmed by informal observations during the visit to the school: pupils were often left in class without teachers and pupils arriving for the later shift might only be in class for two hours before the end of teaching for the day. The PEA for Kamunda noted that teachers at the school were de-motivated, but had little choice but to continue as they were. In an effort to ease the burden on teachers, the SMC had recruited a volunteer teacher the previous year, but she had since left.

## Summary points
- In addition to problems related to travel to schools, issues of poor infrastructure and insufficient teachers were said to have a negative impact on pupils' attendance and retention.

### *6.1 Additional school costs*

School fees for primary schooling in Malawi were removed in 1994, following the election of a new, democratic regime. However, as argued by Kadzamira and Rose (2003), primary education is far from 'free' and the cost of schooling remains a major constraint to educational access. As noted earlier, many households struggle to provide their children with the basic direct school costs: uniform, writing materials and exercise books[21] (see Section 4.5). In addition to these, households are expected to pay for any number of *ad-hoc* costs levied at the discretion of the schools, such as contributions to school development projects or payment for mock exams.

The issue of additional school costs was raised as a particular concern by several of the young people and their guardians interviewed at Namalongo school and was ranked as one of contributing factors to drop out by out-of-school youth. The issue was that of extra part-time classes arranged by teachers in the afternoons, which had to be paid for privately. Orphans and other vulnerable children were not exempt from such payments, which were felt to be prohibitive. Only two of the twelve pupils that participated in the mini-workshops actually attended these classes, the others all said they could not afford the fee required. Those that did attend said they did *ganyu* to raise the money. Pupils complained that some timetabled lessons were cut short, only to be finished off during afternoon sessions as a means to force pupils to attend. Thus, they were being denied learning opportunities open to their fellow pupils. One guardian said that a group of parents and guardians concerned about having to pay for these classes had complained to the DEM, but that the matter had not yet been resolved.

## Summary point
- Many households struggle to provide their children with basic school needs (writing materials, uniforms), so that additional school costs further increase the financial burden on households. Payment for afternoon classes discriminates against children living in impoverished households.

---

[21] The government does provide limited numbers of exercise books for pupils, but it was widely acknowledged at all case study schools that these are insufficient.

## 6.2 School culture, discipline and violence

School culture in Malawi, as in other countries in SSA, is often authoritarian and highly gendered, with teachers using discipline and their power of authority to exert social control over pupils (Kadzamira, Moleni and Kunje, 2006; Leach et al., 2003). Social distance between pupils and staff is upheld as an ideal and teachers expect to be respected and obeyed. Often pupils can be at the beck and call of teachers who expect them to run personal errands or provide manual labour at their homes. Schools rarely have forums for pupils to raise concerns or participate in school decisions. Corporal punishment – though officially banned in Malawi – is still prevalent in many schools.

During problem tree analysis with pupils, boys' groups at three of the four case study schools - Duma, Kamunda and Pamoza - identified harsh or unfair punishments as contributing to absenteeism. At Duma, pupils ranked harsh punishments as one of the main reasons for absenteeism; at Pamoza, they were ranked as one of the three top reasons for dropout by out-of-school youth (see Appendix 1). Punishments described as harsh by the young people commonly involved heavy physical labour, such as digging pit latrines or up-rooting tree stumps. One guardian interviewed at Duma complained that punishments given out by teachers were "not compatible with their age". Other such punishments were those felt to be inappropriate and degrading (e.g. telling a boy to clean out the girls' toilets) or with little perceived justification. Much of the disciplining of pupils is left in the hands of the class teacher and pupils noted that they can be frequently sent out of class as punishment for any number of offences, often decided upon in a seemingly ad-hoc manner. Several of the young people interviewed complained of pupils being whipped or beaten by teachers. Again, this was more often mentioned at Duma and Pamoza schools.

The direct impact of such punishments on pupils' participation at school was shown to be two-fold. Punishments were often given out during class time, thus denying them access to learning, or pupils would absent themselves from school rather than carry out a particular task. The mother of one female pupil at Pamoza, complained that:

> At times you will find out that some children do not attend classes. They are always out from classes, performing punishments: today it's someone's child, tomorrow it is the other's. We think the child is in class yet she has been given a punishment.

Indirectly, exposure to punishments seen as harsh or unjust can lead to fear and bitterness, poor relations with the teachers responsible and disengagement from the schooling process. In some situations, pupils may even withdraw completely from school. Young people who lack emotional support from parents or have suffered from psychosocial trauma, may be particularly disaffected. A troubled 16 year-old boy who lost both his parents to AIDS and has had a history of withdrawal and repetition at school, gave the following explanation for his recent dropout from Pamoza:

> That time I had a severe cough, then the teacher asked me if I had gone to the hospital. I told him that I had already gone, but he was thinking I was lying then chased me out of class. Before going out I asked him if the coughing was enough reason to send me out. He then said I was rude. He whipped me with a stick … since then I did not go back to school.

His paternal grandfather confirmed the incident and stated that, given the boy's reluctance to return, he felt he could not force him to go to school.

At Pamoza, there was a sense of hostility from the male out-of-school youth towards their former teachers, not only in terms of punishments they had received, but due to the practice of regularly ascribing chores or errands to individual pupils during school hours. In one

example, a young man described how teachers would send him on his bicycle to take maize to the nearest maize mill for grinding – a distance of some 14kms. This had meant, effectively, that he missed the entire day's classes. During mini-workshops with pupils at Namalongo, participants noted that girls' excessive punishments, harsh treatment or "conflicts" with male teachers might occur as a result of their refusal of the teachers' sexual advances.  A Standard 8 girl, explained:

> This happens when a teacher shows interest and proposes to the girl.  Because you refused to be in a relationship with a teacher so the teacher always finds faults in you.  They talk bad things against such girls and that discourages them.

There is a substantive and growing body of evidence to show that teachers' sexual harassment and abuse of pupils is commonplace in schools in Malawi, as elsewhere in sub-Saharan Africa (Kadzamira, Moleni and Kunje, 2006; Dunne and Leach, 2005; Leach et al., 2003; Human Rights Watch, 2001). A recent national survey of gender-based violence in schools in Malawi stated that a third of all pupils reported that teachers demanded sex from pupils at their school and a fifth of teachers reported that they knew teachers who entice pupils into 'love relationships' (Burton, 2005). In the case study schools, in addition to Namalongo, issues of teachers' sexual harassment and abuse of girls also arose at Duma and Pamoza.

At Duma, two of the young people interviewed independently confirmed that the school head had a reputation for touching girls on their breasts and other inappropriate behaviour. In addition, one of the female pupils interviewed noted that the school head would de-moralise and humiliate girls by referring to their relationships with boys and telling that they would not finish school. At Pamoza, it soon became apparent to the research team that one teacher was well known for propositioning and having affairs with female pupils and was responsible for at least one girl's pregnancy and subsequent dropout from school. This was discussed openly at mini-workshops with both pupils and out-of-school youth. Participants explained that whether the girl accepted or refused the teacher, both scenarios had serious repercussions for their continued access to schooling. A Standard 7 girl, Margaret[22], a double orphan who lived with an elderly grandmother and who had been propositioned herself, spoke eloquently on the difficulties faced by girls unfortunate enough to catch the interest of this teacher.

> The teacher sends the girl to leave her exercise books in the office and the teacher follows the girl to make a proposal and because others fear to answer no they say I will answer tomorrow. They then stop coming to school because of fear … The girls are afraid to tell their parents, because they feel shy when they have been proposed, so they prefer staying at home…if the girl comes to school then the teacher can become angry and threaten that she will fail…if the girl accepts the teacher then she can become pregnant and drop out.

Later, during an interview, she spoke of her own experiences, clearly illustrating how abuse found at school can push out children already struggling in difficult home situations[23]:

> I have been absent for the first week of this term because of what Mr. Chisi did to me, proposing to me and telling me whatever I do I will not pass examinations…When I fail something  he is fond of telling me that I am one of the rude children in class. When I go to him to mark my work he beats me… So I feel it is not important to continue with school, especially as we face so many problems at home … I often don't have soap to wash the few clothes that I have.

---

[22]     Names have been changed

[23]     Unfortunately, during a follow-up visit a few months later, it was discovered that Margaret had since left school permanently and was married.

Discussions with the SMC chair confirmed that the teacher's behaviour was known to school management and that steps were being taken to tackle the issue, although it was not clear what form this action would take. Two of the guardians interviewed also highlighted the behaviour of this teacher as a source of tension between the school and the community.

Reflecting earlier research in schools in Malawi (Kadzamira, Moleni and Kunje, 2006; Leach et al., 2003), it was apparent at case study schools that teachers' sexual harassment and abuse of female pupils was part of a wider issue of school-based violence, which included not only the use of corporal punishment mentioned above, but bullying and gender violence in pupil interactions. Several of the young people interviewed mentioned bullying and fighting as their main dislike about school and out-of-school youth at Pamoza (both boys and girls) ranked this amongst the top three reasons for dropout. A few female pupils also spoke of boys' unwanted sexual advances, both verbal and physical.

### Summary points
- Punishments and errands perceived as harsh or inappropriate contribute towards pupils' lack of access to learning, absenteeism and disengagement from schooling.
- Examples of teachers' harassment or sexual abuse of female pupils were evident at three of the schools visited. This was found to be part of a wider issue of school-based violence, which included not only corporal punishment, but bullying and gender violence in pupil interactions.
- Young people affected by HIV and AIDS who lack emotional support from parents, are facing difficulties at home or have suffered from trauma, may be particularly disaffected by their experiences of violence or abuse at school.


### *6.3 Evidence of stigma and discrimination at school*

## Teachers' attitudes

Teachers in all four school communities generally professed sympathy for orphans and other children made vulnerable by HIV and AIDS and acknowledged that such children face additional difficulties that may constrain their access to school. In a frank discussion with teachers at Namalongo, some observed, however, that such children can be "troublesome", "lack respect for elders" and "difficult to reprimand". These perceptions were said to be largely based on experiences of teaching orphans staying at a local orphanage, whom were felt to lack "proper parental advice"; or others who were felt to be having difficulties adjusting to orphanhood. Such perceptions reflect those expressed by others, with regard to the psychological impact of the loss of their parents (see section 5.3).

**Table 12: Selected responses from children affected by HIV and AIDS, regarding discrimination from teachers at school**

| Responses |
|---|
| *In school* |
|     No, we are all treated in the same way by our class teacher. I am not treated in a special way.<br>    They don't differentiate. We are treated equally.<br>    We were assisted equally.<br>    At school I am assisted in the same way as my friends |
| |
| *Out-of-school* |
|     There was nothing. We were treated equally.<br>    They were giving us same treatment.<br>    We were assisted equally. |

School heads and representatives of SMCs at Namalongo, Kamunda and Pamoza were all adamant that children affected by HIV and AIDS faced no discrimination at school from teachers. PEAs and school heads supported their teachers, saying that teachers interact well with orphans and other children affected by HIV and AIDS and would treat them no differently from other pupils. Such views were confirmed by young people themselves. During interviews they denied, even on continued probing, that teachers had treated them any differently because of their orphan status or home circumstances (see table 12). They also denied that teachers made any discriminatory comments or insulted them. Where young people reported negatively on teacher behaviour, this was related either to issues of sexual harassment or punishments perceived as unfair.

National estimates of HIV prevalence amongst 15 to 17 year olds stand at 1.3% for girls and 0.7% for boys (NSO, 2005). This suggests that in case study schools, where almost all pupils were 17 years or younger, relatively few pupils were likely to be HIV positive, although there is an argument that with wider availability of Anti-Retro Treatment (ART) increasing numbers of paediatric cases will be reaching school-entry age (Pridmore, 2008). Certainly, PEAs responsible for Namolongo and Pamoza did mention being informed about a very small number of HIV-infected children at schools in their zones, including the case study schools. Whatever the reality, the assumption among teachers was that many children who had lost parents to AIDS were likely to be infected themselves. To explore further teachers' wider attitudes to children affected by HIV and AIDS, teachers were probed during FGDs on how they would feel about having children in their class known to be – or suspected of being – HIV positive. Teachers at all schools stated that they would feel pity or sorrow for the child. One teacher at Duma also noted that by being aware of their status, teachers would be in a position to encourage and support such children. Ensuing debate, however, revealed a desire not to single out children for special attention, as shown in the following exchange:

| | |
|---|---|
| Male Teacher 1: | You can love the pupil more the others, so that the others don't notice anything. You should avoid giving him errands. |
| Facilitator: | What do others say? |
| Female teacher: | You should be giving him errands. There we should not discriminate. |
| Male Teacher 2: | Loving them more can make the other children suspicious. In the end they will say 'they've got it!' (Laughter) |
| Male Teacher 2: | I think the thing to do here is not to discriminate (murmurs of agreement). You should not discriminate so that the others don't notice anything. You should hide your feelings behind your mind. |

Teachers across all four case study schools concurred with this view. Although not always stated explicitly, this suggests a concern that children suspected of being HIV positive would be subjected to stigma and discrimination if fellow pupils were to become 'suspicious'. It also reflects an underlying discourse that equates 'equity' with 'equal treatment'. One male teacher at Namalongo spoke of a training session on HIV and AIDS.

…I was touched. I learnt a few things; that you need to treat every pupil equally those suffering from HIV/AIDS and others. Treat every pupil equally as a teacher and find means as a teacher so that the pupil feels the teacher treats me same as other pupils. Don't be sorry as a teacher, so that the pupil knows that you too as a teacher you are sorry.

Maintaining a stance of 'equal treatment' creates a tension, however, with supporting the specific emotional and educational needs of such children. It may also compound feelings of rejection and low self-esteem amongst pupils. A comment by another male teacher from Namalongo illustrates this:

And what happens with these orphans is that the moment you reprimand them on certain things, they think you are troubling them. While it's not that. Every child is reprimanded if something goes amiss, but not with orphans, they think you are troubling them.

## Discrimination by pupils

Key informants from school management across case study schools were keen to present an image of their schools as institutions free from stigma or discrimination. All argued that pupils interacted freely with each other and that children affected by HIV and AIDS were not targeted by fellow pupils. Teachers' concern about raising the 'suspicions' of fellow pupils through preferential treatment (see above) suggests a different picture, however. One female teacher at Namalongo gave the following example.

> There was a time when some pupils quarrelled and one shouted, 'get lost, you who take ARVs'… and I had to call the pupil who was shouting to find out. I advised the boy … I told him that he can be sued. But I don't know how the boy knew of his friend's status on ARVs.

Ironically, the availability of ARV medication in the rural areas appears to increase the visibility of affected households, potentially making them more vulnerable to stigma and discrimination. During a focus group with teachers at Duma, one teacher indicated an occasion which illustrates this:

> During the HIV testing week some boys went boastfully to the centre for HIV test and when they came back they said 'so and so have been given medication that they will be taking' meaning that something has happened. We have this week - it is announced on the radio so children rush there.

At Duma, the secretary of the local CBO spoke of discrimination faced by pupils. She stated:
> Children who stay close to them might mock [them]. For example, their parents tell them that in such-and-such a family the parents get ARVs… children might mock those from the affected family, saying their parents are living on '*mauniti a moyo*' [literally, 'life units']24

The PEA for the area, opined that whilst discrimination at school was not common, it could "follow a child there from home."

Whilst most of the young people interviewed indicated that they socialise with established groups of friends whilst at school, the majority also gave examples of teasing and name-calling by fellow pupils (See Table 12). For those from Mzimba South schools, such examples of verbal abuse were generally directly related to parents' death from AIDS. In Phalombe those that mentioned teasing spoke of comments related to their impoverishment, rather than direct references to HIV and AIDS. However, this may have been a factor of a greater reticence in that area to speak of issues of HIV and AIDS.

---

24      A modern metaphor associating ARVs with units bought to recharge mobile phones – living on borrowed time.

**Table 13: Examples from children affected by HIV and AIDS, regarding discrimination from fellow pupils**

| Responses |
|---|
| *In school* |
| Sometimes I feel sad, especially when we quarrel and they start saying 'you don't have your mother'…I start thinking, are these friends saying this because both their mother and father are still alive? I just keep these things in my mind and days go by. |
| *15 year old boy, Duma* |
| They say, your father is dead so don't provoke us |
| *15 year old boy, Kamunda* |
| They ask where my father is, they think I killed him, they also boast that their parents are still alive. They say ' your mother died of the deadly disease'. |
| *16 year old girl, Pamoza* |
| They say we were pompous when our father was alive and now that we lost him and some of our wealth…they say we are now equal and others say they are better off than myself and my relatives. |
| *17 year old girl, Pamoza* |
| *Out-of-school* |
| If you put on the same clothes everyday, without washing them, bathing without body lotion or vaseline you could not look nice… Your friends could laugh at you. |
| *19 year old young man, Duma* |
| Friends would be laughing when I was in poverty |
| *22 year old young woman, Duma* |
| Yes, they were saying my father died because of his own carelessness - they said my father died of HIV/AIDS. |
| *16 year old boy, Pamoza* |
| They were talking about my late parents, they were saying they died of AIDS, they were just envying me because I was their head girl. |
| *16 year old girl, Pamoza* |

Experiences differ, however. Ten out of twenty-four of the young people interviewed stated that they had not experienced such teasing at school or, if they had, it was just by a few pupils and not to be taken seriously. None of the young people interviewed offered such discrimination as a major factor in absenteeism or dropout, or as having a significant effect on performance. However, such daily experiences of schooling are likely to contribute to feelings of exclusion, isolation and sorrow, which in turn can effect their participation. This was a concern raised by some teachers.

> Such pupils are miserable and at times segregated, as a teacher you tell that pupil to go and be with your friends. I really feel pity because there is stigma.
> *Female teacher, Namalongo*

> Because of this mockery, the children develop a negative attitude towards going to school, as the mockery makes them feel uneasy at school.
> *CBO representative, Duma*

**Summary points**

- In practice teachers do not actively discriminate against children affected by HIV and AIDS.
- Teachers' attitudes towards children affected - or infected - by HIV and AIDS were generally sympathetic, although they did not see the necessity of making special provision for their learning and emotional needs, believing that all children should be treated equally.
- Many children affected by HIV and AIDS suffer discrimination from fellow pupils, generally in the form of teasing and name-calling.

## *6.5 Exclusionary practices*

In his writing on social exclusion, Sen (2000) makes a distinction between *active* and *passive* exclusion. The latter does not involve any deliberate attempt to exclude, but social arrangements are such that they still result in exclusion. Previous research on the impact of HIV and AIDS in schools in Malawi indicated that whilst there was little overt discrimination against orphans and other children made vulnerable by HIV and AIDS, a lack of support or insensitivity to their situation contributed to their exclusion (Kadzamira et al., 2001). The case study schools, however, presented a somewhat more complex picture, with examples of both forms of exclusion. Some pupils were clearly at risk from teasing and bullying by fellow pupils (see above). In addition, attitudes to HIV and AIDS and informal school policy, whilst not deliberately discriminating against children affected by HIV and AIDS, could lead to their exclusion.

## Uniforms and other school costs

In Malawi, the requirement to wear school uniform was removed in 1994 at the onset of FPE. However, discussions with young people during mini-workshops, revealed - with strong commonality across schools – that pupils were sent home by teachers if consistently found not wearing uniform. Young people expressed much bitterness about this enforced absenteeism, noting that teachers had little sympathy for the difficulties they faced at home. At three of the case study schools – Duma, Namalongo and Kamunda – this practice was also ranked as a major reason for dropout. One female out-of-school youth from Kamunda described their experiences:

> Teachers are harsh, they send children without uniform out of school. The teachers do not consider that some children are coming from poor families. They only allow the Standard One children at school without uniform… Because the children fail to get money for themselves they drop [out of school]. The children without uniforms can cry to the teachers to allow them at school, but teachers totally refuse those without uniform.

When asked what current Ministry policy was regarding uniform, the PEA at Duma gave the following response:

> The policy is that learners are allowed to wear any clothes, shirt and shorts for boys, skirt or dress for girls. Uniform is there, but children are allowed to learn. Teachers do not send them back.

Whether the PEA was personally aware or not of the practice at the school level, at case study schools this directive was clearly being flouted. At Duma, researchers personally observed the school head pulling pupils not wearing uniform out of line at school assembly, telling them to wait in a group as other entered the classroom and then sending them home.

At Namalongo and Duma, pupils observed that this practice was extended to clothes worn on Wednesday – a day when children were exempt from wearing uniform[25] - if they were felt to be inappropriate. Pupils said this could include T-shirts, long shorts or short skirts[26]. Similarly, pupils might be sent home if their uniform or clothes were or torn or dirty. As noted earlier, the lack of basic necessities, such as soap to wash clothes, was said to have a major impact on attendance. Clearly, pupils' feeling of embarrassment and shame at coming to school in poor clothing - possibly to face teasing from fellow pupils – is further compounded by teachers' exclusionary practices.

While such practices impact on all poor or vulnerable families, children from households affected by HIV and AIDS can find themselves particularly disadvantaged as they can be amongst the most impoverished and have little recourse to support for their schooling needs. Enforced and continued absenteeism can lead to eventual withdrawal from schooling. An interview with one male out-of-school youth from Duma, illustrates this point (see Vignette 2: Chisomo's story). He spoke of his own exclusion whilst at school:

> I was feeling ashamed and the teachers wanted every pupil to be in uniform so they were sending us back… I was not pleased with this because they were sending us back when we had no money to buy such things.

Later he described difficulties faced by his younger brothers:

> Last year they failed to go to school because of problems that we had…Whenever they went to school they were being sent back because of uniform and I had no money to buy it, so the children got disappointed. They just started herding animals since each time they went to school they would be sent back…this year I tried very hard, doing ganyu until I bought the uniform so now they go to school.

Another young man, a school dropout from Kamunda, put it succinctly:

> I dropped out. I did not have shirts to wear… If there were no uniforms I would have continued with school.

Whilst some teachers acknowledged the difficulties vulnerable children face finding money to buy school uniform, none reflected on their own role in the pupils' exclusion from learning. Conversely, during discussions with teachers at Duma, the deputy-head advocated for further enforcement of the wearing of uniform, since "children don't envy each other and all are equal."

In addition to the issue of clothing, several of the young people interviewed noted that teachers had sent them home because they did not have notebooks or pens. One key informant at Namalongo explained how failure of parents or guardians to make monetary contributions to school development projects (e.g. building of school blocks) would result in their children being sent home. The exclusion of pupils from learning due to their inability to pay for uniforms or other school costs not only demonstrates an insensitivity to the difficulties faced by many orphans and other children made vulnerable by HIV and AIDS, but flies in the face of government policy that shows commitment to:

> *Ensure that orphans are not denied access to primary education, whether by virtue of their inability to pay, their age and their gender* (Government of Malawi OPC/NAC, 2003, cited in Bryceson, Fonseca and Kadzandira, 2004:45)

---

[25]    This is common practice in Malawian schools – allowing children time to wash their uniforms midweek.

[26]    In the Malawian context, this can be skirts reaching on or only just above the knee.

**Perceptions of HIV and AIDS in the classroom**

Illustrative of a more passive form of exclusion (Sen, 2000) is the issue of teaching HIV and AIDS in the classroom. HIV and AIDS topics are integrated in all subjects in the primary school curriculum, as a vehicle to promote awareness and HIV prevention. During discussions with teachers at Pamoza, one male teacher raised the concern that open references to HIV and AIDS in the classroom may exclude children who are HIV positive.

> **Teacher:** The child is positive and is in your class? Well, you can be concerned …This can affect your teaching of HIV/AIDS if the child has disclosed his/her status. You will be careful when mentioning that it's not only HIV/AIDS that kills people, but malaria as well as cholera, but if the child has not disclosed each time you mention HIV/AIDS he/she will be thinking that you are talking about him/her.
>
> **Facilitator:** So it means that if the child is HIV positive you can have problems teaching the HIV/AIDS topic?
>
> **Teacher:** If he/she hasn't disclosed, yes. Actually, it's the child who will have problems. It will be like you are frightening them. The child can even start running away from you.

It can be argued that such difficulties can also extent to those children not infected themselves, but whose households have been directly affected by HIV and AIDS. As the SMC Chair at Pamoza noted:

> The orphan will have problems in class, because there is AIDS information in class, so when the teacher mentions this s/he will feel as if the teacher is targeting her/him. This will make her/him feel depressed.

Observation of a Life Skills lesson at Duma school underlines this, as shown in the following extract from field notes:

> The topic is 'Entrepreneurship'…HIV and AIDS issues are integrated from introduction onwards. T encourages pupils to do small businesses in order to avoid prostitution, "girls should do other businesses rather than enticing men"… "behind prostitution is death'…'Planning' - T states that businessmen [sic] should not employ someone who is "too sexy", if married then husbands will come and vandalise shop!
> [Focus appears to be on girls/women as perpetrators of prostitution and by implication spread of HIV]
> …T makes further references to HIV and AIDS, which carry strong negative connotations – "killer disease", "this sickness is the enemy of development".
> [? Does this exclude children who have lost parents/mothers to this disease – constant refrain of low moral character leading to death?]

Similar use of language was observed during sessions of AIDS Toto clubs at Namalongo. There is need to consider how the strong medical and moral stance of the teaching about issues of HIV and AIDS might contribute to feelings of exclusion and isolation amongst affected children.

**Summary points**

- At all schools visited pupils were excluded from learning due to their inability to pay for uniforms or other school costs, regardless of their home circumstances.
- Young people expressed bitterness at teachers' perceived insensitivity to the difficulties faced by children from impoverished households.
- Such enforced and continued absenteeism can lead to permanent withdrawal from school.
- Teaching of issues of HIV and AIDS presents challenges in ensuring that pupils affected by HIV and AIDS do not feel further excluded.

# 7 Extent of support provided by schools for children affected by HIV and AIDS

This following section focuses on the second research question addressed by the case studies: to what extent schools support the access of children affected by HIV and AIDS. It details school-based programmes and local initiatives which can support such children (either directly or indirectly) and what arrangements are in place to identify, monitor and support children at risk of irregular attendance and dropout. It also highlights some of the challenges identified by participants in the provision of support and their recommendations for improving retention and access to learning.

## 7.1 School-based programmes and interventions

Whilst not specifically targeting children affected by HIV and AIDS, several government and NGO-led programmes present at the case study schools and were identified by key informants as beneficial to vulnerable children, including orphans (see Table 14).

**Table 14: List of government and NGO-led programmes at case study schools**

| School | Programme | Targeting |
|--------|-----------|-----------|
| Duma | <ul><li>School Health and Nutrition Programme</li><li>Ambassador Girls Support Project</li><li>Fawema 'Mothers Group'</li></ul> | All school-age children<br>Orphaned girls<br>Girls |
| Namalongo | <ul><li>School Health and Nutrition Programme</li><li>WFP school feeding programme</li></ul> | All school-age children<br>All pupils (take-home rations for orphans) |
| Kamunda | <ul><li>School Health and Nutrition Programme</li><li>Ambassador Girls Support Project</li><li>Fawema 'Mothers Group'</li></ul> | All school-age children<br>Orphaned girls<br>Girls |
| Pamoza | <ul><li>School Health and Nutrition Programme</li><li>Fawema 'Mothers Group'</li></ul> | All school-age children<br>Girls |

The School Health and Nutrition Programme (SHN) is a newly introduced government programme in all primary schools in Malawi which provides basic medicinal drugs to school for distribution to pupils. These drugs included: vitamin A and iron tablets, painkillers and drugs to treat bilhariza and malaria. Two teachers from each school were trained alongside Health Surveillance Assistants (HSAs) on how to administer the drugs. Following community sensitisation schools were used as centres to administer vitamin A and iron tablets and abendizole (for the treatment of worms) to all children in the surrounding communities. The other drugs were said to be stored at the schools to be administered at the discretion of teachers. School heads and PEAs were pleased with implementation of this initiative, although at three of the schools they complained that HSAs were reluctant to take part in activities, which they blamed on the HSA's pre-occupation for receiving allowances for their participation.

At Namalongo, the World Food Programme provides funding and supplies for a school-feeding programme whereby all pupils receive a daily ration of phala (porridge made from a soya/maize flour mix). Local community members were recruited to cook the phala and a project was underway to construct a permanent kitchen and store room at the school. The school-feeding programme was very popular with teachers and community members and was believed be responsible for increased enrolments and reduced absenteeism at the school. In addition to the provision of phala for all pupils, take-home rations of maize were

provided for all orphaned girls to encourage their attendance. More recently this has been extended to boys, although this included double orphans only. The programme is not without its challenges, however. The school decided to levy a charge of K15 a month to pay a small stipend to the cooks and this has proved unpopular with some community members. The elder brother in one of sibling-headed households visited noted that they often skip school on the day that such costs are expected to be paid. Whilst targeting orphans for take-home rations, no provision is made for other vulnerable children, such as those caring for sick parents.

At two schools, Duma and Kamunda, the USAID-funded programme the 'Ambassador's Girls Support Program' (AGSP) provides support for two vulnerable, orphaned girls identified by the school management; girls that attend regularly and perform well in class. The programme targets all schools in the respective zones. The girls receive school materials such as uniform, notebooks and pens as well as other basic necessities, such as shoes, blankets, paraffin (for lamps) and maize. Once a month, at zonal level, these girls assemble at the TDC to be trained on making handcrafts to sell. Under this programme, a small number of teachers are trained as counsellors and mentors for the girls. They are expected to visit girls to check on their progress at school and to be available for girls to discuss any difficulties they may be having. They are also expected visit to households if required. No mentor teachers were based at either Duma or Kamunda, but at neighbouring schools at a distance of several kilometres. During an interview with one of the girls enrolled on the programme she expressed her gratitude at the support she received, saying it made a real difference to her schooling. Her only regret was that at no support was available on completion of primary to allow her to continue to secondary school.

At three schools 'Mother's Groups' had been established under a programme funded by FAWEMA. The purpose of this programme was to train older, female community members to support girls' retention at school, mainly by holding meetings with girls and to raise awareness about the importance of education for girls. Despite some initial success school heads complained that such groups were fairly inactive and even when they attend schools, girls get bored as there is little variation in the activities and discussions that took place.

The PEA responsible for Kamunda also noted that previously another USAID-funded organisation, CRECCOM, had worked with the district education office to sensitise communities to assist orphans and other vulnerable children. Following an initial distribution of maize, community members were expected to continue making their own contributions, including setting up community gardens. However, the PEA explained that after hand over to the district the programme was not sustained as community members were facing their own food shortages. Again at Kamunda, a Mzimba-based NGO Tovwirane AIDS Organisation was said to coordinate a local committee to fund-raise for the distribution of a few basic necessities (soap, blankets, uniform) to identified orphans, although the school head complained of very limited support.

Similarly, across all school communities, key informants named local CBOs who had been involved in *ad-hoc* or one-off initiatives to distribute a few basic necessities such as soap, blankets or uniforms to a few pupils identified as coming from vulnerable households. In most cases these activities relied on fund-raising by the CBO members themselves and key informants raised concerns about the sustainability of such activities.

## Summary points

- Although there were no government or NGO-led school-based programmes specifically targeting children affected by HIV and AIDS, several were identified at the case study schools  as benefiting vulnerable children, including orphans.

- A few local NGOs and CBOs encourage local committees in small-scale fund-raising activities to support orphans and vulnerable children.

## 7.2 School-level initiatives

All four PEAs responsible for the case study schools acknowledged that their schools provided little or no specific support for children affected by HIV and AIDS. In terms of pupil welfare, very few activities had been initiated by the schools themselves, apart from occasional fundraising by the SMC at all schools to purchase a few basic necessities such as soap, pens and notebooks to be distributed orphans and other vulnerable children. Members noted though that this was irregular and did not reach all in need. At Namalongo and Kamunda there had been occasions when teachers had contributed money to buy uniforms for a few needy pupils.

In terms of providing additional learning support for pupils with difficulties accessing learning or poor participation and engagement with schooling, very little was available beyond assistance with work during class time and class revision exercises following assessments. Reference to learning support was generally limited to the concept of teachers verbally 'encouraging pupils' and, contrary to any sort of remedial or supplementary help, 'treating everyone equally.' A few teachers noted that giving orphans positions of responsibility in class could encourage their participation. School heads and PEAs were unable to provide details of opportunities for independent learning for pupils. School libraries were present at Kamunda and Pamoza (with books supplied by the National Library Service), but it was unclear how often these books were actually used. Generally school heads were reluctant to allow pupils to take supplementary readers or textbooks home. There was no indication at any of the schools of a system in place to provide homework or notes for an absent child to ensure some continuity of learning whilst they were out of school.

Earlier research into the impact of HIV and AIDS in schools in Malawi revealed that primary schools did not provide any formal guidance and counselling services to pupils (Kadzamira et al., 2001). Despite strong policy recommendations that such services be introduced, none of the case study schools visited had any formal guidance and counselling activities in place. Any references to 'counselling' at the schools described incidences of teachers or school heads offering general encouragement and advice on the importance of continuing with school, rather than any real professional, psychological support. At Kamunda, responsibilities for this were the remit of the Discipline Committee. Given cultural norms and the fairly authoritarian nature of the schools, any advice offered is likely to be more akin to lecturing, well-meaning or otherwise, on the part of the teachers.

> I then saw that there is a big problem at their home. I just counselled them that they should not be absent from school because of this.
>
> *Teacher FGD, Duma*

> Once we invited some of these children who have affected parents to the office. We did some counselling, me and the SMC chair. We told them not to lose hope, but to be very serious with school.
> *School head, Pamoza*

The impression given at the schools was that teachers believed that pupils should be encouraged not to 'think too much' about any possible trauma they have faced or any ongoing difficulties, but to 'concentrate on school'. There was no reference made by research participants to opening up communication to allow children to talk through or try to resolve their problems.

When, during interviews, young people and their guardians were asked what support they had received from the school during times of difficulty such as ill-health or death in the

household, all of those at Duma, Kamunda and Pamoza schools denied receiving any assistance. At Namalongo, three of the households mentioned that they had received a one-off donation of maize (presumably through the WFP school feeding programme). Two boys from Namalongo noted that teachers had assisted by 'telling them not to be absent.'

School heads at Namalongo and Pamoza suggested that extra-curricular clubs can provide encouragement and empowerment for young people, including those made vulnerable by HIV and AIDS. At Pamoza, the school head described one such club, a newly set up youth club 'Mphamvu kwa Chinyamata' (MKC) funded by the USAID MTTA programme, which included training in a range of vocational activities. Unfortunately the patron for this club was the same teacher identified as the one responsible for affairs with some of the female pupils at the school. It is also worth noting that of all the young people interviewed only one was a member of any extra-curricular club – an anti-AIDS club at Namalongo.

## Summary points

- Very little additional learning support or opportunities for independent learning are available for pupils with difficulties accessing learning or poor participation in class.
- No formal guidance and counselling services are available at any of the school visited.
- Young people and their guardians generally felt that they received little or no support from schools during times of difficulty, such as ill-health or death in the household.

### 7.3 Identification, monitoring and follow-up

During focus groups, all teachers contributed to lively debate regarding the difficulties faced by children affected by HIV and AIDS and were able to draw on several examples from the surrounding communities. However, when questioned whether they had affected, or infected, children in their own classes they said it was difficult for them to make such assumptions. They noted that in most cases they simply 'suspect'. This is indicative of a continuing silence and stigma surrounding HIV and AIDS, particularly in more remote, rural areas. The deputy head at Duma commented:

> Even when a death occurs we have never heard that this one has died of AIDS…We just know that some of the children look after sick parents, but the children have no right to disclose nor do I think that the sick person can disclose to the children…All we know is that some children look after sick parents. Sometimes they say, 'sir, I will not come to school today because I am taking my mother to the hospital' but they never disclose the nature of the sickness. When you ask they just say 'she is sick'. When you insist they say 'she is suffering from malaria', so you can't jump to conclusions.

Similarly at Kamunda, teachers noted that their assumptions regarding which children came from households affected by HIV and AIDS were based on knowledge of household circumstances, often in the form of local rumours. They gave one example of a parent of a pupil who had returned from RSA looking in very poor health and was now receiving regular medication – the local suspicion was that these were ARVs.

The situation in Namalongo and Pamoza was found to be somewhat different, however. In these areas there was a general greater openness and willingness to talk about HIV and AIDS. School staff and PEAs confirmed that a few parents had disclosed their HIV+ status (and on a couple of occasions the HIV+ status of their child) to PEAs or school heads, although in most cases knowledge of which households had been affected by HIV and AIDS remained an issue of supposition. At Pamoza, the school head also noted that SMC members were able to identify affected households for a one-off school initiative to provide a few basic necessities to affected households, because of their greater knowledge of the

circumstances of community members. In all school communities additional information on which households were supporting orphans, or were otherwise affected by HIV and AIDS, was found to be with local CBOs and HSAs, although there appeared to be little sharing of information with the schools. In addition, there was little evidence of links between schools and Village AIDS Committees.

For the vast majority of cases, therefore, schools had little accurate information regarding which pupils were affected by HIV and AIDS. No 'at risk' register was kept, beyond information on orphan status. Indeed, school staff expressed reluctance to collect such information, presumably over concern that such children would be discriminated against. Through observation of the pupils themselves and local knowledge of individual households, most teachers believed they could identify and were aware of the most vulnerable children amongst their pupils. Thus, as Kendall and O'Gara (2007:10) also observed in their earlier research, these vulnerable children were "a present, but officially invisible population in the school setting".

Namalongo and Duma schools were able to provide lists of orphans on request, taken directly from school records. At Namalongo such records were a requirement of their school-feeding programme. At Duma, the head explained that Social Welfare staff encouraged schools to keep up-to-date records. At Mzimba South schools, however, there was little evidence of schools keeping accurate, up-to-date records. At both schools any list of orphans provided by the head, after some initial reluctance, were had been taken from previous year's records - listed pupils were found to be in different classes than those recorded and several had since dropped out of school. More accurate information was provided after consultation with class teachers. A worrying concern raised by some district-level key informants was that some schools tend to inflate figures for orphans in their EMIS statistical returns in the hope of benefiting from any current or future programmes to support orphans. None of the schools had information on other groups of pupils made vulnerable by HIV and AIDS, such as those caring for sick parents or staying without adult support.

**Table 15: Availability of selected school records, by school**

| School records | Duma | | Namalongo | | Kamunda | | Pamoza | |
|---|---|---|---|---|---|---|---|---|
| | Present | complete | present | complete | present | complete | present | complete |
| Pupil attendance register | yes | no | yes | no | yes | no | yes | no |
| Cohort tracking | no | - | no | - | no | - | no | - |
| Orphans register | yes | yes | yes | yes | no | no | yes | no |
| EMIS statistical returns | yes | yes | yes | yes | yes | yes | yes | yes |

Monitoring of children with poor attendance and at risk of permanent withdrawal from school requires accurate record-keeping. At all schools, records of pupil attendance were poorly kept. Although registers were available few appeared to be regularly up-dated. In this there was much variation between individual teachers within the same school, with some keeping records up-dated daily, others – on inspection – had not filled in information for the entire term. This suggests a lack of supervision by school leadership. None of the schools used the system of 'cohort tracking', which has been introduced in some other parts of the country. This system, with specially designed registers allows schools to track individual pupils from one school year to the next and can help trace potential dropouts. Some pupil registers were standard government issue in which lists of pupils are supposed to include information on

age, sex and home village (again, this was not always complete). Other registers were simply drawn up in pupil exercise books. In neither case was information on the orphan status of the pupil recorded. Thus, schools could not easily track the attendance of orphans beyond the personal knowledge of class teachers, even if registers were kept up to date. At two schools – Duma and Namlongo – reasons for absenteeism were recorded in some registers, using letters to denote whether a child was: A, absent; S, sick or F, at a funeral. At none of the schools were reasons for dropout recorded[27].

Any monitoring of individual children who were identified as regularly absent or appeared at risk of permanent dropout appears to have been done in a fairly *ad-hoc* way at some schools and almost non-existent at others. At Duma, the head noted that a common practice was to call parents to the school to explain why a child has been absent for some time. The example he gave, however, was more akin to calling a PTA meeting and advising parents to send their children back to school. While he stated that teachers might go and follow up at pupils' homes, all of the young people interviewed said that they had never been visited when they had been absent and or dropped out. At Namalongo there was a similar picture, although Eliza, who dropped out of school and was found to be pregnant, said she was visited by teachers who advised her to return to school after the birth of her child. Kamunda presents a mixed picture. There appears to have been some effort to visit households on hearing of bereavement or if a child had reported sick, but in other cases guardians noted that teachers would just enquire after an absent child if they met on the road. Worryingly in two cases, guardians of out-of-school youth said that when teachers had visited following an extended period of absenteeism, they advised the children *not* to return to school. At Pamoza again the picture was mixed, with some teachers following up on information received about a pupil's poor health or following up on dropouts, but with no follow-up of other young people who had difficulties attending on a regular basis. It appears that much of the impetus to follow-up on a child lies with the individual teacher. Thus, teacher motivation plays an important role. One male teacher at Pamoza commented: "We are few, so after knocking off, for you to get prepared and go therefore to visit the child, it is difficult". Discussions with teachers indicated that when they wished find out the reason for a child's absence this was often done *after* the child's return to school.

There was some mention of the use of the SMC to follow up on pupils, a role which they seemed better placed to take up since members are drawn from villages across the school's catchment areas. A more common role for the SMC appeared to involve liaising with village structures and/or traditional leaders to 'force' parents and guardians to send pupils to school. Only at Duma did such activities appear to occur with any regularity, however. The SMC Chair for Duma described how they ensure children attend school.

> We call for regular meetings at the village forum. We encourage them to be sending their children to school. That is why we formed a committee to patrol the villages to see who is absent. 'Why are you absent?' 'I am sick' 'let's see your health passport.' This is done to make sure that the child is really sick and not just faking illness. If the parent is weak, they are summoned and we tell him or her that he or she will not benefit from any government programmes. This frightens them and they send their children to school.

Such initiatives, though probably effective in the short-term, do little to support those children facing genuine difficulties in attending school regularly.

---

[27] This raises an interesting question as to where national education statistics (EMIS) draw their information on drop out from. We saw no evidence at the school-level of accurate information on either the number of permanent drop outs (compared to those who had temporarily withdrawn) or the reasons for drop out.

- Schools had little accurate information regarding which pupils were affected by HIV and AIDS, although Phalombe schools were able to provide up-to-date lists of orphans' names on request. Teachers relied on observation of the pupils themselves and local knowledge of individual households, to identify the most vulnerable children amongst their pupils.
- At all schools, records of pupil attendance were poorly kept and registers did not record orphan status.
- Any monitoring of children who were identified as regularly absent or appeared at risk of permanent dropout is done in a fairly *ad-hoc* way at some schools and almost non-existent at others, often dependent on the initiative of individual teachers.
- The involvement of SMC in the monitoring and follow-up of absent children is limited.

## *7.4 Perceived challenges in supporting children affected by HIV and AIDS*

Key informants identified the main challenges for schools in the provision of support for children affected by HIV and AIDS as understaffing and a lack of training. There was a general feeling that with few teachers and large class sizes, teachers had little time, or motivation, to seek out and assist struggling pupils. This was emphasised by the PEA responsible for Kamunda who noted that chronic understaffing had had a serious impact provision of learning support and pastoral care of pupils. As Kendall and O'Gara (2007) noted in their earlier research, where teachers are already struggling to cope with large class sizes and few staff, there is little interest in taking on the additional responsibility of reaching out to vulnerable children. At Pamoza, which had recently lost two teachers who had not been replaced, teachers revealed a reluctance to take on the additional task of reaching out to children affected by HIV and AIDS:

> It is difficult, because … already the teacher has his pupils in class, which is already a burden, trying to make every child understand, and one is absent because of problems at home. So, tomorrow one should sit down with the one who was absent so that s/he knows what the others learnt? That can be difficult for a teacher.
>
> *Male teacher, Pamoza*

In addition, observations and comments from research participants at Kamunda and Pamoza revealed that teachers often engaged in private businesses to raise extra cash, activities that sometimes took them away from the school during teaching hours.

In terms of training, all of the teachers were fully qualified and many had benefited from in-service training programmes run by both government and USAID-funded teacher education projects. This in-service training focused on curriculum-related issues and teaching methods, however, and at only one school – Namalongo – had teachers received training on general issues related to HIV and AIDS. None of the teachers had received training on counselling, child rights and welfare, dealing with stigma and discrimination or the specific learning needs of children affected by HIV and AIDS. At Kamunda, the PEA noted, however, that passing reference on how to handle orphans might be integrated into other training seminars. As noted earlier, advice received by teachers on how to support orphans and other vulnerable children emphasised the 'equal treatment' of pupils. An encouraging observation at all schools was that SMC members were fairly active, willing to take up some limited activities to support orphans and other vulnerable children. In addition, a good relationship existed between them, the schools and the communities. However, despite the important potential role played by the SMC in linking schools with parents and guardians, including those from vulnerable households, none of the SMC members had received any specific training on how to support orphans or other children affected by HIV and AIDS.

**Summary points**

- Perceived common challenges for schools in the provision of support for children affected by HIV and AIDS include under staffing, teacher absenteeism and a lack of training in supporting the specific needs of such children.
- SMC members had received any specific training on how to support orphans or other children affected by HIV and AIDS.


## *7.5 Participants' recommendations*

Key informants and focus group participants were asked for their views on what strategies could be put in place to improve access to learning and retention of children from households affected by HIV and AIDS. Table 15 summarises their responses, grouping them together under sub-headings arising from the responses themselves. The responses show few distinct patterns by school or their specific contexts.

Not surprisingly, given the constraints of poverty on access and retention, finding means of providing basic necessities, including school materials and uniforms, was a common suggestion across all schools. This was largely seen as the responsibility of the SMC or PTA or well-wishers in the community. One teacher at Duma suggested that teachers could assist in the purchase of school supplies for needy pupils, but this was met by an emphatic silence from others in the focus group. The introduction of school feeding was mentioned at all schools currently not benefiting from such programmes. Activities focusing on the mobilisation and sensitisation of parents and guardians to ensure that their children go to school were also mentioned by several participants.

From school-based participants there was little mention of strategies to improve the inclusiveness of the schools or address school-related factors, with the implication that constraints on access to learning and retention were perceived as largely at the household or community level. Whilst a few participants did note the need for improvements in the school environment, such as more teachers and better facilities, there was no mention of lessening restrictions on the requirement for school uniform, for example. Furthermore, whilst several community-based participants emphasised the need for teachers to show greater interest in their pupils and find ways to encourage and motivate them to continue with schooling, only very few of the school-based participants – none of them teachers – made mention of this. Perhaps the teachers believed they were already doing enough. The PEA at Duma did suggest the training of 'mentor teachers', a strategy he had observed in practice under AGSP, a programme to support selected orphaned girls (see Section 7.1). He noted that using such teachers to provide such care and guidance could be extended to include a larger number of vulnerable pupils.

Participation in extracurricular clubs and learning additional vocational skills were both seen as means to improve attendance and retention through the motivation of pupils. In terms of additional learning support, remedial teaching and homework was mentioned by only a few and was generally related to catch-up activities following pupils' return to class. There were few suggestions of strategies to provide access to learning for those regularly absent or temporarily out of school. When facilitators probed specifically for such strategies, this was generally met with incredulity and bemusement by teachers. The provision of regular homework or structured work to provide continuity of learning whilst absent was not seen as an option. Two groups of teachers, from Namalongo and Pamoza, did eventually suggest that fellow pupils or young people from secondary school in the villages could assist on an informal basis to help pupils with work they may have missed, if asked by the pupils. A few community-based participants suggested more formalised approaches. A local CBO at Pamoza spoke of setting up 'children corner clubs', a forum where children can meet at the

weekend to play, but also to catch up on their studies. They said that the Social Welfare Officer (SWO) had given them some training on this. Also, the GVH at Namalongo suggested setting up learning circles more akin to adult literacy programmes, where pupils could meet and receive extra tuition from local volunteers, although he did note the difficulty of sustaining this without some form of incentive for the volunteers.

**Table 16: Recommendations for improving pupils' access to learning and retention, by school-based\* and community-based\*\* participants**

| Recommendation | School-based | Community-based |
|---|---|---|
| **Supporting learning and further participation** | | |
| Establish youth clubs, sports, extracurricular activities | KNPP | DDKP |
| Training in vocational skills and IGA | DN | DDK |
| Remedial teaching/homework by teachers to assist pupils to catch up | KNP | P |
| Others to provide additional learning support whilst absent/to catch up (fellow pupils, youth volunteers, clubs) | NP | NNP |
| Incentives/gifts for hard-working pupils | KN | - |
| Scholarships for secondary education | N | - |
| **Addressing household circumstances & school costs** | | |
| Fund-raising/donations for provision of basic necessities (including school supplies) | DKNP | DDKNNPP |
| School feeding | KP | DDPP |
| **School environment** | | |
| Improved school facilities, including boarding facilities | DK | NN |
| School clinic & close monitoring of health of child (if identified HIV +) | - | KP |
| **Monitoring and follow-up of pupils' attendance** | | |
| Meetings with parents/guardians: to find out reasons for absence & sensitise them on importance of education, including supporting the children's learning | KNN | PP |
| Community members to advise/persuade orphans to go to school | - | NKP |
| Greater contact between teachers & guardians | - | P |
| Village-based committees to monitor pupil attendance | P | - |
| **Teacher – pupil interactions** | | |
| Teachers to encourage and motivate pupils; show interest and love. | NP | DDKKKN |
| **Peer-related** | | |
| Teach pupils to stay together without stigma/discrimination | - | P |

\* PEAs, school heads, teacher FGD
\*\* SMC & PTA chairs, CBO representatives, traditional leaders, community FGD
D = Duma, K = Kamunda, N = Namalongo, P = Pamoza

Recommendations from mini-workshops with orphans and other vulnerable children showed greater variation across schools, with several recommendations specific to the particular contexts of the individual schools. For example, addressing issues of the school environment was only raised by pupils at Kamunda. Many of the recommendations by the young people were wish-lists of what should be different within their schools and in communities, echoing their earlier discussions of constraints on their education; fewer could offer positive strategies as to how address these constraints. This can be seen particularly in recommendations relating to pupil-teacher interactions and peer issues, although the reporting of incidences of teachers' sexual harassment of pupils was mentioned by both pupils and out-of-school youth at Namalongo as a specific action to be taken.

**Table 17: Recommendations for improving orphaned and vulnerable children's access to learning and retention, by pupils and out-of-school youth**

| Recommendation | Pupils | Out-of-school youth |
|---|---|---|
| **Supporting learning and further participation** | | |
| Teach games and sports at school | - | D |
| Teachers should teach all subjects during normal class hours | N | - |
| Textbooks/books to read at home | NK | - |
| Others to teach/provide extra lessons | NKP | NP |
| **Addressing household circumstances & school costs** | | |
| Schools to provide basic school supplies (pens, pencils, notebooks) | DNK | - |
| Provision of food, clothes and other basic needs, including uniform (CBOs, well-wishers, guardians) | DKP | DNKP |
| Parents/guardians give fewer household chores | DNK | - |
| Parents/guardians shouldn't pressurise children to marry early | D | P |
| **School environment** | | |
| More teachers | K | - |
| More classrooms | K | - |
| **Monitoring and follow-up of pupils' attendance** | | |
| Someone to provide advice/guidance on attending school | DP | P |
| **Teacher – pupil interactions** | | |
| No harsh or corporal punishment | DK | DP |
| Teacher don't send pupils out of class/home or on errands | P | DP |
| Pupils to report incidences of teachers sexually harassing and abusing pupils | P | P |
| Teachers should show interest and encourage pupils | D | - |
| Pupils to be well-behaved, respect teachers | K | K |
| Teachers not to show favouritism | N | - |
| **Peer-related and personal factors** | | |
| Girls to abstain from taking money from men in exchange for sex | - | D |
| Children from well-to-do families told to stop teasing vulnerable children | N | - |

D= Duma, K= Kamunda, N=Namlongo, P=Pamoza

As with key informants and focus groups, recommendations regarding the provision of food and other basic necessities were common across schools, with pupils suggesting that schools should provide school materials, such as pens and notebooks. Less was said about the monitoring and follow-up of pupils who were out of school, although a few groups mentioned the need for someone to provide guidance and support to encourage them to attend school. Teachers were not mentioned specifically for this role. In contrast to key informants and focus groups, young people focused on the need to improve the relationship between pupils and teachers, particularly in relation to school discipline and teachers' abuse of authority (corporal and excessive punishments, sending pupils out of school and/or on errands and sexual harassment and abuse of girls). Interestingly at Kamunda, where traditional culture remains strong, both pupils and out-of-school youth at mini-workshops felt that pupils should show greater respect to teachers.

Key recommendations to support improved access to learning included the availability of textbooks or supplementary readers to take home after school hours and the use of other people from within communities to teach them outside normal class time and/or when they had been absent. Most frequently mentioned for this role were fellow pupils who had attended classes they had missed or secondary school students or school leavers in their

villages. Teachers were not suggested for this role, not was remedial teaching by teachers suggested as an option. At Namalongo, where extra classes were provided at a fee in the afternoons, pupils suggested setting up an alternative group to learn at the same time, under the supervision of secondary school students.

These recommendations illustrate that whilst key informants and focus group participants can clearly envision a greater role of teachers in providing both additional learning support and emotional support within schools, few young people expected teachers to take on such additional responsibilities and some were more concerned about improving the current relationships between teachers and pupils. Neither the key informants and focus groups participants, nor the young people saw much of a role for teachers outside the school or the classroom. Means of addressing poverty-related issues, following up and sensitising parents and guardians on the importance of regular attendance at school and providing additional learning support for children facing difficulties attending school were largely seen as the responsibility of the SMC and others within the communities.

## Summary points

- Recommendations to improve attendance and retention of children affected by HIV and AIDS included strategies to address household poverty and poor food security, mobilisation of community members and provision of extracurricular activities and vocational training.
- Means of specifically supporting increased access to learning included making textbooks and supplementary readers available after school and providing opportunities for additional studies, supported by community members.
- Teachers made little mention of strategies to address school-related factors and provision of structured homework or alternative learning opportunities for children temporarily out of school was not given as an option.
- Young people and community-based participants spoke of the need to improve relations between teachers and pupils, including greater emotional support from teachers.

# 8 Further discussion and implications

This final section draws together and summaries the key issues emerging from the cross-case analysis and the accompanying discussion of findings in preceding sections. It examines the implications of these for the design of a school-based intervention package to support improved retention and increased access to learning for children affected by HIV and AIDS.

## 8.1 Emerging issues

The findings from these case studies support  a  growing body of research evidence that indicates that children affected by HIV and AIDS face specific educational disadvantages in terms of their access to learning and retention in school (see Pridmore 2008). Against a background of underlying poverty prevalent in the rural districts visited, these case studies – with their focus on the telling of the experiences of children and young people directly affected by HIV and AIDS - reveal many of the additional difficulties borne by households and individuals made vulnerable by HIV and AIDS. These constraints illustrate how such children, even though enrolled, can face educational exclusion (Lewin, 2007; Pridmore, 2008) and risk permanent withdrawal from schooling. Amongst the most vulnerable are children without the support of an able-bodied adult, such as those caring for sick parents, those living with elderly grandparents and those in sibling-headed households.

Interestingly, and in contrast to earlier research in Malawi (Kadzamira et. al., 2001), quantitative data on attendance from the case study schools indicates that orphan status alone is not always a strong determinant of whether an enrolled child attends regularly or not, at least in upper primary. Such findings underline the inherent difficulties in using orphan status as a proxy for the impact of HIV and AIDS on enrolled pupils' participation in school. Supporting this, many respondents acknowledged that they believed that children living with chronically ill parents were at risk of erratic attendance. In addition, interviews with affected young people indicate that rather than simply exhibiting an overall pattern of greater absenteeism over time, children affected by HIV and AIDS are likely to go through specific periods of withdrawal during times of crisis, such as bereavement, poor health of a parent or guardian and/or economic shocks. Furthermore, multiple shocks and limited recourse to support and care during such times increases their social exclusion and places them at increased risk of permanent withdrawal from school. The low *enrolment* of orphans in upper primary at the Mzimba schools does suggest a greater vulnerability to drop out amongst orphans. For others who had maintained fairly regular attendance during times of crisis or changed family circumstances, findings indicate that the psychological impact of HIV and AIDS (such as grief, anxiety and low confidence) can impact negatively on their participation and performance in class.

Thus, the impact of morbidity and death associated with HIV and AIDS on children's schooling is multi-factorial and in many cases cumulative. There are often complex and sometimes competing influences at play. For example, coping strategies, such as the increased use of children's work to support household's and individual's basic needs can both hinder and support children's attendance and retention at school. How the impact of HIV and AIDS manifests itself depends on a several inter-locking considerations, including household composition and circumstances, the child's gender and position within the household, the child's household responsibilities, the child's individual resilience to times of trauma and the availability of both material and emotional support for schooling.

Poverty and household income, acknowledged as a major determinant of access, attainment and completion of primary schooling in Malawi (Bennell, 2002, Kadzamira and Rose, 2003; Al-Samarrai and Zaman, 2007), is in many ways pivotal in sustaining

opportunities for children affected by HIV and AIDS to access learning and persist with their schooling. Reflecting earlier research into the impact of HIV and AIDS on rural livelihoods (Bryceson, Fonseca and Kadzandira, 2004), these case studies present evidence of the impoverishment of households through HIV and AIDS-related morbidity and death. Subsequent lack of food security and inability to purchase basic necessities are shown to impact negatively on attendance and pupil retention. Furthermore, findings reflect earlier research that indicates that the poverty of many girls affected by HIV and AIDS, exacerbated by inadequate care and protection at home, also increases their vulnerability to transactional sexual relationships or early entry into marriage (Bryceson, Fonseca and Kadzandira, 2004; Kadzamira and Chawani, 2003 Kadzamira and Chibwana, 2000). However, findings also suggest that the route to girls' educational exclusion via pregnancy and marriage is more nuanced than previously acknowledged, with several girls' stories indicative of a process of disengagement from schooling that was largely poverty-related, and marriage as a coping strategy *following* the decision to leave school (Lloyd and Mensch, 2006).

Findings from a recent review of barriers to schooling for children affected by HIV and AIDS suggest that the death of a parent or guardian can result in children, especially girls, taking on greater household responsibilities (Pridmore, 2008). These case studies reflect such a scenario, with children taking up a range of household chores and/or labour outside the home. This appears more common when children have joined other relatives' households following the death and/or absence of one or both parents or are in sibling-headed households. Furthermore, these case studies clearly show that such responsibilities also come into play during periods of ill-health of a parent or guardian.

Studies in Malawi, and elsewhere in sub-Saharan Africa, have examined traditional and emerging patterns of inheritance and orphan care and have demonstrated increased child migration between households in the wake of HIV and AIDS, often to the detriment of the child's welfare (Mann, 2002; Case et al., 2004; Pharoah, 2004; Pridmore, 2008). Findings from these case studies indicate that child migration can start prior to bereavement, during periods of ill-health of parents or guardians, and that in such situations children are often withdrawn from school. Furthermore, the impact on schooling of child migration following the death of a parent or guardian varies greatly, but is largely associated with the level of care and/or discrimination faced in new households. The findings agree with earlier studies that suggest that poor educational access in such circumstances is not solely due to economic considerations (Evans and Miguel, 2007). As highlighted in Pridmore's recent review (2008), these case studies confirm that reduced social cohesion and discrimination within households and in the community further increases the social and educational exclusion of children affected by HIV and AIDS.

One key issue emerging from the case studies, which is rarely referred to in the literature, is the importance of emotional support and encouragement for children's schooling. Mann (2002) notes the importance of children to remaining with guardians where they feel loved and supported emotionally. Interviews with young people in these case studies, indicate that whilst material support was important, so was their identification with household or family members who would take an interest in their schooling and encourage their attendance and persistence.

In Malawi, schools themselves play a critical and conflicting role in children's retention and participation in learning. Whilst the normality of the classroom experience, the lack of discrimination by teachers and the motivation provided by children's social networks can help to mitigate pupils' sense of isolation and offer some support for their retention at school, little is done to address the specific emotional and learning needs of this vulnerable group. In contrast to earlier research on the impact of HIV and AIDS on schooling, which indicated little active discrimination at schools (Kadzamira et al., 2001), many children affected by HIV and AIDS said they face teasing and discrimination from fellow pupils. This reflects the

experiences of children documented in previous qualitative studies of orphans and other children affected by HIV and AIDS in Malawi (Bryceson, Fonseca and Kadzandira, 2004; Mann, 2002). Perhaps because of the fear of such stigma and discrimination, the experiences of children affected by HIV and AIDS are rarely acknowledged by teachers and teaching on HIV and AIDS can take a strong moral and scare-mongering tone that might further exclude children from affected households.

Discussions and interviews with young people in this study show that the authoritarian nature and discipline met at some schools, where teachers' power of authority is often abused, can have a direct impact on children's engagement with schooling and their decision whether to continue or not. Examples of sexual harassment and abuse in the schools visited are underpinned by a growing body of evidence of widespread gender-based violence in schools in Malawi (Kadzamira, Moleni and Kunje, 2006; Burton, 2005; Leach et al., 2003) and represent a real concern with regards the safety and access to learning of female pupils. It also conflicts with schools' perceived role as one providing *de facto* parental care and guidance and as a forum for disseminating HIV and AIDS prevention messages. In addition, pupils at all schools face exclusionary practices that target children from impoverished households. Contrary to government policy, pupils can be excluded from class for failing to wear uniform, dressing poorly or for turning up without notebooks or writing materials. Discussions with children and young people affected by HIV and AIDS confirmed that that such practices have led to their withdrawal from school, sometimes permanently.

National government and NGO programmes, such as the School Health and Nutrition programme and school feeding programmes can provide general support for pupil welfare, health and nutrition. Any specific support for vulnerable children is often targeted at orphans, however, excluding other groups such as those caring for sick parents. Local school-based initiatives to support the welfare of children affected by HIV and AIDS are limited to fund-raising and distribution of basic necessities to a few, selected children (usually orphans). Such activities are generally carried out by SMCs, sometimes in conjunction with local CBOs, and are limited in their reach. As noted by Kendall and O'Gara (2007) in their recent research, many children affected by HIV and AIDS in the case study schools visited are 'known' by school staff, but not officially recognised. No 'at-risk' register is kept beyond limited information on the numbers of orphans enrolled. The level of monitoring and follow-up of pupils who attend irregularly or were at risk of permanent withdrawal from school varied between schools, although at best appeared *ad-hoc* and dependent on the initiative of individual class teachers. Combined with a lack of outreach activities and inadequate record-keeping, it is thus likely that many children made vulnerable by HIV and AIDS fall through the net.

Again reflecting Kendall and O'Gara's findings (2007), although there is clearly a potential greater role for schools in providing support and encouragement for children affected by HIV and AIDS, teachers generally see this as beyond the remit of their classroom and school-based responsibilities. There is little additional learning support provided for children with erratic attendance and there are no formal guidance and counselling services provided at the schools. Understaffing and a lack of specific training are seen as major challenges for schools in supporting children affected by HIV and AIDS.

### 8.2 Implications for the design of a school-based intervention package

The range and multi-factorial nature of the constraints emerging from these case studies suggests that the proposed school-based intervention package requires a holistic approach, supporting the learning, social and emotional needs of children affected by HIV and AIDS. In addition, the case studies support assertions for the need for a more encompassing definition of children made vulnerable by HIV and AIDS; one that would include, for example, children who live with chronically-ill parents or guardians (Pridmore, 2007; Boler and Carroll

2003). Any intervention would be required to address barriers specific to the impact of HIV and AIDS on households and individual children (e.g. chronic illness, bereavement, trauma, stigma and discrimination and lack of adult care and support), as well as more general constraints on pupils' access to learning and retention, which could have a disproportionate effect on children made vulnerable by HIV and AIDS (e.g. food insecurity and household poverty, school costs, poor learning environments and  violence and sexual harassment in schools). Thus, these case studies suggest that general changes in school policy and practice to increase the accessibility and inclusiveness of schools for all vulnerable groups would greatly benefit those affected by HIV and AIDS. However, such an approach should not and cannot ignore the specific educational disadvantages faced by affected children and young people. Pridmore (2008: 27) provides a useful summary of the literature on interventions to mitigate the impact of HIV and AIDS on education, based on recent reviews. The summary lists several proposed interventions and underlines the range and diversity of potential components for such interventions:

> …(i)more open and flexible delivery of the national curriculum together with efforts to support systems and structures(ii) increased numbers of social workers to work with schools (iii) increased emphasis on children's rights and strengthening of child protection legislation (iv) increased efforts by school managers and teachers to identify affected and needy children for referral and monitoring (v) school feeding, pastoral care and counseling (vi) greater involvement of students, people living with HIV and AIDS, parents, guardians and caregivers and other community members in supporting affected children (vii) and increased support for children who are themselves affected.

A key issue in the design of any school-based intervention package is how to identify those children who are vulnerable and in need of support. It is clear from these case studies that orphan status alone is not a useful criterion for targeting children affected by HIV and AIDS. Evidence suggests, for example, that periods of chronic ill-health of a parent or guardian result in great anxiety and significant disruption of schooling, with increasing demands for children's work and care-giving, especially amongst girls. Yet, none of the school-based programmes in place in case study schools specifically targeted children in households with sick adult members, unless they had already lost at least one parent. Thus in implementing any intervention package, there would need to be discussion and consensus on wider definitions of vulnerability for children affected by HIV and AIDS.  As school information on children affected by HIV and AIDS is limited to sparse details on numbers of enrolled orphans, schools would also need to draw on local knowledge in identifying children in need of support. One means of doing this would be strengthen links with village committees or local CBOs and NGOs working with orphans or home-based care programmes, who could alert schools to children living in difficult situations. Improved record-keeping in schools is vital to allow teachers to track the attendance of any children designated 'at risk' of exclusion from schooling. Given the pervasive nature of stigma and discrimination in schools and their communities, teachers and school management would have to be made aware of the need for sensitivity in gathering information on pupils, and any subsequent monitoring[28].

---

[28]   One teacher at Namalongo described how orphans were identified at the school: by a teacher entering a classroom and asking all pupils who had lost a parent to raise their hands.

For households impoverished by HIV and AIDS support for basic necessities, including the direct costs of schooling, can go a long way to improving access to learning. The AGPS programme, present in two of the zones visited, had donated a range of basic necessities and school supplies to a few orphaned and vulnerable girls, providing much needed support, although this was only extended to two girls per school. School feeding programmes, such as that in place at Namalongo, can mitigate some of the worse effects of food insecurity in households and promote regular attendance. Elsewhere in Malawi, social cash transfer schemes, although not educational interventions, have included bonus payments for households with children in full-time education to assist with school costs (UNICEF, 2007). However, such programmes are heavily donor-funded and, thus, questions have to be raised about the long-term sustainability of their activities. The SOFIE project is a research study committed to working with and through schools to explore new, more flexible models of educational provision within the specific contexts of the schools themselves. As such, large-scale financial inputs are beyond the remit of the project (Pridmore, 2008). Having said that, relatively low-cost intervention activities could be put in place to strengthen and support schools in their existing attempts at fund-raising, mobilising resources and distribution of items to needy pupils (see Textbox 4). This could include providing training for SMC members and school management on how to access funding sources at district level or mobilise communities to support affected children.

One of the key findings from the case studies was the importance of emotional support and encouragement in promoting the attendance and retention of children affected by HIV and AIDS. Although generally associated with family members, this suggests a potential role for schools, particularly for those pupils in households where they receive little adult care or support. School-based peer groups were also shown to provide mutual motivation and encourage positive attitudes to education. Possibilities for a school-based intervention might include the use of mentor teachers (or other responsible adults, such as female SMC members) to follow-up on vulnerable children and make themselves available if pupils wish to discuss any difficulties they are facing. Such individuals should be trained in guidance and counseling skills. Another possibility is to strengthen peer groups activities and provide opportunities for young people to meet and discuss issues important to them in a relatively non-threatening environment. Such forums could also be used assist those living in difficult circumstances through providing information and enhancing life skills to help them deal with their specific problems. Pridmore and Yates (2006) offer an analysis of ODFL strategies could be used to support children's learning in the context of poverty and AIDS. Several of these relate to the emotional and social needs of children affected by HIV and AIDS. Possibilities for a school-based intervention in Malawi might include: personal counseling

booklets, life skills handbooks and the use of comic books to raise awareness on social issues (see Textbox 5). Such media could be adapted to deal with other specific issues, such as skills for care-giving, living in sibling-headed households, how to deal with stigma and discrimination and how to live positively with HIV and AIDS.

---

**Textbox 5: Psychosocial support**

- Train and support school-based mentors (teachers, SMC members).
- Provide comic books and life skills handbooks dealing with issues relevant to children affected by HIV and AIDS.
- Provide and make accessible personal counseling booklets for children in need.
- Encourage the setting up and/or revitalization of extra-curricular activities and clubs at times suitable for pupils (e.g. AIDS-Toto clubs, FAWEMA groups, youth clubs).
- Explore the possibilities for setting up a pupils' committee or forum where pupils can raise concerns and report back to school management.

---

Discussions with young people affected by HIV and AIDS, revealed, in many cases, a series of events and shocks that impacted negatively on their schooling, such as ill-health of parents or guardians, multiple deaths, household impoverishment, re-location and intra-household discrimination. How young people responded to such events varied greatly between individuals, dependent on a range of factors. In some situations, these events and their accompanying psychosocial effects would result in distinct periods of erratic attendance, poor performance and/or temporary withdrawal from school followed by a return to more regular schooling. In other situations, the cumulative impact of such events would lead to permanent dropout from school. What the former seems to suggest is that whilst some affected children are fairly resilient and strive to remain in school, there are times of crisis when additional safety-nets need to be in place to provide continuity in their access to learning. Such safety-nets may also mitigate some of the barriers that lead to permanent dropout.

Furthermore, any school-based intervention has to acknowledge and respond to the impact of children's work on their access to education. As noted in Dachi and Garrett's study of child labour in Tanzania (2003), whilst more needs to be done to minimise children's involvement in excessive and exploitative labour, both paid and unpaid, the importance of children's work in many households cannot be ignored. From the case studies it is clear that many households recognise the importance of education, but resort to using children's work as a coping strategy when faced with little alternative. Children in sibling-headed households have little choice but to work to support the households, as do those in households with no able-bodied adult. Such findings reinforce the argument that new, more flexible and inclusive approaches to schooling are required if all children are to have meaningful access to learning (Streuli and Moleni, 2007).

ODFL strategies provide opportunities to reach out to children who are educationally excluded, whether through temporary withdrawal from school or the 'silent exclusion' of those unable to participate fully in class (Lewin, 2007). One possibility adopted in more non-formal approaches to the delivery of basic education to young people, such as Malawi's Complementary Basic Education (CBE) programme, is the use of flexible timetabling (Moleni, Nampota and Kadzamira, 2005). In a conventional school setting, however, with constraints already in place due to understaffing and poor teacher motivation, this is unlikely to be a viable option. At a more basic level, encouraging schools to put systems in place to allow pupils keep up with fellow pupils could provide important continuity in learning, such as

the delivery of class exercises or homework to absent pupils or allowing pupils to take textbooks home. Other possibilities, suggested by participants' recommendations, might include the use of after-hours or weekend study circles or clubs to where children can access additional learning support and work through curriculum-based materials (see Textbox 6). It is worth noting that few participants suggested this as an additional responsibility for teachers, but rather as something that could be taken up by volunteers in the communities, such as secondary-school leavers. This interesting suggestion reflects one of the strategies used by the USAID-funded Primary School Support Programme (PSSP) in Dowa district, which mobilised youth volunteers (the Mobilisation Corps of Malawi) to help organise weekly reading groups and other activities to improve literacy (e.g. debates, quizzes) and provide additional learning support for pupils (USAID/Malawi, 2008). Such activities could be further supported by ODFL materials, such as self-study guides, and even provide a suitable forum for children to work through additional materials providing psychosocial support, as mentioned above.

---

**Textbox 6: Additional learning opportunities**

- Recruit fellow pupils in a 'buddy' system to carry school work to children temporarily unable to access school.
- Promote independent learning in the schools by increasing pupils' access to school libraries and explore ways for pupils to borrow both textbooks and supplementary readers to take home.
- Explore the possibilities for providing self-study guides for children unable to access school.
- Recruit youth volunteers to run after-school clubs to provide additional learning support at risk of exclusion.

---

However, in conjunction with addressing household and psychosocial constraints, these case studies highlight the importance raising awareness of, and addressing, school-level constraints on learning and of creating a more enabling environment for any intervention. Whilst factors related to schools' facilities and capacities (e.g. understaffing and insufficient classrooms) are beyond the scope of the SOFIE project, schools can be supported in efforts to improve their accessibility to all pupils, including those made vulnerable by HIV and AIDS. Teachers and schools management need be given space to reflect on their own role in promoting or hindering the inclusiveness of their schools. In a recent evaluation of the first phase of a South African- based project to promote inclusive practices in primary schools, the following critical components were identified (Engelbrecht, Oswald and Forlin, 2006: 126):

- an inclusive school philosophy
- democratic leadership, structures, processes and values;
- collaboration;
- addressing learner diversity and behaviour
- resourcing

Within this, teachers and school management need to build greater understanding and sensitivity towards the experiences of children affected by HIV and AIDS (e.g. by reflecting on how HIV and AIDS issues are taught in classrooms) and deal more pro-actively with issues of bullying and discrimination amongst pupils. Greater acknowledgement of child rights need to be incorporated into schools' approaches to discipline and positive gender values should be promoted. Abuses of authority by teachers (e.g. sexual harassment) should not be tolerated and children should be encouraged to report such incidences to someone of trust. If not dealt with, strategies to support vulnerable children that rely on close

contact between teachers and pupils (e.g. counselling, mentor teachers or extra-curricular clubs) can be undermined by unscrupulous teachers and put girls at greater risk of exclusion. In addition, school management should be encouraged to re-examine school policies that exclude children from learning on the basis of their inability to pay school costs. Such issues could be addressed through a series of in-service needs assessment and training activities, supported by training guides and/or distance education materials (see Textbox 7). Where possible, school management schools should be encouraged plan their own activities to address emerging issues and incorporate these into a school action plan.

---

**Textbox 7: Training activities**

- Training of school-based mentors and youth leaders in guidance and counselling skills.
- Training of teachers and SMC members in gender issues and child rights (including identifying and reporting issues of abuse).
- Training of teachers and SMC members in monitoring and record-keeping skills.
- Raising awareness and facilitating evaluation of issues of inclusive education in schools (including the planning strategies to tackle exclusionary practices).

---

Finally, collaboration and links with communities, especially parents and guardians, need to be strengthened. While most parents and guardians expressed satisfaction with the schooling received by their children, a significant number said they had little or no contact with teachers. As noted in an earlier critique of educational quality in Malawi, problems of poor attendance and dropout cannot be fully addressed where contact between schools and parents or guardians is minimal (Chimombo, 2000). Furthermore, community-school relations continue to be assessed largely on the basis of parents' contributions – in terms of labour and/or resources – to school development projects. Schools need to be seen to be reaching out to communities, so that linkages become more of a two-way process. As such, teachers and school management, working together with parents and guardians and traditional leaders, can be more aware of and respond better to the needs of children affected by HIV and AIDS. SMCs and other village-based committees are ideally placed to negotiate and maintain links with communities. Means need to be found to build their capacity and support their increased involvement in the monitoring and follow-up of children affected by HIV and AIDS. Greater collaboration amongst all stakeholders will allow for additional layers of support to be built around these vulnerable children and promote their improved access to learning and retention in school.

# References

Ainsworth, M., Beegle, K. and Koda, G. (2005), 'The impact of adult mortality and parental deaths on primary schooling in North-western Tanzania'. *Journal of Development Studies,* 41*,* 412-439.

Ainsworth, M. and Filmer, D. (2002), *Poverty, AIDS and Children's schooling: a targeting dilemma, Policy Working Paper 2885.* Washington DC: World Bank.

Ainsworth, M. and Filmer, D. (2006), 'Inequalities in children's schooling: AIDS, orphanhood, poverty, and gender'. *World Development,* 34 (6)*,* 1099-1128.

Al-Samarrai, S. and Zaman, H. (2007) 'Abolishing School Fees in Malawi the impact on education access and equity', *Education Economics,* 15 (3) 369-375.

Barrett, A., Chawla-Duggan, R., Lowe, J., Nikel, J. and Ukpo, E. (2006), *Review of the 'international' literature on the concept of quality in education.* University of Bath, University of Bristol: EdQual.

Bennell, P. (2002) 'Hitting the Target: Doubling Primary School Enrollments in Sub-Saharan Africa by 2015.' *World Development,* 30 (7) 1179 -1194.

Bennell, P. (2003), *The impact of the AIDS epidemic on schooling in sub-Saharan Africa,* background paper for the Biennial Meeting of the Association for the Development of Education in Africa, December 2003.

Bennell, P. (2005), 'The impact of the AIDS epidemic on the schooling of orphans and other directly affected children in sub-Saharan Africa'. *Journal of Development Studies,* 41 (3)*,* 467-488.

Bicego, G., Rutstein, S. and Johnson, K. (2003), 'Dimensions of the emerging orphan crisis in sub-Saharan Africa'. *Social Science & Medicine,* 56 (6)*,* 1235-1247.

Boler, T. and Carroll, K. (2003), *Addressing the educational needs of orphans and vulnerable children. Policy & Research: issue 2.* London: UK working group on education and HIV/AIDS.

Brinkman, D., Westendorp, A. M. B., Wals, A. E. J. and Mulder, M. (2007), 'Competencies for rural development professionals in the era of HIV/AIDS'. *Compare,* 37 (4)*,* 493 - 511.

Bryceson, D. F., Fonseca, J. and Kadzandira, J. (2004), *Social Pathways from HIV/AIDS Deadlock of Disease, Denial and Desperation in Rural Malawi.* Lilongwe: Renewa and Care.

Burton, P. (2005), *Suffering at School: the results of the Malawi Gender-based Violence in Schools survey.* Malawi: National Statistics Office: Crime and Justice Statistical Division.

Case, A., Paxton, C. and Ableidinger, J. (2004) Orphans in Africa: Parental Dath, Poverty and School Enrolment. *Demography*, 41, 483-508.

Chimombo, J. P. G. (2000), Teacher Quality in Malawi Primary Schools: evidence from research, *National Seminar on Malawi: Improving Educational Quality II project.* Zomba, Malawi: Centre for Educational Research and Training (CERT).

Chimombo, J. P. G. (2005), 'Quantity versus quality in education: case studies in Malawi'. *International Review of Education,* 51*,* 155-172.

Crampin, A., Floyd, S., Glynn, J., Madise, M., Nyondo, A., Khondowe, M., Njoka, C., Kanyongoloka, H., Ngwira, B., Zaba, B. and Fine, P. (2003), 'The Long-Term Impact of HIV and Orphanhood on the Mortality and Physical Well-being of Children in Rural Malawi.' *AIDS,* 17 (3)*,* 389–97.

Creswell, J. W. (2003), *Research Design; Qualitative, Quantitative and Mixed Methods Approaches.* (2nd ed.). Thousand Oaks: Sage

Creswell, J. W. (2007), *Qualitative Inquiry and Research Design.* (2nd ed.). Thousand Oaks: Sage.

Creswell, J. W. and Plano Clark, V. L. (2007), *Designing and Conducting Mixed Methods Research.* Thousand Oaks, CA: Sage.

Dachi, H. A. and Garrett, R. M. (2003), *Child Labour and its impact on children's accesses to and participation in primary education: a case study from Tanzania* London: DFID.

Davison, J. and Kanyuka, M. (1992), 'Girls' participation in Basic Education in Southern Malawi'. *Comparative Education Review,* 36 (4)*,* 446-466.

Doward, A. R., Mwale, I. and Tuseo, R. (2006), 'Labor Market and Wage Impacts of HIV/AIDS in Rural Malawi'. *Review of Agricultural Economies,* 28 (3)*,* 429 - 439.

Dunne, M. and Leach, F. (2005), *Gendered School Experiences: the impact on retention and achievement in Botswana and Ghana*: DFID.

Engelbrecht, P., Oswald, M. and Forlin, C. (2006), 'Promoting the implementation of inclusive education in primary schools in South Africa'. *British Journal of Special Education,* 33*,* 121-129.

Evans, D. K. and Miguel, E. (2007), 'Orphans and Schooling in Africa: a longitudinal analysis'. *Demography,* 44 (1)*,* 35-57.

Floyd, S., Crampin, A., Glynn, J., Madise, N., Mwenebabu, M., Mnkondia, S., Ngwira, B., Zaba, B. and Fine, P. E. M. (2007), 'Social and Economic Impact of parental HIV on children in northern Malawi'. *AIDS Care,* 19 (6)*,* 781-790.

Government of Malawi. (2005), National Plan of Action for Orphans and other Vulnerable Children 2005-2009: Government of Malawi

Hepburn, A. E. (2001), *Primary Education in Eastern and Southern Africa: increasing access for orphans and other vulnerable childern in AIDS-affected areas.* Durham: Duke University,Terry Sanford Institute of Public Policy.

Human Rights Watch (2001), *Scared at School: sexual violence against girls in South African schools*, New York, Human Rghts Watch.

Hyde, K. A. L. and Kadzamira, E. C. (1994), *Girls' attainment in basic literacy and education project : knowledge, attitudes and practices pilot survey, final report.* Zomba: Centre for Social Research, University of Malawi.

Kadzamira, E. and Chawani, B. S. (2003), The impact of HIV/AIDS on the Education Sector in Malawi: Study 1: Examining Policy, Leadership and Advocacy responses in the education sector. Lilongwe: Ministry of Education, Science and Technology (MOEST) and UNESCO/IIEP

Kadzamira, E. and Rose, P. (2003), 'Can Free Primary Education meet the needs of the poor? evidence from Malawi'. *International Journal of Educational Development,* 23*,* 501 - 516.

Kadzamira, E. C., Banda, D. M., Kamlongera, A. and Swainson, N. (2001), *The Impact of HIV/AIDS on Primary and Secondary Schooling in Malawi: Developing a Comprehensive Strategic Response.* Lilongwe: Ministry of Education Science and Technology; University of Malawi.

Kadzamira, E. C. and Chibwana, M. P. (2000), *Gender and primary schooling in Malawi*. Brighton: Institute of Development Studies.

Kadzamira, E. C., Moleni, C. and Kunje, D. (2006), Unsafe Schools: Findings from School-related Gender based Violence PRA/PLA study in Machinga District: Centre for Educational Research and Training (CERT).

Kadzamira, E. C. and Nell, M. (2004), Potential Programmes for Out-of-School Youth: exploring the interface between Basic Education and Vocational Education and Training. Lilongwe: GTZ Malawi Basic Education Programme (GTZ-MBEP).

Kendall, N. and O'Gara, C. (2007), 'Vulnerable children, communities and schools: lessons from three HIV/AIDS affected areas'. *Compare: a journal of comparative education,* 37 (1)*,* 5-21.

Leach, F., Fiscian, V., Kadzamira, E., Lemani, E. and Machakanja, P. (2003), An Investigative Study of the Abuse of Girls in African Schools, *DFID Educational Papers: researching the issues*.

Lewin, K. M. (2007), *Improving Access, Equity and Transitions in Education: Creating a Research Agenda*: University of Sussex, Centre for International Education.

Lloyd, C. B. and Mensch, B. S. (2006), *Marriage and childbirth as factors in school exit an analysis of DHS data from sub-Saharan Africa,* Working Paper 219, New York: Population Council, Policy Research Division.

Mann, G. (2002), Family Matters: the care and protection of children affected by HIV/AIDS in Malawi. Sweden: Save the Children Alliance.

Ministry of Education Malawi. (2007), *Education Basic Statistics 2001.* Lilongwe: Ministry of Education Malawi

Moleni, C. M., Nampota, D. C. and Kadzamira, E. C. (2005), Complementary Basic Education in Malawi: A Needs Analysis: University of Malawi, Centre for Educational Research and Training.

Morse, J. M. (1994), 'Designing Funded Qualitative Research'. In D. K. Denzin and Y. S. Lincoln (eds), *Handbook of Qualitative Research.* Thousand Oaks: Sage.

Munthali, A. C., Chimbiri, A. and Zulu, E. (2004), *Adolescent Sexual and Reproductive Health in Malawi: A Synthesis of Research Evidence* New York: The Alan Guttmacher Institute.

NAC (2003), *HIV Sentinel Surveillance Report 2003,* Lilongwe, National AIDS Commission.

NSO (2005), *Malawi Demographic and Health Survey 2004* Calverton, Maryland: National Statistical Office (Malawi) and ORC Macro.

NSO and UNICEF. (2007), *Malawi Multiplier Indicator Cluster Survey (MCIS): Preliminary Report*: National Statistics Office, Zomba; UNICEF.

Pharoah, R.E. (2004) *A Generation at Risk? HIV/AIDS, vulnerable children and security in Southern Africa,* South Africa, Institute for Security Studies.

Pridmore, P. (2007), Barriers to accessing conventional schooling for children and young people affected by HIV and AIDS in sub-Saharan Africa: a cross-national review of the research evidence.

Pridmore, P. (2008), *Barriers to accessing conventional schooling for children and young people affected by HIV and AIDS in sub-Saharan Africa: a cross-national review of the research evidence, SOFIE Opening Up Access series.* London: Institution of Education.

Pridmore, P. and Yates, C. (2006), *The Role of Open, Distance and Flexible Learning (ODFL) in HIV/AIDS Prevention and Mitigation for Affected Youth in South Africa and Mozambique. Researching the Issues 61.* London: DFID.

Robson, E., Ansell, N., L, v. B., Chipeta, L. and Hajdu, F. (2006), 'AIDS and Food Insecurity: 'New variant famine' in Malawi?' [Online]. *Malawi Medical Journal*

Robson, S. and Sylvester, K. B. (2007), 'Orphaned and vulnerable children in Zambia: the impact of HIV/AIDS epidemic on basic education for children at risk'. *Educational Research,* 49 (3)*,* 259-272.

Semali, L. M. (2007), 'Challenges of Rebuilding Education in Crisis: Access to Universal Primary Education in Africa'. In D. Baker, P. and A. W. Wiseman (eds), *International Perspectives on Education and Society* (Vol. 8, pp. 395-425): JAI.

Sen, A. (2000), *Social Exclusion: concept, application and scrutiny.* Asian Development Bank: Office of Environment and Social Development.

Sharma, M. P. (2006), 'Orphanhood and Schooling Outcomes in Malawi'. *American Journal of Agricultural Economics,* 88 (5)*,* 1273-1278.

Stake, R. (2000), 'Case Studies'. In D. K. Denzin and Y. S. Lincoln (eds), *Handbook of Qualitative Research* (2nd ed.). Thousand Oaks: Sage.

Streuli, N. and Moleni, C. M. (2007), *Education, HIV and AIDS in Malawi: the role of open, distance and flexible learning.* SOFIE project: Institute of Education, University of London.

UNESCO (2007), *EFA Global Monitoring Report 2007: strong foundations, early childhood care and education.* Paris: UNESCO.

UNICEF(2007), *The impact of social cash transfers on children affected by HIV and AIDS: evidence from Zambia, Malawi and South Africa.* Lilongwe: UNICEF ESARO.

UNICEF/UNAIDS/USAID. (2004), *Children on the Brink: a joint report of new orphan estimates and a framework for action.* UNICEF.

USAID/Malawi. (2008), *Primary School Support Program: a school fees pilot (PSSP:SFP) Annual Report Januaray - December, 2007*: USAID/Malawi.

Yin, R. (2003), *Case Study Research: Design and Methods*. (3rd ed.). Thousand Oaks, California: Sage.

# APPENDIX 1: Preliminary Findings from mini-workshops

The tables below summarise the preliminary findings from the 'problem tree' and pair-wise ranking exercises from mini-workshops with pupils and out-of-school-youth at the four case study schools. The reasons for absenteeism, firstly, and dropout are grouped and listed in the two tables; the rank that each reason was given is disaggregated by sex (showing G for girls and B for boys) and by school. (red= Pamoza; blue = Duma; green = Namalongo and brown = Kamunda).

**TABLE A: Reasons for absenteeism**

| Reasons for absenteeism | RANKING | | | | | |
|---|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4 | 5 | 6 |
| *Household circumstances* | | | | | | |
| Hunger (lack of food) | | BBBGGGG | B | | | |
| Poverty | BG | | BB | GG | | |
| Lack of clothes (uniform) | | | | G | BG | B |
| Given chores | | | | B | | BBGGG |
| Sent to work in fields/farming | | | BG | | | |
| *School environment* | | | | | | |
| Few teachers | BG | | | | | |
| Distance to school | | | | BG | | |
| Sitting on the floor/outside | | B | G | | | |
| *Teacher-pupil interaction* | | | | | | |
| Harsh punishment from teachers | | | G | B | | |
| Teachers propositioning pupils | | | G | B | | |
| Conflicts with teachers | | | | | G | B |
| *Personal circumstances* | | | | | | |
| Ill –health/sickness | BBGG | | | | BG | |
| Early marriage (courtship) | | | | | BG | |
| Having girlfriends/boyfriends | | | | | B | G |

The lack of sufficient clothing was given as a reason for absence and ranked relatively high as a reason for dropout amongst both boys and girls. During plenary sessions, participants noted that not only do pupils feel shy coming to school in torn or dirty clothes, but also that they may be sent home if not wearing uniform. The exclusion of children for failing to wear uniform was mentioned at all four schools. Direct school costs were also an issue raised at Namalongo, where pupils wishing to attend extra afternoon classes were expected to pay. The majority of pupils at the mini-workshop said that they did not attend classes because they could not afford to pay. Interestingly, in terms of household circumstances, out-of-school youth at Namalongo noted that an absence of an adult to encourage them to continue with school was another factor contributing to dropout and ranked this highly.

Issues of the school's physical environment were ranked highly only by pupils at Kamunda, although at Duma distances to the school were given as a reason for dropout. At Kamunda, pupils linked absenteeism to the lack of classrooms and few teachers, so that would learn outside and were poorly supervised.

**TABLE B: Reasons for dropout**

| Reasons for dropout | RANKING | | | | | |
|---|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4 | 5 | 6 |
| *Household circumstances* | | | | | | |
| Hunger (lack of food) | BG | BG | | | | |
| Lack of parental support (basic needs) | BGG | BBG | | | G | B |
| Lack of encouragement | B | G | | | | |
| Lack of clothes (uniform) | | | BBGG | BG | | |
| Fishing at lake | | | | | BG | |
| *School environment* | | | | | | |
| Direct school costs | | | BG | | | |
| Distance to school | | | | GB | | |
| *Teacher –pupil interactions* | | | | | | |
| Harsh punishment from teachers | G | | B | | | |
| Teachers sending pupils on chores | B | | | G | | |
| Teachers propositioning pupils | | G | | | B | |
| Bad behaviour/rudeness of pupils | | | | BB | G | G |
| *Personal circumstances* | | | | | | |
| Pregnancy | | | | | | BG |
| Early marriage | | | | G | | B |
| *Peer –related issues* | | | | | | |
| Smoking chamba & drinking | | | | | B | G |
| Peer pressure/copying friends | | | | | G | B |
| Fighting/bullying at school | | B | G | | B | G |

Distinct from other schools, at Pamoza, there was an emphasis on issues of school discipline and teacher behaviour in relation to pupil dropout. Mention of harsh punishments and inappropriate behaviour are clearly seen clustered together on Table 9. One female pupil spoke of being sexually harassed by her class teacher. Bullying and fighting were also ranked high as reasons for dropout at Pamoza, suggesting an underlying current of violence and abuse at the school. At Namalongo, conflicts with teachers leading to absence were also discussed in relation to girls refusing the advances of teachers and being threatened or punished as a consequence.

Ill health was ranked highest as a reason for absence at two schools: Duma and Pamoza. The catchment areas of both schools are surrounded by marsh and *dambo* land and malaria and bilhariza are common. In Duma, cholera was also said to occur at the lake. Although pupils at all four schools listed work in the home or the fields as a reason for absence, household chores were ranked lowest, somewhat at odds with the perception amongst key informants that parents force children to stay at home to do chores. It may be, of course, that such children are already out of school. Peer-related issues, such as peer pressure, having girlfriends and drug and alcohol abuse were also mentioned as reasons for both absenteeism and dropout.

Whilst the ranking exercise revealed some differences between schools, there was little distinction between responses given by male and female participants. Issues raised during the mini-workshops were re-visited during interviews with selected pupils and out-of-school youth.

**SOFIE**