

## Networking and referral

- **Awareness and networks with external support:** Teachers and head-teachers with good links to external sources of support available for children (health clinics, NGO's/ CBOs, church and community support groups.) were better prepared to refer children in need for support. It was suggested that head-teachers could establish links with external sources of support to help teachers referring children in need.
- **School-community communication and collaboration:** A supportive community was seen as crucial to strengthen the ability of schools to deal with HIV-related challenges. Strong links between schools and communities were felt to promote better collaboration in referring children in need for support.

## Ensure a supportive context for teachers

- **Encourage collaboration between teachers:** It was suggested that head-teachers should facilitate regular meetings between teachers to coordinate supportive responses for children in need.
- **Support teachers:** Head-teachers were encouraged to find ways to ensure a good environment for teachers to work in, find ways to strengthen the recognition and value of their work. Teachers were more likely to care for children if they felt that they themselves were cared for.

## About us

This is a DFID/ESRC funded research project with collaborations between Biomedical Research and Training Institute (Harare, Zimbabwe), Department of Infectious Disease Epidemiology, Imperial College School of Public Health, (London, UK) and Department of Social Psychology, The London School of Economic (London, UK).

The research was granted ethical approval from the Medical Research Council of Zimbabwe (MRCZ/A/1661).

## About this leaflet

This leaflet (II out of III) present results from a multi-method research carried out in communities in rural Zimbabwe, exploring the role of schools in supporting children affected by HIV. Drawing on experiences from 3 primary schools and 3 secondary schools, these leaflets present what teachers, community members and children themselves regarded as i) how HIV impact on children's school experiences, and ii) examples of good practice to build on which could strengthen schools' support, care and protection of children affected by HIV. These findings are based on examples of supportive practice already carried out in the study communities - and the study participants' own ideas of ways in which schools could be strengthened to support children affected by HIV.

## For further information:

<http://www.psych.lse.ac.uk/beyondeducation>  
[www.manicalandhivproject.org](http://www.manicalandhivproject.org)



Biomedical Research  
and Training Institute



DFID Department for  
International  
Development



## Making schools more supportive of vulnerable children

How can schools support children  
affected by HIV? Learning from  
good practice

Experiences from Zimbabwe

2

## Understanding and flexibility

- **Awareness** of children's home situation and efforts to understand underlying reasons for children's behaviour were seen as important first steps for teachers to respond in a supportive way. Social record, regular teacher-guardian meetings, and home visits were useful tools that helped teachers to follow up on children's school attendance, performance, and general well-being.
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- **Exempt vulnerable children from heavy chores at school:** children affected by HIV often carried out heavy chores in their households, which became a challenge when children were sick and/or malnourished. Relieving sick and undernourished children from heavy duties at school helped to protect their well-being.
- **Flexibility to secure children's academic development despite financial restrictions:** Flexible practice helped to ensure children's education despite financial challenges. Some schools allowed children to stay in school despite late payment of fees or offered guardians to work for the school as compensation for fees. When children needed to stay at home to care for sick parents, some teachers gave them exercises to do from home so that they do not fall behind. Children emphasised the importance of teachers to take time helping children to catch up academically after absence.

“You should be able to know the background of each child even if you have forty five pupils. It is important for the class teacher to know because the performance of children in class or behaviour is influenced by the way they are living at home.”

Primary school teacher, rural Zimbabwe

“I told my teacher when my mother was very sick so I was no longer coming back to school, I would be given homework that others did and I would go and write at home so that I could help my mother.”

HIV-affected child, rural Zimbabwe

## HIV specific support

- **Facilitate opportunities for children to talk about HIV related challenges:** Lack of disclosure of children's (or their parents') HIV status was a common barrier preventing teachers from attending to children's needs. Those schools facilitating opportunities for one-to-one dialogue between teachers and children gave children an opportunity to share concerns and helped teachers identify and attend children's needs
- **Support HIV infected children on ARVs:** Teachers were encouraged to be flexible allowing hospital visits during school hours, remind children to take pills on time, and mobilise food for children on ARVs.
- **Facilitate peer support groups** for children affected by HIV at one of the schools gave children an opportunity to share life experiences, give each other encouragement and strengthen friendship.
- **Help to fight HIV stigma:** Teachers were encouraged to treat all children as equal, promote inclusion of all children, and respond to HIV-related bullying.
- **Encourage HIV testing for sick children and refer to health clinics.** Given the daily contact at schools, teachers and peers were in a position to notice when children were ill and refer them to health clinics.

“Some children make friends with their teachers they feel comfortable to talk to. I have a daughter at home, who does not want to talk she is quiet but with her teacher she talks about anything.”

Community member, rural Zimbabwe

“A teacher can help you only if you have told him or her about your problem because he or she cannot just guess.”

HIV-affected child, rural Zimbabwe

“We took time to put them into small groups of 3 – 5 children. We gave those children a teacher who lives close to where those children live. So they sometimes go to the children's home to see whether they have anything to eat.”

Primary school teacher, rural Zimbabwe

## Emotional care and trusting relationships

- **Emotional support:** Some teachers showed great efforts to understand underlying reasons for children's emotional behaviour, listened to children's concerns, and gave emotional encouragement and support.
- **Friendly trusty teacher-pupil relations:** Teachers were encouraged to have a friendly caring attitude for children to feel comfortable in approaching teachers. Trustful relationship promoted better teacher-pupil dialogue and understanding.
- **Appointing specific teachers** to carry out one-to-one counselling with children created an opportunity to build trustful confidential relationships where children felt free to share any difficulties they experienced.
- **Moral guidance:** Teachers with good moral behaviour acted as positive role models for children and played an essential role in moral guidance.
- **Encourage peer support and social inclusion in class:** Friendship played an important role at all schools studied for children to comfort each other, share food and school equipment, and help with studies. Peers, at times, played a central role in notifying adults of classmates in need of support. Some teachers helped to facilitate a good social environment in class, encouraged social inclusion, and responded to bullying and social exclusion.

“The classroom is where I meet with my friends. When I share lunch with friends I feel happy. They tell me not to give up on my school work. When I have friends to comfort me I feel schooling is good. They comfort me just like my mother and I feel loved.”

HIV-affected child, rural Zimbabwe

“Children can open up to fellow children if they have got a problem. They feel comfortable and better understood by their peers. Those peers can help but if they cannot help they can tell their teacher and the teacher can find a way to help.”

Primary school teacher, rural Zimbabwe