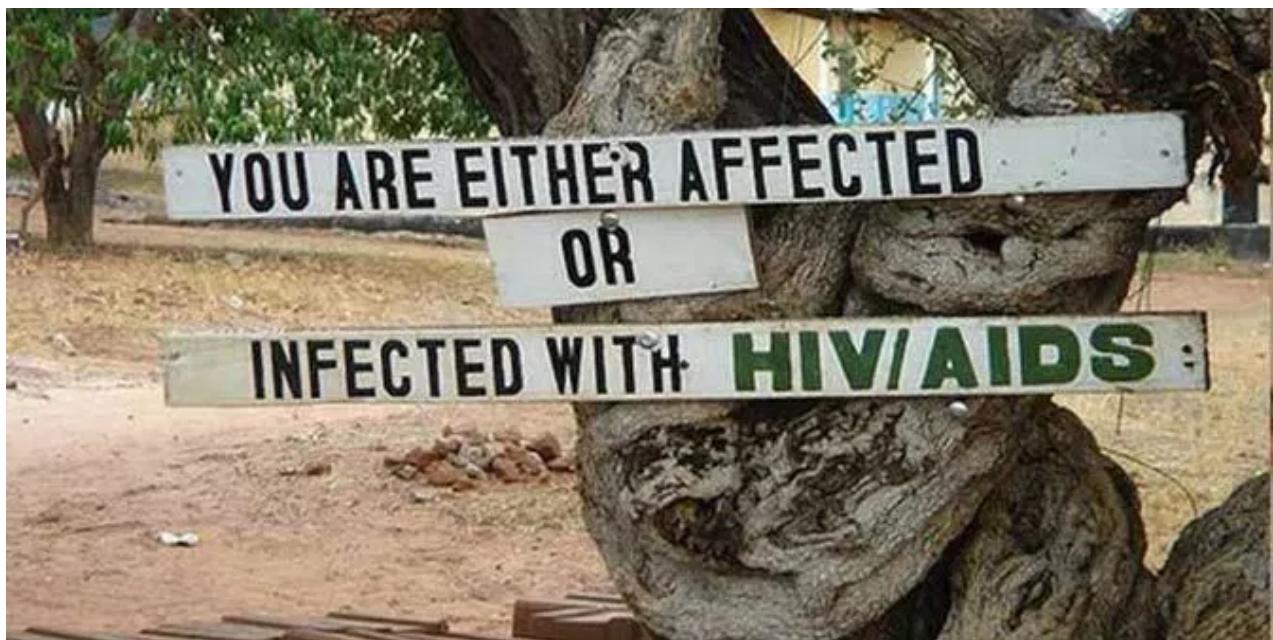


## Teachers must be incentivised and rewarded if they are to become the new front line in helping children with complex social problems

*LSE's Cathy Campbell argues that the role of the teachers must be transformed if they are to take on caring responsibilities for HIV/Aids-affected children.*

Many people think that the battle against HIV/Aids has been won. Well, they are wrong. In Zimbabwe, which has suffered one of the worst HIV/Aids epidemics in the world, 74% of all orphaned children (about 890,000) have lost their parents to Aids. That is some statistic. Their lives subsequently become full of suffering as they have to take up parental responsibilities for siblings or are **farmed out to relatives that may not care for them very much, or that battle financially to support them, or themselves are living with HIV/Aids.**

With the poverty of an adults' network in Zimbabwe, where can these HIV/Aids-affected orphans gain support to improve their quality of life. The current international policy trend all over Africa is to put schools at the forefront of providing this care. After winning a grant from ESRC/DFID in 2012 to do research on how local people respond to their problems with their own resources, we chose to test how realistic and successful this policy is and see if we could generate guidelines for best practice in schools.



We focussed on six schools in rural Zimbabwe and we discovered that **many HIV/Aids affected children generally did not view schools as a source of support**, and that while some individual teachers do go out of their way to help their pupils, it is not the norm.

One reason is that schools are severely under-resourced. Teachers, already overstretched with helping children to hit academic targets, often have no time or emotional energy to help a child with complex social problems such as caring for dying siblings or sex abuse. In fact, some of them may be HIV-positive or have family members who are HIV-positive and are struggling to cope with those problems themselves.

Secondly, the profession of teaching in Zimbabwe is recovering from a long-standing crisis. This goes back to the economic collapse in Zimbabwe in 2008 which set back the functioning of schools and payment and status of teachers. Although things have improved since the American dollar was adopted, the morale and the reputation of teachers are still very low. Many teachers

have emigrated to other African countries. Those left behind are struggling to cope with their own personal problems. This is not to say that the majority of teachers are lazy or uninterested in their jobs and their pupils, rather they struggle because of their poor working conditions.

As a result we came to the conclusion that it is unrealistic for international policy to expect teachers to bear the responsibility of supporting children with complex social problems.

Instead, as a matter of urgency, urgent attention needs to be given to upgrading the status of teachers and transforming their roles. Caring responsibilities should be built into their job descriptions and time to fulfil child support and protections roles should be incorporated into their schedules. Promotion and salary increases should also be linked to the extent to which they fulfil those additional responsibilities.

We also discovered that the nature of the school matters in the kind of help children receive. In **contrasting two schools, one in an urban setting, the other in a rural area**, we were surprised to find that the former had lower levels of inclusion and child health than the latter. The finding was counterintuitive given that the urban school had better buildings, better-paid teachers and a headmaster who had worked hard to set up a concrete HIV/Aids policy. But in spite of having more run-down buildings, no running water or electricity, demoralised and poorly-paid teachers, the headmaster of the rural school found some success in choosing to deal with his pupils' problems within the wider social context. For example, he determined that the grades of the children were poor because they had nowhere to study. Therefore, he organised compulsory homework clubs at the school on Saturday. However, he noticed that they could not concentrate because they were hungry, so he organised food for them. In addition, the school was in a very small community where teachers and students interacted outside school hours, as a result the teaching staff had a far greater understanding of the problems of the children than in the urban school where teachers lived miles away from the school and knew nothing about their pupils' personal circumstances.

From this we concluded that if teachers are going to take on caring responsibilities for their pupils, a focus on the quality of the school-community interface and an emphasis on the importance of dealing with pupils' problems in a social context must be acknowledged along with reforming the working conditions of teachers as well as incentivising and rewarding them.

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**The post is based on the following research papers:**

- Re-thinking children's agency in extreme hardship: Zimbabwean children's draw-and-write about their HIV-affected peers
- Children's representations of school support for HIV-affected peers in rural Zimbabwe,
- Factors shaping the HIV-competence of two primary schools in rural Zimbabwe

**The views expressed in this post are those of the author and in no way reflect those of the Africa at LSE blog or the London School of Economics and Political Science.**

