Teachers’ views on HIV/AIDS related issues in the Dodoma region, Tanzania

A qualitative study about teachers’ attitudes around HIV/AIDS in relation to how they educate
Abstract

This study is about how Tanzanian primary schools teachers look on HIV/AIDS related issues in relation to education, and how the teachers use their education to prevent the spread of HIV/AIDS.

The data to this study has been collected over a period of eight weeks. Fifteen randomly selected Tanzanian teachers from three different primary schools in the Dodoma region have been interviewed, where five of the interviewed teachers have been working in an urban school, another five in a semiurban school, and further, five of the teachers in a rural school. The theoretical foundation of this study is pedagogical. We have in our study emanated from the African pedagogue Julius Nyerere’s and the Latin American pedagogue Paolo Feriere’s thoughts around education as liberalization, when we asked teachers about how they educate around questions concerning HIV/AIDS.

Our conclusion from this study is that the Tanzanian teachers have a substantial knowledge about HIV/AIDS, and that all of the teachers are teaching their students in questions around HIV/AIDS. Further, all of the teachers are using innovative ways to transmit knowledge around HIV/AIDS to their students, though there is a difference between pedagogical methods in the three different schools. Moreover, all of the teachers think that teachers have a responsibility to prevent the spread of HIV/AIDS, and that education can prevent the spread of the disease. Concerning sexual interactions in school environment, the teachers in the urban school did not consider pregnancy among school girls as a problem, comparative to the teachers in the semiurban and rural school, who considered this to be a problem in their schools.

The teachers direct or indirect stressed the importance of education for all people to prevent the spread of HIV/AIDS. The knowledge about the disease could be transmitted through different kinds of ways, where some teachers mentioned public meetings, massmedia, counselling from parents and spiritual/religious education.
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1. Introduction

We have in our teacher-training, at Halmstad University in Sweden, run across the theories of Paolo Freire and his view of pedagogy as liberalization. Freire was active among poor and oppressed people in Latin America and the majority of those were illiterate. The intention he had with his education was that students should reflect over their own social, historical and political situation. The essence in Freire’s pedagogy was that the education was meant to result in liberalization for the poor, so that they themselves could improve their situation. Education shall, according to Freire, not feed the poor with the knowledge from the rich world. The education shall on the contrary raise the poor people’s awareness about their own world so that they can capture the knowledge they need for creating a better future.¹ The pedagogical views on education of Freire, reminds of those by the African pedagogic Julius Nyerere (1922-1999). Also Nyerere thought that education should include the social, historical and political situation of the country. He claimed that the role of the teacher was important for creating the attitudes in a society based on democratic principles. Moreover, it was of most importance that education should be relevant to the problems of Africa. Education must applicate basic principles to the existing situation of Africa. Students should therefore become aware of the poverty, the ignorance, the sickness, the social attitudes and the political atmosphere in Africa, and from that awareness make their own conclusions of what kind of development that will lead to a better future.²

We find these theories very interesting and this made us reflect and think about what kind of pedagogical theories that are commonly used in the underdeveloped world of today. We are also interested in health issues in underdeveloped countries and HIV/AIDS is a sincere problem that is clearly related to poverty. Africa is the continent in the world that suffers the most from poverty and HIV/AIDS.³ Therefore, we have interviewed teachers in Tanzania about their views on HIV/AIDS related issues in relation to how they educate about the topic.

³ Maliyamkono, T. L & Mason H (2006), The Promise, p. 466 and 471.
Tanzania is a country that fits well in on our requirements so that the study has potential to become rewarding. Tanzania is a financially underdeveloped country and its’ population suffers from the damages of HIV/AIDS. It is estimated that over 50 percent of Tanzanians live below the poverty line and that 2.2 millions of the population are infected by HIV/AIDS. Moreover, Tanzania is a country that Sweden has had a cooperation with for more than 45 years.\textsuperscript{4}

We hope that this study will provide interesting and useful information from a pedagogical point of view and from a broader perspective will shine light over questions concerning HIV/AIDS related to education. The study will show how teachers can educate around sexual transmittable diseases as HIV/AIDS in Sweden. Although, the spread of the disease is not that widespread in Sweden as in Tanzania, the spread of sexual transmittable diseases has increased in Sweden, as the amount of people getting infected by HIV/AIDS.\textsuperscript{5} Therefore, it is important to give students knowledge about the disease, and to make them aware of sexual transmittable diseases as HIV/AIDS in Sweden.

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\textsuperscript{5} Internet (2009-21-01):www.regeringen.se/content/1/c6/08/48/78/2c7e9c48.pdf
2. Background

2.1 Tanzania Development Vision 2025

Tanzania has a population of 37.9 million\(^6\), about 47 percent of the population is beneath the age of 15 and 64 percent of the total population is under 25 years of age. Furthermore, more than half of the population lives under the poverty level. Tanzania is one of the ten poorest countries in the world, and the gap between rich and poor has increased. In order to decrease the poverty in the country, the government has created a development vision for the future entitled the Tanzania Development Vision 2025.\(^7\)

The idea of formulating a long-term development philosophy emerged after the Tanzanian government had realised that the past development policies and strategies were not adequately responding to the present changing markets and technological conditions. The development policies and strategies of the past were not, moreover, adapted to changes in the regional economy, world economy or to the domestic socio-economic conditions. Consistent to the Tanzania Development Vision 2025, Tanzania of 2025 should be a nation that is characterized by five main attributes. These main attributes are; High quality livelihood, Peace, stability and unity, Good governance, A well educated and learning society and A competitive economy capable of producing sustainable growth and shared benefits.\(^8\)

It is especially four main impediments that have been identified which have persistently impeded the realisation of past development plans and strategies. These impediments are; A donor dependency syndrome and a dependent and defeatist developmental mindset, A weak and low capacity for economic management, Failures in good governance and in the organization of production and Ineffective implementation syndrome.\(^9\)

Tanzania strives to restructure the school system. Tanzania Development Vision 2025 established Education Sector Development Program (ESDP). The purpose with ESDP is to

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\(^9\) Ibid.
develop a school system of high quality. Education shall, according to the Tannzania Development Vision, be used in a strategic way in order to create a well educated nation that is sufficiently equipped with the knowledge needed to solve the development challenges that face Tanzania. The education system should therefore be restructured and transformed qualitatively with a focus on promoting creativity and problem solving. Moreover, another ambition in the Tanzania Development Vision is to promote science and technology in order to create a science based education system for all children between the ages of 6 to 15. In the development of the school system Tanzania especially focus on expanding enrollment in primary school so that primary education becomes universal. Further objectives is the eradication of illiteracy, increase the numbers of students who candidate to secondary school, increase quality in secondary school and to provide education in all regions and districts.\textsuperscript{10}

This document does not specifically discuss the relation between education and HIV/AIDS. Though, it is possible to find elements in the section that deals with education that to some extent is influenced by the pedagogical thoughts of Paolo Freire and Julius Nyerere.

2.2 The school system in Tanzania

The present structure of the formal education system in Tanzania\textsuperscript{11} is as follows; two years of pre-primary education, seven years of primary education, four years of secondary ordinary level, two years of secondary advanced level and finally a minimum of three years of university education. The official school attending age are 5-6 for pre-primary, 7-13 for primary, 14-17 for lower secondary and 18-19 for upper secondary. The pre-primary enrolment in 2006 was 28.5 % of school age (5-6 years) population. Figures for Primary education enrolment are 96.1 % of school age (7-13 years) population. The enrolment for secondary education is 13.4 % (Form 1-4), 1 % (Form 5-6) and 13.1 % (Form 1-6). Furthermore, Teachers Colleges offer courses leading to Certificate in Teacher Education or Diploma in Teacher Education. There are 21 824 teacher students at 53 Government and Non-Government Teacher Training Colleges.\textsuperscript{12}

\textsuperscript{11} The statistical data is from 2006.
The female enrolment as percentage of total enrollment is 50.5 % for pre-primary education, 49.1 % for primary education (STD I-VII) and 47 % for secondary education (Form I-VI). The female enrolment to teacher education is 48.2 %. Moreover, there are 8601 female teachers in service at pre-primary schools out of 14 591 (59 %) and 73 335 in primary schools out of 151 882 (48 %). The total number of female teachers in secondary schools is 6952 out of total 23 252 (30 %).\textsuperscript{13}

Enrolment statistics for Dodoma, where we will conduct our research project, is 38 % for pre-primary education and 91 % for primary education. The national average is 28.5 % for pre-primary education and 96.1 % for primary education. Furthermore, the teacher/pupil ratio in Dodoma is 67 for pre-primary and 51 for primary education. The national average is 48 for pre-primary and 52 for primary education. The total number of secondary schools in Dodoma are 104.\textsuperscript{14}

The Education Sector Budget has increased from 15.3 % (76 504 mill. shs.) of Total Budget (500.116.00 mill. shs.) in 1995/1996 to 19.8 % (958.819 mill. shs./4.850.588.00 mill. shs.) in 2006/2007. The percentage share for 2006/2007 is 64.5 % to primary and non-formal education, 12.5 % to secondary education, 1.1 % to teacher education and finally 21.9 % to tertiary and higher education.\textsuperscript{15}

\section*{2.3 The HIV/AIDS situation in Tanzania}

In Tanzania HIV/AIDS is an immense problem.\textsuperscript{16} Seven percent of the adults (15-49 years old) living in Tanzania are infected by HIV/AIDS, approximately 2.2 millions, and thousands more have died of the epidemic.\textsuperscript{17} Moreover, are 50 percent of the beds in hospitals occupied by patients with HIV/AIDS related illnesses, and the problem of the spread of HIV/AIDS seems only to increase in the country, and might be even more crucially for the future.\textsuperscript{18}

People living in rural-areas, as women and youths, are opposed to a higher risk to be affected by HIV/AIDS. The poverty level in rural-areas are more widespread than in urban-areas,

\begin{itemize}
\item \textsuperscript{13} Basic Education Statistics in Tanzania (Best) (2006), The United Republic of Tanzania - The Ministry of Education and Vocational Training, 2002-2006 National Data, p. 78 and 80.
\item \textsuperscript{14}Ibid, p. 6, 8, 22, 35 and 69.
\item \textsuperscript{15}Ibid. p. 89 and 91.
\item \textsuperscript{16}Internet (2008-11-04): www.tanzania.go.tz/hiv_aids.html.
\item \textsuperscript{17}Maliyamkono, T. L & Mason, H (2006) The Promise, p. 466-467.
\item \textsuperscript{18}Ibid. p.467 and Internet (2008-11-04): www.tanzania.go.tz/hiv_aids.html.
\end{itemize}
agricultural workers are in the age group 15-45 years old; the same as for youths, there can also be a lack of education and awareness of the disease in rural-areas and moreover have “…traditional healers … a great influence … in rural villages that … tent to … limited access to formal health care provision.”19 Moreover, can traditional healers create a belief that witchcraft is the cause of the sickness, which “…makes it difficult to convince people with wife-inheritance traditions not to marry women whose husbands may have died from AIDS.”20 Other circumstances that can increase the spread of the disease in the country are cultural norms, beliefs and practices, like wife inheritance, polygamy and female circumcision and multiple sex partners for men.21

Poverty and lack of education have a negative impact on the spread of HIV/AIDS. It is common that young people from poor communities, where the classes in school are to large and where there is a small number of well educated teachers, choose to leave their home and school environment to become independent instead of graduate primary school. When schools have failed in their attempts to introduce sex education, this group is not adequately prepared to confront sexual issues. Every year there is about 300,000 pupils who quit primary education to migrate to towns like Dar es Salaam in search for employment. Mostly they end up getting employment that is poorly paid and in turn they, especially the women, have to supplement their income through unsafe sexual activities.22 Many women also have to drop out of school because of unwanted pregnancy. Vertical transmission of HIV (mother-to-child transmission) is considerable in Tanzania, where 25-35 percent of HIV-positive women will transmit the infection to their newborns. The transmission through mother-to-child is the most common source of infection for children under five years, and the problem seems to arise as more women continue to become infected and pregnant.23 Another source of transmission of the disease is cross-contamination at health care centers, specifically with regard to donated blood and blood-products, there one of ten donors could transmit the infection through transfused blood. Within hospital systems, there remains a vast an unquantifiable problem of

cross-contamination, and there is an increased need for education and training of medical staff with regard to safe practices.\textsuperscript{24}

The epidemic has a negative impact for the economy of the country, where it is “…eroding the capacity for development through its myriad effects upon labour supply, saving rates, national security and social cohesion.”\textsuperscript{25} Nursing care at hospital for people suffering from HIV/AIDS, medical treatment for people living with HIV/AIDS, losses of skilled employers in industries who are dying from the disease, as the loss of healthy agriculture workers is detrimental for the government of the country, through its effects on flows of income.\textsuperscript{26} The epidemic of HIV/AIDS not only strikes back on the economy of the country, it also leads to social and economic disruption of the affected individuals, their families and communities. The medical, emotional and social costs on the patient and his/hers family are high. More socio-economic difficulties will arise if the patient is the main bread earner of the family. For survivors in families where a member have died of the disease, may child nutrition, education, health and living standards be severely affected. The poorest households are the ones least able to cope with the impact of adult deaths due to AIDS.\textsuperscript{27} Furthermore, many of all the orphans bereft with one or two parents, leads to a high cost for households that become care holders.\textsuperscript{28}

Though the awareness of the presence of HIV/AIDS has increased in Tanzania, there has been a failure to change behavior and practices of the community at large. To make a successful change in the attitude around HIV/AIDS, people have to become aware of fragmented knowledge of their culture, which they now fear. They also need to get a greater understanding of critical issues around HIV/AIDS, which now are neglected. For example the one suffering from HIV/AIDS often fails to access services and support for the disease, which should be considered as a result from lack of awareness around HIV/AIDS, an inability to afford medical cost, and/or the stigma and discrimination around the disease that is prevalent in the country. For this and other issues around HIV/AIDS mentioned above, it is of most importance that knowledge about subject as stigmatism around HIV/AIDS, culture behavior, gender-roles, religion’s impact on sexual behavior, health services, high-risk behavior and

\textsuperscript{28} Maliyamkono, T. L & Mason, H (2006)\textit{The Promise}, p.470.
vulnerable groups will circulate. This kind of knowledge should have a long time positive effect to prevent HIV/AIDS.\textsuperscript{29}

In recent years have strategies begun to develop to prevent, control and mitigate the impact of HIV/AIDS. The government of Tanzania has been providing health education, decentralization of services and community participation.\textsuperscript{30} Furthermore, has The Third Phase 2001 National Policy on HIV/AIDS in Tanzania developed an effort to halt the epidemic of HIV/AIDS. The Third Phase aim to increase both the quality and availability of the health services through a series of frameworks like prevention, education and there is a desire to safeguard the future citizens. The Third Phase developed through The Millenium Development. Three of the main goals within The Millenium Development will be to reduce two thirds of the under five years children infant mortality rate, by three quarters reduce the maternal mortality level and to have halted and begun to reverse the spread of HIV/AIDS in the period between 1990 and 2015. In addition, the MKUKUTA strategy in Tanzania attempts to provide a long-term development approach to sustain efforts toward poverty reduction, where the specific targets among others includes infant and child health, child nutrition, and HIV/AIDS.\textsuperscript{31}

\textsuperscript{29} Maliyamkono, T. L & Mason, H (2006)\textit{The Promise}, p. 473.  
\textsuperscript{30} Ibid. p. 468.  
\textsuperscript{31} Ibid, p. 450.
3. Pedagogical theories

We have decided to make use of the pedagogical theories that is created by Julius Nyerere, Eugan G. Davidson, Ruth Evans, Knut-Inge Klepp and Jovit K. Katabaro. In order to understand education from a Tanzanian point of view it is necessary to understand Nyerere and his thoughts around education. Davidson examines the Tanzanian drive towards Education For All while Evans discusses the relation between poverty, HIV and barriers to education in Tanzania. Furthermore, Klepp has conducted a study concerning AIDS education in Tanzania and Katabaro has written a paper that explores teachers’ attitudes and perceived threats due to HIV/AIDS in Tanzania. The reason for why we have chosen these theories and not others, is that we find these pedagogical theories relevant in relation to the objective of our study.

3.1 Education
Factors that indicate high quality education, in excess of engagement and strong leadership, is good funding, and a well-established policy (the Big Three Factors), though these criterions alone cannot predict a satisfactory result. Other aspects that matters is for example parents efforts and standard of living, the motivation of the student, supply of school material, and classrooms, and supplementary training for teachers. Gender can also make allowances, when young women expect to assist in the household. A detailed and well-grounded evaluation, which can demonstrate the educations cause and effects, requires.

3.2 The educational philosophy of Julius Nyerere
Julius Kambarage Nyerere was born 1922, in the Mara Region of Tanzania. In the first democratic elections in the country (1958) he became a Member of Parliment. Furthermore, he became the first President of Tanzania, and held this position until 1985, when he chose not to run for office again. Nyerere was well known for his political work in which he urged and argued strongly for Tanzanian independence, and for a Tanzanian society based on socialistic policies and thoughts. Nyerere was also referred to as Mwalimu (teacher), because

of his trust in the power of education, and its’ importance to national development. He died 1999, of leukaemia, at the age of 77.33

One of Nyerere’s main thought was that “…every child [should be] enrolled in school, regardless of … class, race, tribe, religion, gender or location”, something that hadn’t been taken for granted before.34 During the colonial era schools were mostly for whites, and the Africans who went to school were denied relevant education from their own culture and for their future. Nyerere opposed this and he begun to plead for Africanisation35. Due to Africanisation education will “…transmit from one generation to the next the accumulated wisdom and knowledge of the [African] society, and … prepare … young people for their future membership of the [African] society and their active participation in its … development.”36 Universities and colleges should therefore provide materials on the history of Africa and make these available to teachers. National songs and traditional African dances should for example be taught to the people of Africa. Nyerere also claimed for the importance of not copying other high-developed societies as the Russian, Chinese, American or German, but instead “…create an Africa with confidence”.37

Another goal in Africanisation was to replace expatriate servants in Tanzania by local ones. Nyerere meant that this sort of action only could increase the wealth of the people in Africa, and contribute to the raising of the people’s living standard. To support this kind of development education is of great importance for the people in Tanzania, but according to Nyerere it must be a certain kind of education. Education must be relevant to the problems of Africa; more, it must apply basic principles to the existing situation of Africa and deliberate conversion of unpleasant facts into something more palatable.38 Education must also make African people aware of the poverty, the ignorance, the sickness, the social attitudes and the political atmosphere in Africa. Only from that kind of education can people make conclusions of what kind of development that will lead to a better future.

37 Ibid. p. 81.
38 Ibid. p. 20.
Moreover, Nyerere pled for socialist principles, were respect for each individual and its knowledge about the society should be considered. According to Nyerere should schools be propounded on socialist principles of cooperation and in methods used to teach and organize. Schools should become working communities were students would get in contact with all kinds of knowledge, practical as theoretical, for example can students learn new techniques and take a pride in a school community achievement if they work on a village communal farm. Nyerere meant that relevant education for the future must be linked to living, learning and working and from this will students become “…self-reliant producers after completing their schooling, able to fit into their home environment.”

Nyerere wanted to achieve a society based on “…equality and respect for human dignity” were the people shared the resources “…which [is] produced by efforts”, he also wanted a society to be based on “…work by everyone and exploitation by none.” The educational system should therefore foster social goals of living and working together for the common good and it should prepare people for their responsibilities in a democratic society.

Even in the classrooms Nyerere promoted democratic principles of organization and transformative pedagogy. He rejected dominant bureaucratic structure, were teachers rule and the students are ruled. Education should speak directly to the need for the students. Students should learn to make their own decisions, but also be allowed to learn from own mistakes. When the student can understand, and perceive herself as an object in her environment, then she can transform her way of thinking and create active decisions. Furthermore, should the student learn to control the resources emanating from their work. Qualities of critical thinking, original problem solving, and creativity was to be fostered rather than passive memorization.

For Nyerere was the role of the teacher powerful for the nation. Teachers had a great influence on society as a result of their impact on pupils. Nyerere claimed that teachers could teach people to change the society of the nation, and the missions of schools were to produce citizens who were “…awake and aware of themselves”. What the teachers presented to the class was important, but more important was how the teachers chose to teach. The teacher

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40 Ibid. p. 71.
41 Ibid, p. xi.
42 Ibid, p. 38.
shall not focus on academic knowledge, instead he/she should work with “…enthusiasm – and
with his pupil, … [he/she should] encourage the children to help each other, … [he/she
should] explain why he is doing certain things and why certain rules exist”.43 Nyerere also
claimed that the way teachers were acting to his/hers environment were important. Teachers
are models that pupils emulate and students learn from what teachers do. Therefore, according
to Nyerere, it was most important that teachers treated everyone with respect, discussed
his/hers position clearly and rationally and argued courteously with everyone whatever
position. That kind of “…teacher [who] is inculcating a spirit of equality, of friendship, and
mutual respect […] he is teaching by being - which is the most effective teaching technique
existing!”44 Nyerere meant that this kind of teaching created the attitudes of the society and
the awareness of the people.

The pedagogical thoughts of Julius Nyerere are still current. The awareness around
HIV/AIDS has increased in Tanzania, but as mentioned above, there has been a failure to
change peoples’ attitudes towards the disease, and their behavior.45 Nyerere stressed the
importance of education to change the attitude of the people. Nyerere meant that the people
have to become aware of the problems in Africa, such as the poverty, the ignorance, the
sickness, the social attitudes and the political atmosphere. These are statements that reminds
of the arguments that was mentioned earlier, where the kind of knowledge that should have a
long time positive effect to prevent HIV/AIDS is the one that discusses the stigmatism around
HIV/AIDS, the culture behavior, the gender-roles, the religion’s impact on sexual behavior,
the health services, high-risk behavior and the vulnerable groups in the society.46 Also,
Nyerere argued that the students had to become aware of themselves in their own
environment and about their own responsibility to make the right choices in the future. To
make this awareness the teachers have to reach out to the pupils with their knowledge. Today
around 300.000 pupils every year quit primary school without graduation in Tanzania.47 Lack
of education has a negative impact on the spread of HIV/AIDS. One way to prevent pupil to
quit school might be for the teachers to treat everyone with respect and discuss his/hers
position clearly and rationally.

44 Ibid, p. 38.
45 Same study chapter 2.3 The HIV/AIDS situation in Tanzania , p. 8.
46 Same study chapter 2.3 The HIV/AIDS situation in Tanzania , p. 8 and Maliyamkono, T. L & Mason, H
47 Same study chapter 2.3 The HIV/AIDS situation in Tanzania , p.7.
3.3 Universal Primary Education (UPE)

Eugan G. Davidson, PhD candidate at the University of E-Anglian (U.K) has written a paper that explores the drive towards Education For All with a particular reference to Tanzania. The main objective of the research, conducted by Davidson, is to examine if the drive towards Education For All can be achievable within the time framework proposed and also if these changes can be sustained in the long term.48

Tanzania has for many years had the outspoken goal to be able to provide a free Education For All (EFA). This aim is often called Universal Primary Education (UPE). The first announcement of this commitment came in 1969 with the target to achieve UPE by 1989. Five years later, in 1974, a new three year target was set for the achievement of UPE. There was a considerable success in raising the primary school enrolment figures with gross enrolment rates around 90% in the early 1980:s. It should though be said that the corresponding net enrolment figures for the period were considered as low as 65-70%. The drive towards a high quality UPE was affected when Tanzania experienced a sincere economic setback during the late 1970:s and early 1980:s. The quality of education has suffered as a result of the long period of economic stagnation and Tanzania has therefore felt an urge to reintroduce the drive towards UPE. Furthermore, this has led to the production and the implementation of the Education Sector Development Programme (ESDP) and the Primary Education Development Plan 2002-6 (PEDP). PEDP has abolished school fees and other mandatory contributions, which has increased the enrolment dramatically.49

Davidson conducted his research within several primary schools in the Morogoro region of Tanzania for a period over three years. Tanzania has, according to Davidson and his result, made improvements in its educational system and has a great opportunity to make furthermore improvements. One concern that Davidson addresses is the quality of education and he calls for a shift from a quantity focused development to a more quality based development of the education system. Davidson argues that such a shift does not require a change of plan. The key area is, according to Davidson, the way economical funds are being

49 The Primary education enrolment is 96.1 % (2006).
used and in the way priorities are being chosen. A large proportion of the money that are spent today is being used for classroom building and other construction programmes. Davidson amplifies the need for money also being allocated for the purposes of improving the teaching offered, the learning experience and the welfare of teachers and other education workers.51

Improvements in order to create an educational system based on substantial quality could, in our opinion, also increase the possibility for education to prevent HIV/AIDS.

3.4 HIV/AIDS in education
Ruth Evans has written an article about poverty, HIV and barriers to education. The article is based on first-hand experiences of ”street children” in northern Tanzania and the materiel will form the base for her doctoral thesis in Gender Studies.52

Street children are especially vulnerable to become infected by HIV and following quotation from Evans article describe their vulnerable situation quite well;

Street children’s lack of access to health care, combined with the fact that they have often missed out on sexual health education at school, and often suffer from other sexually transmitted diseases which facilitate HIV transmission, all further constrain their ability to protect themselves from HIV infection.53

Furthermore, Evans discusses barriers to girls’ education and their vulnerability to HIV and she argues that teenage girls are particularly vulnerable to HIV infection due to an environment of poverty, gender discrimination and harassment at school. According to both the article and UNICEF, girls often become infected at a younger age than boys because they are socially, economically and biologically more vulnerable to both infection and unprotected sex. Recent studies and statistics from Africa show that girls aged 15-19 are around eight

53Ibid, p. 60.
times more likely to be HIV-positive than boys at same age. Moreover, they are three times more likely to be HIV-positive between the ages 20-24 in comparison to men their age.\textsuperscript{54}

Evans writes in her article that girls are often the first to be withdrawn from school when the household has it rough economically. Although, engaging in a sexual relationship with an older man is sometimes the only way for a girl to be able to continue her education when he is supporting her economically. It has occurred, according to Evans, within schoolsettings in Tanzania that some male teachers have sexually harrased female students. It is not uncommon when a girl refuses to have sex that this lead to public humiliation, unfairly low marks, exclusion from class or corporal punishment. Evans refer to a study conducted in Mwanza (northern Tanzania) and claim that the most commonly cited problems experienced by school girls were pregnancy (50 percent) and sexual harassment by boys (37 percent). The official practice in Tanzania is to expel all schoolgirls that have been found to be pregnant. The official number of expulsions due to school pregnancies is around 3000 per year but there are scientists and studies that estimate the number to be as much as ten to thirteen times higher than the official record.\textsuperscript{55}

Knut-Inge Klepp, PhD and MPH from the Institute for Nutrition research at the University of Oslo, has together with some other scientists\textsuperscript{56} conducted a study concerning AIDS education in Tanzania. The objectives with the study was to test the effects of an education program in Tanzania designed to reduce children’s risk of HIV infection and to improve their tolerance of and care for people with AIDS.\textsuperscript{57}

The study was conducted in public primary schools in the Arusha and Kilimanjaro regions of Tanzania. Furthermore, 1063 sixth-grade students with an average age of 13.6 years participated at baseline and 814 students participated in a follow up survey that was employed 12 months after the baseline survey. A local HIV/AIDS education, called Ngao (shield), was used and implemented over the course of a 2-3 months period with an averaging about 20 school hours per class. The specific objectives with the program were to; encourage increased

\textsuperscript{55} Ibid. p. 57-58.
\textsuperscript{56} Ndeki, Sidney S. (MB, CHB, MSc), Leshabari, Melkizedeck T. (PhD), Hannan, Peter J. (PhD) and Lyimo, Babuel A. (DEHS).
openness and communication about AIDS, both in and out of school, provide students with thorough information about ways to protect themselves against HIV/AIDS, focus on the fact that it is safe to spend time with and care for people with the AIDS virus, foster restrictive attitudes and subjective norms toward early sexual activity and reduce students’ intentions to be sexually active in the near future, as well as their actual sexual involvement.\(^{58}\)

Moreover, the AIDS education program had specific activities and these were as follows; teachers provided factual information about HIV transmission and AIDS, students created their own posters depicting their perceptions of HIV risk factors, students wrote and performed songs and poetry about the danger of AIDS and how children in their own age can protect themselves, students working in small groups discussed how people are exposed to HIV risk and what they themselves could do to reduce such risk, students wrote and performed role-plays in which they argued publicly, trying to convince each other about aspects of HIV risk behaviours or practicing refusal skills relating to sexual involvement, students created and performed elaborate plays in which they wore their traditional clothes instead of school uniforms. These plays portrayed how AIDS was perceived and could be dealt with in the community, students performed their plays, roleplays, poetry and songs outdoors in front of younger schoolmates in order to educate younger children.\(^{59}\)

The short-term evaluation results of the AIDS education program had a positive impact on students’ knowledge about AIDS and their attitudes towards people with AIDS. Furthermore, the program had also a positive effect on students’ subjective norms and behavioral intentions toward being sexually active. The long-term effects (12 months) after the implementation of the AIDS education program were as follows; students that had been participating in the program reported being exposed to AIDS information and discussing HIV/AIDS more frequently than students from schools not participating in the program. The same positive relationship is seen concerning AIDS-related knowledge level and attitudes toward people with AIDS. Moreover, the positive impact could also be found when it comes to students’ subjective norms and intentions to engage in sexual intercourse, and they had more restrictive attitudes toward sexual activities. Finally, a trend was indicating that fewer students from the


\(^{59}\) Ibid, p. 1932-1933.
participating schools had their sexual debut during the previous year, than the counterpart from schools not participating in the program.\textsuperscript{60}

The results from the study indicate, according to the researchers, that it is effective and worthwhile to implement a culturally adapted HIV/AIDS education in primary schools in Tanzania.\textsuperscript{61}

Jovit K. Katabaro has written a paper that explores teachers’ attitudes and perceived threats due to HIV/AIDS in Tanzania. Katabaro lectures in Educational Psychology at the University of Dar es Salaam. The research for the paper was conducted in the Kagera region of Tanzania.\textsuperscript{62} Katabaros study reveals the following result:

AIDS has severely impacted on the day-to-day activities of the schools: this is characterized by teachers’ ill health conditions, denial among the teaching staff, increasing number of orphaned pupils and the decreasing school enrolment in the area. The current situation in schools calls for concerted effort to support and care for teachers and pupils who have been seriously affected by the pandemic in order to enhance teaching and learning. \textsuperscript{63}

\textsuperscript{61} Ibid. p. 1931 and 1935-1936.
\textsuperscript{63} Ibid. p. 149.
4. Description of the objective and questions

The objective of this study is to examine what kind of pedagogy Tanzanian teachers use in their education concerning HIV/AIDS. The main purpose of this study is to gain knowledge about how teachers can use their education to prevent the spread of HIV/AIDS.

The following questions will form the basis of the study:

- What are the teachers’ views on HIV/AIDS related issues?
- What are the teachers’ views on HIV/AIDS in relation to education?
- Do the teachers use their education to prevent the spread of HIV/AIDS?
- If that is the case, how do the teachers use their education to prevent the spread of HIV/AIDS?
5. Methodological approach

The distribution of work, concerning this study, has been even and equally divided between the authors. We have in a close collaboration with each other been working with the essay and the workload has been divided proportionally.

We have decided to implement our research in Dodoma in Tanzania, when Dodoma is one of the poorest regions in Tanzania, and when the spread of HIV/AIDS is related to poverty. Therefore, we believe that this region could provide us with interesting and useful information around issues related to HIV/AIDS. In consultation with our supervisor at the University of Dodoma, we decided to produce a qualitative study with quantitative elements in order to obtain teachers own perspectives concerning their education around HIV/AIDS in Tanzania. We considered this to be the most appropriate method, when some of the questions were personal and sensitive and therefore might cause distressed emotions within the objectives. A questionnaire with quantitative elements is also better adapted to the cultural context in Tanzania.

Steinar Kvale pays attention to the qualitative interview in his book *Den kvalitativa forskningsintervjun* (1997), where he argues that this method is especially suitable in situations when "...you want to study other peoples’ view of meaning of their lived lives, describe their experiences and their self-concept, and to clarify and develop their own perspective on their life". 64

Even though our study has quantitative elements, we will take into consideration the general advice and policies that concern qualitative research such as; select strangers, a small number of people and to not select so called subjective experts. 65 In a qualitative study it is also important that you as an interrogator, to maintain a scientific distance, not are personally acquainted with the person that is interviewed. Furthermore, it is not the the number of people interviewed that is of importance. It could just as well be as good to interview a small number of people that it is to interview a large number. The important thing is that the answers are interesting and profitable, which depends on if the respondents is carefully selected and if the

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64 (the authors own translation) Kvale, S (1997), *Den kvalitativa forskningsintervjun*, p. 100.
65 A subjective expert could be a person that is part of, and who has made active decisions that will affect the phenomena that is examined.
interviews are carried out properly. A number that considers being just enough is 15 persons. We will also in our study, take into consideration the concept of maximal variation. This means that we strive after a spread from without gender and age among the people interviewed. Our distribution between men and women in the study is not totally equal though, where eleven of the interviewed teachers are female and four are men. The teachers that we have interviewed were randomly chosen and moreover, the ones that were available at the chosen schools and this explain why the study contains more women than men.

In our study we aimed to interview teachers from three schools located in different areas in the region of Dodoma in Tanzania. In such way, the study and the result will be characterised by a wide range. The schools we have chosen are all public primary schools and according to their location one urban, one semiurban and finally one rural school. The school within Dodoma is located in the centre of the city, while the semiurban school is situated a couple of kilometres outside Dodoma in an environment that contains both urban and rural characteristics, and finally, the rural school which is to be found in a distinct rural area far from Dodoma which is clearly characterised by a countryside context. In comparison to the semiurban and rural school, the urban school has better premises, materials and resources.

When people are subjects to research and when interviews will take place it is important that certain ethical guidelines are regarded. Particularly important is to consider the guidelines; informed approval, confidentiality and consequence. The first-named principle refers to the requirement that the people who are interviewed gets information about the purpose and procedure of the study. Confidentiality implicate that it is necessary that information, which can identify the respondents, will not be published in the final report. The standard procedure is that the identity and private life of the respondent is protected by change of name or by deidentification. Consequence refers to the respondent’s risk of being harmed is minimal. The advantages with the survey shall always outweigh the interviewed person’s eventual risk of being harmed in any way.

In our interviews of the teachers we have engaged a translator. The translator is a researcher at the University of Dodoma, who presently will initiate his doctoral thesis in Human Resources.

The role of the translator is to translate the English versioned questions in the questionnaire into Swahili, and then to translate the answers from the teachers in Swahili into English. A few difficulties can occur when your study is dependent on the use of a translator, for example misinterpretation of the meaning of the questions and general translation errors. Our cooperation with the translator has, in our opinion, been satisfying. An aspect to be taken into consideration, though, is that the information from the answers of the teachers has been summarised by the translator which can be seen as a weakness of this study.

Except interviews, we also conduct a document and policy review regarding education. Moreover, observations have been done of the school environment, while the teachers were interviewed. We hope that this method will provide a reliable result of wide range.

In the presentation of our results of the study we have been taking pedagogical circumstances into consideration and therefore, decided to divide the different questions in our questionnaire into themes, where theme one includes information from the questions in interviewguide 1:1 and question 1 til 6 in interviewguide 1:2, theme two includes question 7 til 11 in interviewguide 1:2, theme three includes question 12 til 14 in interviewguide 1:2, and finally theme four which includes question 17 in interviewguide 1:2. The division between the questions qualify the result of the study.

The collected data has been reviewed and analyzed thematically within the previously presented themes. Further, the result is both based on a general impression of the information from all the interviewed teachers and a comparative study between the three different schools.
6. Results

6.1 The teachers’ education, knowledge and experiences from HIV/AIDS

We have interviewed 15 teachers from three different schools. Five of the teachers were from an urban school (one male), five were from a semiurban school (three male) and five were from a rural school.68

Teachers from the rural school had the highest formal education among the interviewed teachers. All of the teachers from the rural school had a Certificate for Secondary Education (O-level) and moreover, Grade A as the level of their Professional Qualification. The teachers from the semiurban school had the second highest formal education where three of the teachers had O-level and Grade A. Furthermore, had one teacher a Primary School Education (Stand.7) and Grade B and the last teacher had an Advanced Certificate for Secondary Education and Grade B. Finally, the teachers at the urban school had the lowest formal education, where four of the teachers had O-level and Grade B and one teacher had O-level and Grade A.69

The teachers were asked if they had been provided with any training about HIV/AIDS and the answers were similar between the schools. Four teachers at the urban school said that they had been provided training and three at both the semiurban and rural school had been provided training about HIV/AIDS. This means, in total, that ten out of 15 teachers had received training about HIV/AIDS. In general, the training the teachers had received were through seminars, workshops and teacher education.70

Moreover, the interviewed teachers have a lot of own personal experience of dealing with HIV/AIDS. This becomes evident through teacher UF3 and by her “…personal experience of HIV/AIDS. She say yes, she says yes. She said yes because she has even taken care of a relative and close, close ones until that person died so she knows how to take care of, she knows about all these things.”71

69 Transcription of interviews, p. 1, 3, 6, 8, 10, 12, 13-15, 17-18, 20-21, 23, 25 and 27.
70 Transcription of interviews, p. 2, 4, 7, 9, 11, 13-14, 16-17, 19-20, 22, 24, 26 and 28.
71 Teacher UF3, Transcription of interviews, p. 7.
13 out of 15 teachers had personal experiences from HIV/AIDS and had furthermore, taken care of a relative or close person that was or is affected by HIV/AIDS. All the interviewed teachers at the urban and semirural school had taken care of somebody close that was affected by HIV/AIDS, meanwhile three out of five had this kind of experience at the rural school. Five of the 13 teachers that had provided care had taken care of a brother or sister, four of the 13 teachers had taken care of a close friend, two had taken care of a child and two had taken care of a relative.⁷²

Our experience was that the interviewed teachers’ has substantial knowledge about HIV/AIDS. Asked about what she knows about HIV/AIDS, teacher UF2 says;

What she is saying is, what she knows about HIV/AIDS, first of all, it is about about HIV, That’s a person that lives with a virus, Human Immune Virus, that is what she knows about HIV, and for the case of AIDS, for her, what she is saying is, it’s a person who is already effected, and she has showing all the signs of the disease, you know. That’s, what to her it means about HIV/AIDS, and then she is saying that, she knows how to prevent, how to prevent against HIV/AIDS, and also she is saying, she knows how to, how the disease is infected.⁷³

Moreover, teacher SUM2, he responds to the same question and he is saying that ”…this is a Human Immune Virus, that is what he is understanding about HIV/AIDS, that it is infected by sexual intercourse, blood transfusion, sharing razorblades, etc. That is what he is saying. And it has no cure, yeah, and also it has spread to many places, to other places.”⁷⁴ Finally, teacher RF4, she says that what she knows about HIV/AIDS is;

…first of all she has given a definition of it, as far as it happen that, our body’s immunity is just low, so, that’s about that question about HIV/AIDS, and, it is infected by means of sexual intercourse, mostly and, it is difficult, to finally get HIV/AIDS virus, not just by eating with a patient or taking care of, you know, so, in general that is what she tolds us about, her understanding concerning HIV/AIDS. ⁷⁵

In general, the knowledge of the interviewed teachers about HIV/AIDS is substantial. One difference between the schools is that teachers from the urban school are giving more

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⁷² Transcription of interviews, p. 2, 4, 7, 9, 11-14, 16-20, 22, 24, 26 and 28.
⁷³ Teacher UF2, Transcription of interviews, p. 4.
⁷⁴ Teacher SUM2, Transcription of interviews, p. 14.
⁷⁵ Teacher RF4, Transcription of interviews, p. 26.
examples and describes HIV/AIDS more thoroughly than teachers from the semiurban and rural school. Although, the common impression is that teachers from all three schools have a lot of knowledge about HIV/AIDS.

About the question, how the teachers know about HIV/AIDS, the answers were similar between the three different schools. Except being provided training about HIV/AIDS (ten out of 15 teachers), other sources for information were according to the interviewed teachers; 14 teachers mentioned massmedia\textsuperscript{76}, eight teachers said that they know about HIV/AIDS because they had met and been talking with people that were infected by HIV/AIDS, two teachers said that they came to know about HIV/AIDS through contact and discussion with medical practitioners and finally one teacher mentioned spiritual/religious education as a source of information.\textsuperscript{77}

6.2 How the teachers educate about HIV/AIDS and their views on the possibilities of education to prevent HIV/AIDS

All the interviewed teachers are educating their students in questions concering HIV/AIDS. Moreover, 11 out of 15 teachers have classroom subjects about HIV/AIDS.\textsuperscript{78} Although, how the teachers educate about HIV/AIDS and in which ways differs from one teacher to another. The answers of the teachers have to be taken into consideration though, when it might be hard for the teachers to respond no to the question.

Teacher UF1 is using pictures and drawings showing how the disease is transmitted and she also teach and create classroom discussions about questions concerining HIV/AIDS. This teacher says that she use these methods because it is easier ”…to understand, by using, like drawings, using pictures, making discussions. So that they can know the intensity of the disease, so that they can know much about the disease”.\textsuperscript{79} Teacher UF2 is also using pictures in her education and except this, she is using books which provides stories that deals with HIV/AIDS. The same teacher also uses drama where the students are ”…creating some stories and then trying to act out these stories”.\textsuperscript{80} It is, according to this teacher, easier for the students to understand and remember through the use of the methods that she has mentioned.

\textsuperscript{76} TV, radio, newspapers, films, books and leaflets.
\textsuperscript{77} Transcription of interviews, p. 1, 4, 6, 9, 11-12, 14, 16-18, 20, 22, 24, 26 and 28.
\textsuperscript{78} Transcription of interviews, p. 2, 4-5, 7, 9, 11, 13-15, 16-17, 19-22, 24, 26 and 28.
\textsuperscript{79} Teacher UF1, Transcription of interviews, p. 2.
\textsuperscript{80} Teacher UF2, Transcription of interviews, p. 5.
Teacher UF3 is using “…sports and games like football, those sports, so they gather together the children to tell them about HIV/AIDS, then they can cooperate sports into it (HIV/AIDS), so it’s easier for them to understand”. Except from this, the same teacher also has classroom materials and subjects that she uses in discussions with the pupils. Furthermore, both teacher UM4 and UF5 is using sports and games in their education that are especially designed to increase the understanding about HIV/AIDS. Teacher UF5 explains “…those sports and games they are designed in a special way that there are some questions about HIV/AIDS which are asked to students, pupils, so there are spontaneous question right...so that is a sort of an interesting game which is specific designed to... understand about HIV/AIDS.” Teacher UM4 has, moreover, class programs and subjects that deals with HIV/AIDS.

Teacher SUM1 is teaching his students about HIV/AIDS through subjects in the class and through group discussions and by talking to the pupils about HIV/AIDS. Teacher SUM2 is using classroom subjects and a so-called peer education which is “…a group education, where they take those children in the same age and teach them in groups, and that’s PR-education”. The reason to why he has chosen to use peer education is because he thinks that it is “…easy to educate each other, and it’s a way through which people can learn how to protect themselves” Individual counselling and class room subjects are the methods that teacher SUM3 is using in his education concerning HIV/AIDS and the motives for doing so is that it is for the common good for the whole society. Teacher SUF4 and SUF5 are both teaching their students about HIV/AIDS through subjects in class. Teacher SUF4 is moreover, using a more creative way of education to transfer the knowledge about the disease to her pupils, when she is using different kinds of musical songs in that deals with HIV/AIDS.

In order to help her students avoid the problems with HIV/AIDS, teacher RF1 is teaching her students in the following ways; “…it is through discussions and peer education and peer educators, so they make discussion about teaching each other in groups, and number two is through singing some songs which are designed specifically to deliver the message about HIV/AIDS.” As teacher SUF4, also, RF1 is using especially designed songs to transfer

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81 Teacher UF3, Transcription of interviews, p. 7.
82 Teacher UF5, Transcription of interviews, p. 11.
83 Transcription of interviews, p. 2, 4-5, 7, 9 and 11.
84 Teacher SUM2, Transcription of interviews, p. 14.
85 Teacher SUM2, Transcription of interviews, p. 15.
86 Transcription of interviews, p. 13-17 and 19.
87 Teacher RF1, Transcription of interviews, p. 20.
knowledge around the disease her pupils. Teacher RF2 is using group discussions as a method to tackle HIV/AIDS, moreover, both teacher RF2 and RF3 are using stories in books that they provide to their students in order to shine light over questions concerning HIV/AIDS. Teacher RF3 say that she has chosen to teach about HIV/AIDS in this way because the community doesn’t yet have enough education while teacher RF2 say this concerning her motives; “…it prevents AIDS, so the topic, it is relevant, that’s one. Two, she says it is important, very important for the young ones to know about HIV/AIDS…because of the context, that the situation is existing now, so it’s important to teach them the aware of HIV/AIDS.”

Teacher RF4 is giving education about HIV/AIDS and provides individual counselling and the reason for her doing that is to try to prevent new ways of spread of the HIV/AIDS disease. Finally, the way teacher RF5 is teaching about HIV/AIDS is through explaining and by providing examples that relates to HIV/AIDS.

Furthermore, all the interviewed teachers were of that opinion that teachers have a responsibility to prevent the spread of HIV/AIDS. Though, even here it is important to take into consideration that it might be hard for the teachers to answer no to the asked question. The opinions on the possibilities for teachers to prevent the spread of the disease and to what content education can prevent the spread of HIV/AIDS divided the interviewed teachers.

In the urban school, teacher UF1 say that teachers has the possibilities to reduce and to take active measures in order to prevent HIV/AIDS but only ”…if they will be given some training, seminars, and other education programs. It will equip them with the ability to do that.” Teacher UF2 and UF3 are both of the opinion that teachers have the possibilities to reduce the spread of HIV/AIDS but they think that it can help to a certain extent and that the rest is up for personal and individual decisions. Teacher UF3 says the following:

…”for about 80 percent, education can be helpful to prevent the spread of HIV/AIDS. That’s what she is saying. So, she is saying that the rest twenty percent is upon somebody himself because even if she had been given him information and education but still he or she can decide to do otherwise so it’s, it’s a rather personal decision.

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88 Teacher RF2, Transcription of interviews, p. 22.
89 Transcription of interviews, p. 20-22, 24, 26 and 28.
90 Transcription of interviews, p. 2, 5, 7, 9, 11, 13, 15-17, 19, 21-22, 24-26 and 28.
91 Teacher UF1, Transcription of interviews, p. 3.
92 Transcription of interviews, p. 5 and 7-8.
93 Teacher UF3, Transcription of interviews, p. 8.
Teacher UF2 also urges that teachers should be given subjects to teach that relates to some parts about HIV/AIDS, for example; how it is spread, causes and how students’ can take preventative measures. Meanwhile, there are some teachers that believes that education not only can reduce but actually prevent the spread of HIV/AIDS, teachers UM4 and UF5 are of that opinion.  

Teacher UM4 says;

So, here he says to him there is possibilities for teachers you know, to prevent, not reduce, but prevent the spread of HIV. So, to him, education keep sending the message quick or fast, so once pupils are educated they can simply spread the knowledge to their fellow, the message can run quickly in the community. So, to him, he says for about 85 percent education can help from prevent…it’s easier for someone who has being educated to protect and take care of himself.

For the case of the semiurban school, teacher SU5 argues that teachers need to receive education and instruments to be able to prevent the spread of HIV/AIDS. This teacher says; “…she says that, that it’s possible, but they need some seminars and ways of getting knowledge so that they can transmit the knowledge to other people. So, we have to praise the lord of, supporting our ways through seminars and workshops”. Teacher SUM1 believes that teachers and education has the “…possibility just to reduce, and not to prevent” the spread of HIV/AIDS. The three remaining teachers (SUM2, SUM3 and SUF4) all have the opinion that education can reduce and prevent the spread of HIV/AIDS.

In the rural school, teacher RF3 say that the teachers has the the possibility to prevent the spread of HIV/AIDS, but it is important that they will be provided ”…education, sufficient education, be given seminars and workshops, be given some instruments and materials that they can work with, through providing education to people.” Teacher RF2 believes that teachers has the possibility to prevent the spread of the disease but she is also saying that it is important that the society, the common people and the students themselves contribute in the work to provide information about and to prevent HIV/AIDS. Teacher RF5:s opinion is that teachers have some possibilities to prevent HIV/AIDS, but she says that the government is the most important part and has the largest possibilities in the work to prevent HIV/AIDS.

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94 Transcription of interviews, p. 5 and 9-12.
95 Teacher UM4, Transcription of interviews, p. 9-10.
96 Teacher SUF5, Transcription of interviews, p. 19.
97 Teacher SUM1, Transcription of interviews, p. 13.
98 Transcription of interviews, p. 15-16 and 18.
99 Teacher RF3, Transcription of interviews, p. 25.
100 Transcription of interviews, p. 23 and 28.
Furthermore, teacher RF1 say the following about teachers’ possibilities to help prevent the spread of HIV/AIDS, ”…to some percentage they can but not much”. Finally, teacher RF4 believes that teachers and education has the possibilities to prevent HIV/AIDS. She explains; ”…what she is thinking about the possibility of teachers to prevent the spread of HIV/AIDS, it has, they have to proceed, on educating the young children about HIV/AIDS, that is what she says”.

We have asked the interviewed teachers at the three schools to what percentage they believe that education can prevent the spread of HIV/AIDS. The average percentage among the teachers at the urban school was 80 percent (range from 60 % to 95 %), while the average for the semiurban school was 79 percent (range from 50 % to 95 %). The result for the rural school is in comparison 68 percent (range from 50 % to 80 %).

6.3 HIV/AIDS-related issues in school

Theme three in this study deals with students’ sexual interactions in the investigated primary schools, which not only includes sexual interactions between students in school, but also sexual interactions between students and teachers working at the schools. HIV/AIDS can be transmitted through sexual interactions between people, and especially youths are one of the most vulnerable groups in the society to get infected by the virus. Moreover, sexual activity among students in schools can not only transmit the virus between students at school, but it can also increase the spread of the infection outside of school. Students that had become infected by the disease can through sexual interactions outside of school transmit the infection to someone in his/hers everyday environment. The virus of HIV/AIDS also transmits through breastfeeding from mother to newborn. Moreover, a young school girl that had to quit school because of her pregnancy can easily find herself in a dilemma, where the only way to receive salary seems to be through sexual activity, where she choose to prostitute. Prostitution is a risk factor to get infected by HIV/AIDS. Therefore, the number of pregnancy of young girls in school, not only predict the future of the pregnant girl, but it also produce a result of the occurrence of sexual interactions at the current school, which is of most importance in a study concerning HIV/AIDS related issues.

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101 Teacher RF1, Transcription of interviews, p. 21.
102 Teacher RF4, Transcription of interviews, p. 27.
104 Interviewguide 2:2, question 12-14.
The results from the teachers’ response on the questions about HIV-related issues in schools differed from the three primary schools. Three of the interviewed teachers in the urban school, argued that there were none of their students that had become pregnant in a period of three to four years. Teacher UM4 in the urban school decided not to respond to the question, when he only had been teaching at the current school for four months, therefore he found the question not relevant. Interesting is that the response from the first interviewed teacher at the urban school, UF1, differed from the three others. UF1 mentioned that there had been one school girl that had become pregnant in the period of three to four years, though this school girl continued her education, and also graduated. The school girl did not quit school due to her pregnancy. In summary, three out of four teachers in the urban school claimed that none of the school girls had become pregnant in a period of three to four years. Further, all of the five interviewed teachers in the urban school agreed on that none of the teachers in the school had quit working as teachers because of this matter, which means that there had been no teacher that had sexual interaction with a school girl that led to a pregnancy in a period of three to four years.

The presented result from the urban school differed from the results from the semiurban and rural school. In the semiurban and rural school all of the ten interviewed teachers agreed on that there had been occasions of school girls’ pregnancies, in a period of three to four years. Four of the interviewed teachers from the semiurban school, also agreed on that the girls that had become pregnant had to quit school due to their pregnancy, while SUM3 claimed “…not all.” Interesting is that the responses from the teachers in the semiurban school around the number of school girls that had become pregnant in a period of three to four years, deviated from each other, where SUM1 said four pregnancies, SUF4 mentioned five and further, SUM3 said eight that had become pregnant (the range in the teachers’ answers differed between four to eight school girls pregnancies). The randomly numbers in the teachers’ responses, are not depending on for how long they had been working as a teacher at the current school. Although, the numbers of school girls that had become pregnant differed

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105 Teacher UF2, UF3, UF5.
106 Transcription of interviews, p. 5, 7 and 11.
107 Transcription of interviews, p. 2-3.
108 Transcription of interviews, p. 3, 5, 7 and 11.
110 Teacher SUM1, SUM2, SUF4, SUF5.
111 Teacher SUM3, Transcription of interviews, p. 16.
112 Transcription of interviews, p. 13, 17 and 16.
in the answers from the teachers, we can conclude that there have been two pregnancies a year in the semiurban school.\textsuperscript{113}

Also the teachers in the rural school had hard to remember the exact data of pregnancies for the last three to four years. Teacher RF5 answered “…so that is for the two she remember from the current year, she can’t remember the previous”\textsuperscript{114}, an answer which reminded of the ones from teacher RF2 and RF4.\textsuperscript{115} Though, from the collected answers of the teachers RF1, RF2, RF4 and RF5 we could draw the conclusion that there had been randomly two pregnancies a year,\textsuperscript{116} which also correlates with the answer from teacher RF3,\textsuperscript{117} where she meant that there had been six pregnancies at the school for the past three to four years. And, as for the school girls that had become pregnant in the semiurban school, most of the school girls in the rural school had to quit school due to their pregnancy, where teacher RF1, RF3, RF4 simply gave the answer yes on the question of the number of school girls that had to quit school due to pregnancy. Teacher RF2 was more uncertain in her answer, comparative to the other teachers, while teacher RF5 was clear in her response when she answered that “…they quit because of the pregnancy, the pregnant ones, but for teachers no.”\textsuperscript{118}

All of the ten teachers in the semiurban and rural school, agreed on that no teacher had quit working as teachers in the school because of sexual involvements with a school girl that led to pregnancy.\textsuperscript{119} Moreover, for the situation around school girls’ pregnancies in the rural school, one of the teachers, RF2, explained that when a school girl become pregnant they call for school meetings.

…in most instances, what is normally happening they call, the school meeting, where as those parents of the girls that got pregnant, are called and they brought to the court so they may call and get the ones who have pregnated the schoolgirls, that’s what happens, so it is actually very difficult

\textsuperscript{113} Teachers’ answer on numbers of school girls that had become pregnant in the school, in a period of three to four years, where some teachers only remembered the previous while others remembered the past. SUM1 answered four, SUM2 answered six, SUM3 said eight, SUF4 five and SUF5 mentioned four.

\textsuperscript{114} Teacher RF5, Transcription of interviews, p. 28.

\textsuperscript{115} Transcription of interviews, p. 22 and 26-27.

\textsuperscript{116} Teachers’ answer on numbers of school girls that had become pregnant in the school, in a period of three to four years, where some teachers only remembered the previous while others remembered the past. Teacher RF1 mentioned two, RF2 said two, RF3 six, and RF4 and RF5 said two.

\textsuperscript{117} Teacher RF3, Transcription of interviews, p. 25.

\textsuperscript{118} Teacher RF5, Transcription of interviews, p. 28.

\textsuperscript{119} Transcription of interviews, p. 13, 15, 16, 18, 19, 21, 22, 25, 27 and 28.
to find a teacher that are involved with that…and most teachers. Yeah, and teachers is just the ones
to explain that they are involved with their daughters.\textsuperscript{120}

This sort of action that is described by RF2 may help to prevent the number of teachers that involve themselves in sexual interactions with school girls.

Two of the interviewed teachers, UF3 and RF2, also discussed another important issue around the spread of the infection of HIV/AIDS in school environment.\textsuperscript{121} In the urban school, as for the school in the rural area, there are students that are infected by HIV/AIDS. During the interviews both of the teachers conceived that the infected students in the schools did not get the infection in the school environment, but rather in their home environment. The teacher at the urban school explained “…that a 100 percent of the infected kids here they´ve been brought to here with the infection they were born that, that way by their parents. So there is none, none of the case of a kid that have got infected here”.\textsuperscript{122} Either the children, that are infected, have been infected from blood transfusion before being born, or they got the infection transmitted through breastfeeding their mothers. According to teacher RF2 the infection of the students can be a problem in the school context. She meant that the infected student can transmit the virus to other students in school, when the infected student interacts in games and plays that can cause external injuries. RF2 claimed for example that the infected student can transmit the virus, when the students are“… shuttering their pencils, sometimes they use razorblades so, they can in one way or another spread the infection”.\textsuperscript{123}

6.4 What kind of education and what kind of moral can prevent the spread of HIV/AIDS

According to teacher UF1 the infection of HIV/AIDS is ”…global…the diseases is persistent, it’s all over, in our families, and it´s everywhere”.\textsuperscript{124} Therefore, she continued ”…it is very important for pupils and children and everyone to know the exactly ways about the HIV/AIDS”.\textsuperscript{125} Almost all of the teachers interviewed had their own personal experience of the disease, where a family member, a relative or a close friend had been infected. The disease needs to be prevented, and the society has a responsibility to prevent the spread of the disease, and to reduce the numbers of people that are infected by HIV/AIDS. Theme four overlooks

\textsuperscript{120} Teacher RF2, Transcription of interviews, p. 21-22.
\textsuperscript{121} Transcription of interviews, p. 7 and 23.
\textsuperscript{122} Teacher UF3, Transcription of interviews, p. 7.
\textsuperscript{123} Teacher RF2, Transcription of interviews, p. 23.
\textsuperscript{124} UF1, Transcription of interviews, p. 2.
\textsuperscript{125} UF1, Transcription of interviews, p. 2.
the interviewed teachers’ opinions about how knowledge can be spread in the society to prevent HIV/AIDS.\textsuperscript{126} The theme is divided into two parts, where one part asks for the teachers’ view on what kind of education that can prevent the spread of HIV/AIDS, while the other part of the question asks for what kind of moral that is needed to prevent the spread of HIV/AIDS.

A high number, ten out of the fifteen interviewed teachers\textsuperscript{127}, considered the education students are receiving in school to be an important part in preventing the spread of HIV/AIDS, and teacher UM4 recognized education as “…once pupils are educated they can simply spread the knowledge to their fellows, the message can run quickly in the community”.\textsuperscript{128} He explained further, that you can time each student, that is educated about HIV/AIDS, with ten other people, because the educated student will spread the knowledge about the disease to his/her friends, family members and relatives, then you also can time that new number of people with knowledge around the disease to ten, when they spread the information to another ten. According to this, the knowledge about the disease will rapidly circulate within the society. In many parts the interviewed teachers also were sharing similar opinions about what kind of education in school that could prevent the spread of HIV/AIDS. The interviewed teachers stressed the importance of class- or informal education, where SUF5 suggested that education around HIV/AIDS should include both practical and theoretical parts. UF5 mentioned the importance of games or sports to transmit the information about the disease to the students, while RF2 said ”…to educate the people and through drama”.\textsuperscript{129} The examples given from teacher UF5 and RF2 can be a sort of practical education. There where also a teacher, SUM1, who desired education to directly provide knowledge related to HIV/AIDS, and moreover, in the discussion about what kind of education that can prevent HIV/AIDS, teacher SUM2 suggested that “…there should be as many subjects as possible, teaching or including the topics of HIV/AIDS, for example he has said the English subject and other subjects, so there should be a real incorporate of the topics about HIV/AIDS. That was his suggestion.”\textsuperscript{130} Teacher SUM2:s opinion differed from teacher RF1:s, when RF3 instead asked for one specific subject in school that educated pupils around HIV/AIDS.

\textsuperscript{126} Interviewguide 2:2 question 17.
\textsuperscript{127} Teacher UF2, UM4, UF5, SUM1, SUM2, SUM3, SUF4, SUF5, RF1, RF2 in Transcription of interviews p. 6, 9-10, 11, 13, 15, 16, 18, 20, 21 and 23.
\textsuperscript{128} Teacher UM4, Transcription of interviews, p. 9-10.
\textsuperscript{129} Teacher RF2, Transcription of interviews, p. 23.
\textsuperscript{130} Teacher SUM2, Transcription of interviews, p. 15.
A high number of teachers, nine out of fifteen, mentioned the role of the parents to transparent the knowledge about the disease to their children.\textsuperscript{131} According to RF1, as to the other teachers who discussed the role of the parents, the parents “…have their role to teach good morals to their children, so it’s about counselling about the parents”.\textsuperscript{132} Besides counselling the children around the disease, claimed the teachers, that the parents should give their children advice about HIV/AIDS. Teacher UF3 chose to criticize the parents’ role of today, when she mentioned that “…parents should be transparent to their children, you know, they don’t normally take initiative to talk to their children about HIV/AIDS or the spread, everything they normally leave to the teachers and other people”.\textsuperscript{133} But also she agreed on that the role of the parents is of importance to prevent the spread of the infection. Further, few of the teachers stressed the religion’s impact of the behavior of the people.\textsuperscript{134} Religious norms and values can help people to resist in being involved, or in proposing someone to be involved, to sexual activities. UF2 mentioned that rabbis could be helpful as educators and spread information about HIV/AIDS within the society:

…but also she is saying about informal education, the normal one, the local ones, which parents can take initiatives to teach daughters, sons, you know, even our, our local education rabbi ones told, for example, a girl, that is a grown up, she has taken a special care, somewhere, being educated about how to be a future parent, now, in a family, and have to take care of herself, and something like that, so she is suggesting for this kind of education, formal education and informal education they are very important.\textsuperscript{135}

Moreover, should, according to SUF4, education be provided to everyone.\textsuperscript{136} Though, this was an opinion that indirect was supported by most of the interviewed teachers, where education, individual counselling, knowledge and understanding about the disease, was suggested to be transmitted through seminars, workshops and trainings, but also through public meetings and public education.\textsuperscript{137} A number of teachers, five of fifteen, argued for the role of media to spread knowledge about HIV/AIDS to the people.\textsuperscript{138} For these teachers massmedia have impact on people. Teacher UF3 meant that “…the tv, and radio broadcast,
programs, materials, talking about HIV/AIDS should be kept on track so that people would being in a position to understand and listen and ask questions and do everything." This way of spreading knowledge around HIV/AIDS to the people, could help to prevent the spread of the disease. Teacher UF3, also chose to arise a critical aspect in her discussion of the media of today. She explained that there are false statements circulating around the disease, which maintains on how media choose to describe circumstances around the disease, or rather to ignore them.

…where the people die of HIV/AIDS they are not really mentioned even that they died because of HIV/AIDS, rather they normally talk about other diseases like the stroke maybe, or rather other diseases but not through HIV/AIDS. It’s rare to hear from the radio or from the magazine, newspaper that somebody has died because of HIV/AIDS. She says this myth should be abounded…that’s no good. 140

But except for this, the teachers that discussed the role of massmedia, also recognized the opportunity of media to spread knowledge around the disease. Media should discuss the subject, where the people have opportunity to listen and ask questions about the disease. Further, UF3 asked for the concerned infected people to be good models. The infected people should have a voice in the society, and explain to the people “…how they got HIV/AIDS, and how they live with that and what they’re doing and what should be done”. 141 Through this, the people will get the direct message from the infected people, and not only from people who are not infected in TV. Moreover, RF5 discussed the sexual moral in films, where she suggested that pictures in films, that create sexual tension, should be restricted. 142

For the case of traditional morals, the opinions from the teachers differed, where two of the teachers considered the Tanzanian morals, or African morals, to be the ideal ones within the society. 143 Teacher UM4 had a negative attitude against customs from other countries. He disliked that Tanzanian people were copying morals from foreign cultures, where according to him women dressed improperly; leaving parts of their body uncovered. This way of dressing can attract men to the woman, and the men can “…being ready to do anything to get that

139 Teacher UF3, Transcription of interviews, p. 8.
140 Teacher UF3, Transkription of interviews, p. 8.
141 Teacher UF3, Transkription of interviews, p. 8.
142 Teacher RF5, Transcription of interviews, p. 28.
143 Teacher UM4 and RF3 in Transcription of interviews, p. 10 and 25.
woman, just for the case of sexual satisfaction”. Therefore, teacher UM4 stressed the importance of the Tanzanian people to strive for the African culture, where people are wearing dresses that are covering their bodies. Also teacher RF3 claimed that traditional norms and attitudes can be helpful in preventing the spread of HIV/AIDS. In the opposite, teacher SUM2 discussed another perspective of African traditional norms and morals.

He is saying that…people should abandon unethical traditional norms, like […] drinking clubs, and […] our own, local traditions, like playing the drums, and dance, special dances, and things like that, so, all these things involving children and pupils, they like to be involved into some sexual interactions, related to that they soon get the infection.

Other traditional norms that should be abandoned, according to teacher SUF4 and RF2, is inheritance of widows, and also, RF2 mentioned, the medical practice of razorblades used by witchdoctors. Such Tanzanian traditions, that are described, can transmit the infection from one person to another. Moreover, should an injured person be blood tested before treatment in local hospitals. Another opinion around moral is the ones existing in nightclubs, discos and music concerts. According to teacher UF1 should meeting places like these be provided with contraceptives, like condoms. RF1 had another solution on how to prevent the spread of the disease, where she stressed that people “…should avoid those causative environments, which is a, to the, to the spread of HIV/AIDS, so it’s simply to avoid, to be in places like, like that, to immoralities that pass HIV/AIDS, to avoid those causative environments”.

144 Teacher UM4, Transkription of interviews, p. 10.  
145 Teacher SUM2, Transcription of interviews, p. 15.  
146 Transcription of interviews, p. 18 and 23.  
147 Teacher RF2, Transcription of interviews, p. 23.  
148 Transcription of interviews p. 3.  
149 Teacher RF1, Transcription of interviews, p. 21.
7. Conclusion

The results from this study show that the teachers from the rural school had the highest level of formal education and professional qualifications, compared to the teachers in the semiurban school which had the second highest level of education and professional qualifications, and the urban school where the teachers had the lowest level of education and qualifications.

Ten of the fifteen interviewed teachers had been provided training about HIV/AIDS, where four of the teachers belonged to the urban school, and the other six were divided at the semiurban and rural school. In general, the training the teachers had received were through seminars, workshops and teacher education.

All the interviewed teachers in the urban and semiurban schools had personal experiences of taking care of someone close or a relative that were infected by HIV/AIDS. Three of the five teachers at the rural school had the same experience by taking care of someone close that were infected by the disease.

In general, the teachers’ knowledge about HIV/AIDS is substantial. A difference in small scale between the schools, was that teachers at the urban school gave more examples and described aspects around the disease more thoroughly.

About the question how the teachers know about HIV/AIDS, fourteen of the teachers mentioned through mass media, eight teachers said that they received knowledge by contact and by talking to people who were infected, meanwhile two teachers had received information through discussions with medical practitioners, and finally there were one teacher who got information by spiritual/religious education.

Concerning education, all the teachers were teaching their students in questions about HIV/AIDS. Eleven teachers have classroom subjects dealing with HIV/AIDS. In general, the teachers educated their students in innovative ways around HIV/AIDS. In the urban school the teachers were, except traditional education, to a large content using methods as sports and games, pictures and drama which incorporated questions about HIV/AIDS. The teachers at the semiurban and rural school were using traditional education, approximately half of the
interviewed teachers at the semiurban school were using group discussions and some were using songs to educate the students about HIV/AIDS.

All the teachers think that teachers have a responsibility to prevent the spread of HIV/AIDS. Further, all teachers also believe that teachers and education can prevent the spread of the disease. Teachers at the urban school believe that education to 80 percent (range 60 % to 95 %) can prevent the spread of HIV/AIDS, while teachers from the semiurban school in average said 79 percent (range from 50 % to 95 %). The percentage for the teachers at the rural school was 68 percent (range from 50 % to 80 %).

Furthermore, the interviewed teachers’ wishes to receive more education provided through seminars and workshops concerning issues around HIV/AIDS. They also strive for school subjects that in parts relates to questions dealing with HIV/AIDS. The students themselves, their parents, the surrounding environment, and the government should also, according to the teachers, take their responsibility in the struggle to prevent HIV/AIDS.

The teachers at the urban school had the lowest formal education and professional qualifications in comparison to the other schools. Although, the teachers at the urban school gave more examples and described aspects around the disease more thoroughly than teachers from the semiurban and rural school. They were also, in comparison, using more innovative ways to teach around the subject of HIV/AIDS. We draw the conclusion that this depends on the fact that the urban school has better socio-economic possibilities than the semiurban and urban schools.

In the question concerning pregnancy, all teachers in the three schools agreed on that no teacher had quit working because of sexual interaction with a school girl that led to pregnancy. Further, in the urban school pregnancy among school girls were not considered as a problem, according to the teachers. Only one of the teachers remembers that there had been one pregnancy in the school during the past three to four years, though this girl did not quit school due to the pregnancy. In comparison, pregnancy is a problem in the semiurban and rural school, where all teachers responded that there had been school girls that become pregnant, and also quit school due to their pregnancy. The number of school girls that had become pregnant, in the semiurban and rural school is around two a year.
Without asking the teachers if there were students infected by HIV/AIDS in their schools a few teachers mentioned that they have infected children in the classes. Out of this, we draw the conclusion that it is not uncommon with infected students in the schools. This means that HIV/AIDS in many ways is a present problem in the Tanzanian school environment.

Concerning the results of what kind of education that can prevent the spread of HIV/AIDS, ten teachers recognized the education the students received in school to be important to prevent the spread. The teachers asked for both practical and theoretical education in schools, where HIV/AIDS related issues could be treated either as a single subject, or as a topic that would be submitted in all subjects. Further, one of the teachers suggested that education should be spread to the people in the society through educated students, where the one educated easily can transmit the knowledge about HIV/AIDS to his/her friends, relatives and family members. In this way the number of people who has the knowledge about HIV/AIDS will rapidly increase.

Further, one of the teachers directly stressed the importance of education for all people, while most of the teachers indirect supported this approach to education. Six of the teachers suggested that education around HIV/AIDS should be provided through workshops, seminars, and training, but also through public meetings and/or public education. Also massmedia was recognized by five of the teachers to spread the knowledge about HIV/AIDS. A high number of the interviewed teachers, nine out of fifteen, also asked for parents to be educators in the home environment, where they can give advice, knowledge and counselling to their children. Also people who already are infected can share their perspective on the disease. Treatment in local hospitals should also be considered with carefulness, where injured patients should be tested before treatment. Moreover, meant two of the teachers that religious education can have an impact on peoples’ behavior, where spiritual norms and values can help people resist in getting involved to sexual interactions.

In parts of the discussion of what kind of morals that is needed to prevent the spread of HIV/AIDS, the opinions of the teachers differed. One of the teachers claimed that people should avoid risky environments, while another suggested that dance- and music environments should be provided with contraceptives. Traditional norms and values in Tanzania could, according to two of the teachers, help to prevent the spread of HIV/AIDS. For example could properly dressing style reduce sexual tensions. On the other hand could
Tanzanian traditions, such as immoral dances, inheritance and the practice of witchdoctors increase the spread of the disease, according to three of the other teachers.

The Education Sector Development Program as a part of Tanzania Development Vision 2025 does not specifically discuss the relation between education and HIV/AIDS. It is though possible to find elements that is influenced by Paolo Freire and his view of pedagogy as liberalization. The document also contain parts of the educational philosophy that was created by Julius Nyerere. We believe that these pedagogical theories can increase the possibility for education to prevent HIV/AIDS.

In general, the teachers’ knowledge about HIV/AIDS is substantial and they also educate their students in innovative ways around the disease. In spite of this fact, we consider improvements in order to create an educational system based on substantial quality to be necessary. This could, in our opinion, lead towards a condition where education can be really powerful in the struggle to prevent HIV/AIDS.

In conclusion, we have found it to be an advantage not being a natural part of the cultural context that we have conducted our research within. We believe that this has resulted in us being able to perceive aspects and phenomenon that otherwise would have been difficult to perceive if being a natural part of the culture.
References


Electronic resources

Internet (2008-11-04) www.tanzania.go.tz/hiv_aids.html
Internet (2008-11-10) www.tanzania.go.tz/vision.html
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Interview Guide 1:2

Objective of the interview: School: U____ SU____ R____
Female:____ Male:____
Number of teacher:________

• What is your age?
  _______ years

• What is your level of Academic Qualifications?
  ____ Primary School Education (Stand.7)
  ____ Certificate for Secondary Education (O-level)
  ____ Advanced Certificate for Secondary Education (A-level)
  ____ Other? Mention: ________________________________

• What is the level of your Professional Qualifications?
  ____ Grade B
  ____ Grade A
  ____ Diploma in Education
  ____ Graduate

  Any other: _______________________________________

• Where were you trained as a teacher?
  Name of the College _________________________________

  Which year did you graduate as a teacher: ______________

  For how long have you been teaching in this school: ______

  Have you been teaching in any other school before?

  If yes, for how long: _________________________________
Interview Guide 2:2

1. What do you know about HIV/AIDS?
2. How do you know about HIV/AIDS?
3. Have you had your own experience from HIV/AIDS?
4. If yes, do you have any affected relatives or friends? Have you taken care of a close relative, bracket, son, daughter, wife or husband?
5. Have you been provided with any training about HIV/AIDS?
6. If yes, has it been through teacher training, massmedia, workshops, seminar, and rallies or through other means?
7. Do you educate your students in questions concerning HIV/AIDS?
8. If yes, in which ways?
9. Do you have classroom subjects about HIV/AIDS?
10. Why do you choose to teach around HIV/AIDS in this way?
11. Do you think that teachers have a responsibility to prevent the spread of HIV/AIDS?
12. How many female students have become pregnant the last 3-4 years?
13. Have they quit school because of the pregnancy?
14. How many teachers have left the school because of this matter?
15. What is your opinion about teachers’ possibilities to prevent the spread of HIV/AIDS?
16. To what content (percent) can education prevent the spread of HIV/AIDS?
17. What kind of education, and what kind of moral is needed to prevent the spread of HIV/AIDS?
Transcription of interviewed teacher UF1

T: The first question is age, yes. 48.

T: Question number two. In…Swahili education. Ok, it´s O-level. It´s part of Certificate of secondary education, yes.

T: Question number three. That is about the level of professional qualifications.

T: It is, ok. Grade B. Which is this one. Yes.

T: Question number four. It is, where you were trained as a teacher?

T: Tkuyu. The name of the college, It is Tukuyu. Tukuyu, this way. Tukuyu, Yes.


T: How long? 22 years. She has been in this school for 22 years.

T: It is yes. Yes, It is here. She has been teaching in another school. It is yes.

T: It is Four years. For how long. It is Four years. Ok.

T: So we come to our interview guide 2.2. Yes.

T: It is, How do you know about HIV/AIDS? Number 1.

T: Ok. She is saying. What she knows about HIV/AIDS. She know how it becomes, how it is infected, she knows how to prevent HIV/AIDS. She knows how it is existed. Yes. That is what she knows about HIV/AIDS. Yes.

T: Ok. Yes. She is saying that she knows how the disease is infected, and she knows how it is spread, and she knows how to protect or prevent HIV/AIDS, and she knows how to, to take care of infected ones. That is what she knows about HIV/AIDS. Yes.

T: So, I suggest when I am presenting the…I take note of them and then I translate to you, I give hint and later I present it to my standard language. Yes, that should be good. Yes?

T: And question number two. That is how do you know about HIV/AIDS.

T: Ok, then she says that how she comes to know about HIV/AIDS, because she is educating others about HIV/AIDS, so she is aware about that, and then she has said that she has even taken care of somebody who has gotten infected with HIV/AIDS. Yes.

T: So, let’s come to number three, yeah?

T: She is saying yes.

T: Question number four. And on number three she said yes. Number three is yes, and number four.
T: It is yes. Number four she is saying, if yes, has it been through, well, have you ever been provided with, If yes, do you have any infected relative or friend, she has said yes. Yeah.

T: Ok. Then for, for her it is a daughter. She says it is a daughter, she is telling. Yes, yes.

T: It’s number five now.

T: Any training? So it is yes.

T: Number six. Six.

T: So, It is through seminars. Yes. Seminars and then workshops. Yeah.

T: Now it is number seven, eeh?

T: It is yes.

T: Number eigth. If yes, how?

T: Ok. So, she is saying, it is through discussion, using picture and other drawings showing how the diseaces is transmitted, and by teaching. So, these are the ways which she is using to educate, hm, the students in, hm, so.

T: Number nine.

T: Ok. So number nine, it is yes. Number nine, it is yes.

T: Number ten.

T: Ok. Now, she is saying that, she has decided to, to use the ways that she is doing to, to educate about HIV/AIDS, beacuse the thing now, it is global, it´s everywhere, and children can simply go and learn from other people, so they should be taught in a correct way, you know, yeah, and also she is saying that pupils or children, they need to be put transparent, it is…normal, you know, by every, every child, and also she is saying that the diseases is persistent, it is all over, you know, in our families, and it´s everywhere. So it is very important for pupils and children and everyone to know the exactly ways about the HIV/AIDS, about the diseases, and also she is saying that it is easier to comprehend, to understand, by using, like drawings, using pictures, making discussions. So that they can know the intensity of the disease, so that they can know much about the disease. This is what she is saying. Yeah.

T: And, let´s come to number eleven, eh? Yes, Number eleven, yeah. Number eleven says.

T: She is saying yes, number eleven.

T: Number twelve.

T: So, she says she remebers one. One. It was the year before the last year. Ok, so to her she remembers one.

T: Number thirteen.
T: So, there was none. Actually, even that one which got pregnant, but she still did her examinations. Yeah, so there is none. Yeah.

T: Number fourteen.

T: Yeah, so, she is saying that, that possibility is, it’s possible, for the teachers to reduce or rather to take some active measures for the HIV/AIDS, but only if they will be given some traing, seminars, and other education programs. It will equip them with the ability to do that. Yes. That is what she is saying.

T: And number fifteen. It is.

T: So, she is saying that education can be helpful in preventing the spread of HIV/AIDS, she has given examples from those little children, you know, to the middle one, even to the big ones, so you may…finding one that knows very much about HIV/AIDS, he or she, that boy or girl can tell you much about HIV/AIDS. So, to her, she thinks that education can help much to prevent HIV/AIDS. Yeah.

T: Number sixteen.

T: It’s about type of education, kind of education, and what kind of moral that is needed.

T: Yeah, she is saying that, for the case of, what kind of education, she still stress on, seminars, and you know, trainings, and stuff like that, which will in turn help to prevent the spread of HIV/AIDS. To her, that is what she is saying. And for the case of moral, she is saying that, there shall be prevention of, this, discos, musical and stuff like that, whereby people are going together, and trying to, to make use of their youth there, you know, so, things like that she is suggestion that…being respected, especially for the children to, to the nightclubs and the music scene…things like that. That is what she is saying. So, it is done.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

Transcription of interviewed teacher UF2

T: Our first question, is question number one, it’s about age.

T: It’s 47. 47, yes.

T: Number two is about level of education. Level of academic qualification, number two.

T: O-level, it’s O-level. Yes.

T: Number three is about level of professional education.

T: It is this, grade B. This one.

T: Number four, It is Mpwapwa. Mpwapwa.

T: And number one is about the year. 1979. Yes, 1979.
T: For how long, have you been teaching in this school? It is eight years. Eight years.

T: It is yes, apart from eight years, It is yes.

T: She has been teaching at other schools for fourteen years. Fourteen years.

T: Now It is 2:2, 2:2.

T: Question number one.

T: What she is saying is, what she knows about HIV/AIDS, first of all, It is about about HIV, That’s a person that lives with a virus, Human Immune Virus, that is what she knows about HIV, and for the case of AIDS, for her, what she is saying is, it’s a person who is already effected, and she has showing all the signs of the diseases, you know. That’s, what to her It means about HIV/AIDS, and then she is saying that, she knows how to prevent, how to prevent against HIV/AIDS, and also she is saying, she knows how to, how the discease is infected. So, things like that, is what she is saying.

T: Question number two. It is.

T: So she says, to her, the way through which she came to know about HIV/AIDS, is through leaflets, various leaflets talking and explaining about HIV/AIDS, also some broadcasting information news, the radio and the television, and banners, you know, talking about HIV/AIDS, so all called them, the way of giving information, that’s how she come to know HIV/AIDS, and also through seminars. Yeah, things like that. That’s how she comes to know about HIV/AIDS. Yeah, that’s number two.

T: And number three. Number three.

T: She is saying yes, number three. It is yes.

T: Number four, If yes.
T: She is saying yes, and that was her sister.

T: Number five. It is about traing, or any means of.

T: She is saying yes, number five, It is yes.

T: Number six, if yes.

T: Ok, it’s workshop and seminars.

T: It’s number seven.

T: She is saying yes, number seven.

T: Number eight, if yes, by which ways, yes, if yes, by which ways.
T: Ok, yeah, she is saying that, she is using the following ways, one is book, reading, so there are some other stories in the books who talks about HIV/AIDS. So it is reading, you know, reading. Number two she say is picture rolls talking about HIV/AIDS, yeah, and number three she is saying is about, through drama, so they are creating some stories and then trying to act out those stories, that’s drama, ok, that ways she use to, to teach or educate children or students or pupils about HIV/AIDS. Yes.

T: Number nine, number nine. Having any subjects, relating or dealing with HIV/AIDS.

T: She is saying yes. Yeah.

T: Number ten. Why have you decided to, to teach HIV/AIDS in those ways you mentioned. Yeah.

T: Yeah, she is saying, in number ten, she has decided to make use of those ways or methods, because it’s easier for pupils to understand, so it’s easy to understand, and also she is saying it’s easy to remember, when someone reads, or someone act out, yeah, or someone looks at, so It is easier. That is what she is saying.

T: It’s number eleven.

T: Number eleven, she, she says yes, that teachers have the role to play in preventing HIV/AIDS.

T: It’s number twelve.

T: She says none. It is none of the student’s that has got pregnant in the three to four years, She doesn’t remember that It is any, she says none.

T: Number thirteen.

T: She says none, number thirteen, none.

T: Number fourteen.

T: So, she says that there is that possibility for teachers to, to take some preventive measures against the spread of HIV/AIDS, so that is possible, she is saying, and also she say that It is important that teachers are giving, subjects to teach which relates to, to some parts about HIV/AIDS, how to, causes, how it’s spread, how to take some preventive measures and how to, you know, they used to teach those subjects, and also they used to go to seminars, so, they are…she say, yeah. It’s number fourteen.

T: Now number fifteen.

T: Ok, she is saying that, for how much can education be helpful in the prevent of the spread of HIV/AIDS, for her she has putting It in to percentage, that is about 60 percent, education can be helpful to, to prevent the spread of HIV/AIDS, and she say, the rest 40 percent, is for personal decision, because they can simply know, about HIV/AIDS and all it’s fate, everything you know, but still…to take the way…so, that is what she is saying, yeah.
T: It is about moral and then what kind of education that is needed to prevent the spread of HIV/AIDS.

T: She is saying, for the case of, of what kind of education that is required to prevent the spread of HIV/AIDS, number one is class education, formal education, where as pupils or student’s are taught on how HIV/AIDS is coming out, because everything they are taught they are taught in class, that’s one of the types of education she is suggesting, but also she is saying about informal education, the normal one, the local ones, which parent’s can take initiatives to teach daughter’s, son’s, you know, even our, our local education rabbi ones told, for example, a girl, that is a grown up, she has taken a special care, somewhere, being educated about how to be a future parent, now, in a family, an have to take care of herself, and something like that, so, she is suggestion for this kind of education, formal education and informal education, they are very important.

T: And number two, for the case of moral, she is saying that, to her, it is important to know God, it’s about religious education, you know, can instigate ability to resist this sort of evils and may involving yourselves in to, and require that sort of habits, which also include proposing somebody to be involved to HIV/AIDS sort of behaviour. Ok, that is what she is suggestion. Actually it’s the end of our.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

Transcription of interviewed teacher UF3

T: Question number one. Age 46. It’s 46.

T: Number two. Question number two. O-level. It’s O-level. Yes.

T: It’s a number four. Marangu. Marangu.

T: Yeah, yeah. Graduation, 1984. 84.

T: For how long have you been teaching in this school. It’s eight years. Yes.

T: She say yes. She has … tought in another school. It is yes. Yes.

T: For how long…It’s nine years. Nine years.

T: It’s a guide two point two. What do you know about HIV/AIDS? She saying she knows about the virus and that it can generate. And she say that it’s an uncurable diseases … HIV and also how it, how it is infected she knows, and how to take care of infected people. She knows also, she says, she knows on how to not to segregate those who are, those who are infected, yeah, so she knows she told that.

T: She is saying that how she comes across knowing about HIV/AIDS it’s through seminars, … seminars, learning through relatives and close people who are been infected by the series and also listen to the radio and tv, newspaper, … and something like that, that how she’s come across learning about HIV/AIDS.
T: Question number three. It’s a… Yes or no? Personal experience of HIV/AIDS. She say yes, she says yes. She said yes because she has even taken care of a relative and close, close ones until that person died so she knows how to take care of, she knows about all these things yeah…So it was a friend. Okej.

T: And a she says yes. In this part, question number four.

T: And number five it’s a it’s about training…She says yes, now well if yes was it through teachers training (Swahili) massmedia, (Swahili) workshops, seminars (Swahili) Okej.

T: Number seven. Teaching your pupils, students about? She said yes. Because the … that subject on Wednesday and Friday. Yes. She said early in the morning. Early in the morning before class…before class hours teach pupils about HIV/AIDS. Early in the morning. Wednesdays and Fridays. So hope…that their brains are clear and free to receive material. Early in the morning, so it’s very good.

T: Number eight.. How, by which ways do you teach? Classrooms. She is saying that ways through which she is using to teach about HIV/AIDS it’s sports and games like football, those sports, so they gather together the children to tell them about HIV/AIDS then they can cooperate sports into it (HIV/AIDS) so it’s easier for them to understand. Then she says she has classrooms materials and subjects being told about HIV and AIDS. Those are …about discussion, having discussion about HIV/AIDS so these are the ways she saying that she use to teaches about HIV/AIDS.

T: It’s number nine. Question number nine. In mathematics there is no. So she says not really cause she is, she is teaching mathematics and mathematics to put a ideas about HIV/AIDS sometimes might be difficult, but she, she put on investigating the ideas in talking Swahili she is presenting her subject but not really having subject lets say for example science or KiSwahili they having some stories…about HIV/AIDS so it’s not that much really but she is cooperating that in her way of talking. Then she saying once she moralised to pupils about HIV/AIDS and trying to touch some ideas…. that what she is saying.

T: So it´s number eleven. She says very much.

T: She says none. There is none who got a pregnant a in the period of three to four years. Number thirteen it’s none.

T: Okej. She is saying that actually it’s, it’s not possible for them to prevent the spread of HIV/AIDS. It’s not possible. What is like to be possible it is to reduce the, lets say the read of, the read of the infection, the read of spread to reduce, but not to prevent, that is what she is saying and also she say that, you know for, for here having kids or children it’s, it’s can be easier to prevent while they are here, but in most cases even those kids who are infected, because there are some kids who are infected here, because even those kids who are infected it’s, it’s not that they, they got it here but it’s just because they through where they coming from, other where, they are born that way or so it’s not that it like easy to prevent but rather to reduce the read of the infection and also for here, they coming to the best but out of here then you know, the kid or the child is in the house of parents, grandparents or whatever so it can also be difficult that way.
T: It’s number fifteen. She saying that a 100 percent of the infected kids here they’re been brought here by the infection they were born that way by their parents. So there is none, none of the case of a kid that have got infected here. So that’s what she is saying. Number fifteen.

T: She says for about 80 percent, education can be helpful to prevent the spread of HIV/AIDS. That’s what she is saying. So she is saying that the rest twenty percent is upon somebody himself because even if she had been given him information and education but still he or she can decide to do otherwise so it’s, it’s a rather personal decision.

T: Number sixteen. So she saying for the case of education, and I think like seminars you know being provided about HIV/AIDS and … being spread everywhere about HIV/AIDS and the tv, and radio broadcast, programs, materials, talking about HIV/AIDS should be kept on track so that people would being in a post to understand and listen and ask questions and do everything. And also she say that those infected people should be morals. She said that they should be given time which means to explain themselves of how they got HIV/AIDS and how they live with that and what they’re doing and what should be done so that people who get the direct message from them and not just from tv, let’s say just from individuals who are not infected, so she asks for the concern infected people to be in the moral for the situation. And also she say that you know there is a myth here around the culture, where the people die of HIV/AIDS they are not really mentioned even that they died because of HIV/AIDS, rather they normally talk about other diseases like the stroke maybe, or rather and other diseases but not through HIV/AIDS. It’s rare to hear from the radio or from the magazine, newspaper that somebody has died because of HIV/AIDS. So she said this myth should be abounded that culture should be abounded, that’s not good. Rather those are the missing… she says but for the case of moral she said that parents should be transparent to their children you know they don’t normally take initiative to talk to their children about HIV/AIDS or the spread, everything they normally leave it to the teachers and other peoples…so she asking for the parents to be transparent. That’s what she says and she said about….

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

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**Transcription of interviewed teacher UM4**

T: The first question is a age, 46.

T: And number two, question number two it’s about education level. Education. O-level, it’s O-level.

T: Number three. Okej it’s this one, grade A. Grade A.

T: Number four, name of college. Tabura. It’s Tabura.


T: For how long have you been, so you got, it’s four, four months.

T: It’s yes. It’s fifteen years.
T: And guide a two point two. It’s number one. He saying that this is a prime diseases, it’s a new, you know, to the communities, and saying that it reduces the body immune, so that is what he knows about HIV/AIDS, and also this diseases has got no cure, you know, and there is no prevention, you know, it is that way it exists, and it is a killer diseases, that’s what he is saying and it doesn’t a just to choice age so that anybody can get it, you know adult, youth, children, anybody can get infected of HIV/AIDS that’s what he knows.

T: So now coming to question number two. How do you come to know about HIV/AIDS? So he is saying that he comes to know about HIV/AIDS through the educators who visited to the colleges teaching about HIV/AIDS, so it was easy for him to understand about HIV/AIDS but also through films that teaches about a the diseases working about the infected people, just looked at those films, as far as originally …skilled, born like you, that’s how the diseases it’s you know, infected and he say also he being at hospitals, try visiting hospitals… That’s how he knows about HIV/AIDS.

T: And question number four. He says yes. Yeah, and number four. He says yes, four. Last part he says no. So he says, it was, it was a time a friend who was infected of HIV/AIDS. So he would take some important roles, and he was infected of HIV/AIDS.

T: So for the question number five he says no. That he has never got any training of HIV/AIDS.

T: And number six, so this number six depends on number five, so if it is no and there is nothing we can move to number six.

T: So he says yes, number seven.

T: Number eight. So he says through the sports and the games they design in a way they keep teaching pupils about HIV/AIDS, that’s number one, and number two, he has some class programs and subjects you know, which has comprehension about HIV/AIDS…

T: So number nine. So number nine it is yes. So he say that a he teach HIV/AIDS in that way because it is easier to reach the message to all the people…everyone you know can get the message easier, that’s what he is saying.

T: And number eleven. He say that teacher got the key responsibilities you know, to get….to prevent the spread of HIV/AIDS, he says to him supportment 99 percent. Teachers are, you know preventing the HIV/AIDS.

T: Number twelve. He has stayed here four months so the question is three to four years, so he can’t, yes. Number ten.

T: Number thirteen has to him to be nailed, because he knows…, because he hasn’t been here.

T: Fourteen. So here he says to him there is possibilities for teachers you know, to prevent, not reduce, but prevent the spread of HIV. So to him education keep sending the message quick or fast, so once pupils are educated they can simply spread the knowledge to their fellows, the message can run quickly in the community. So to him he says for about 85 percent education can help from prevent, he says because if somebody doesn’t understand he or she can teach something right so it’s easy for that person to be infected, but for the case of
being educated it is easy for someone to prevent or protect himself from being infected. So he denies if that...for example...pupil who has been educated about sex, for example sexual involvement is about personal spread of HIV/AIDS he or she can take care of himself because of her being, having in, it’s like a scratches in the body, those, those waterlike material once they are involved into somebodies, scratches also that person easy can be infected, so he is trying to explain something like that. So he says it’s easier for someone who has being educated to protect, and take care of himself.

T: What kind of education and what kind of moral? So he says for the case of education, the formal education is pointed to, some point it’s a, he is saying for example of why having a, having each one having in mind nine hundred pupil, lets say each school, lets assume that ten once for example, in each I mean in each... it’s ten schools so when you times ten times nine hundred you get nine thousands so it’s like that, once nine thousands people those are the pupils educated about HIV/AIDS it’s...they can move out and spread the knowledge to the rest of the people so you can find yourself in what now you got almost every individual having education about HIV/AIDS, so to him it’s the full education which is very important you know 99 to prevent the spread of HIV/AIDS.

T: And for the case of moral. Okej, so he is saying that a, on part of morals it’s for the case of Tanzanians they have to take care of.... their Tanzanian morals, these African morals and not just coping from abroad from foreign cultures, on the lifestyles, also how the families are living, and he has giving examples for the case of dressing, that he’s you know. They should dress like the way people are dressing, lets say in other countries or some where else which isn’t African culture especially lets say leaving some parts of their bodies, just like the outside, and he has given example that if somebody just looking at that girl or woman who has just dressing that way, that person can simply get attracted and being ready to do anything to get that woman, just for the case of sexual satisfaction. That’s the story he was telling actually. That’s, he says should not be copied in that way, people should a stress and restrain themselves from their culture, which is African culture, the way of dressing properly and not leaving any part just the bare. And you know I think the outside somebody can simply stay bare in one or two ways and it doesn’t bring any problem, but that what he is saying, but here it is a problem, I mean they should you should cover the all of your body, if otherwise let’s say, even let’s say pants outside, or underwear outside or something like that it’s a problem actually, they can try their instinct they can, so that they get that, you know, satisfying their sexual desires actually that’s... yeah. So it’s done here.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

Transcription of interviewed teacher UF5

T: What’s your age? 47
T: It’s 0-level,
T: Three A, Okej
T: Name of College? Mtwara
T: 1984
T: Seven years

T: She says yes So it’s twenty three years. Twenty three years.

T: So interview guide two point two. How do you know about HIV/AIDS question number one. So what she know about HIV/AIDS. She has given …little…about HIV/AIDS ….She has just said what she knows about HIV/AIDS.

T: Question number two. So she says that she come to know about HIV/AIDS through … seminars, massmedia, and certain scenarios around HIV/AIDS that’s how she comes to know about HIV/AIDS.

T: So number three. Yes Number three yes.

T: Number four. So four that’s one yes.

T: So it’s a friend yes. She says yes. That’s number six.

T: It’s number seven. So she say yes. Teaching about HIV/AIDS. So she think that through sports and games. And those sports and games they are designed in a special way that there are some questions about HIV/AIDS which are asked to students, pupils, so there are spontaneous question right … so that is a sort of a interesting game which is specific designed to … understand about HIV/AIDS. (about the game): No, it’s, no it’s not in the classroom but outside the classroom. It’s a sort of a game that it’s designed you know, to increase the understanding of HIV/AIDS. Then they get question and they answer. Yes questions and answers, questions and answers.

T: So number nine, she say no. She doesn’t have subject in classrooms which teaches about HIV/AIDS.

T: So number ten also because she that depending on she answer, so we escape on number ten, turn to number eleven.

T: She says yes.

T: Number twelve. She says no. And, so for the number twelve and the number thirteen they are depending on each other. So there is none gotten pregnant so there is none of leaving school of those matters. And this the end.

T: So number fourteen. So she said yes that is that experied to, yeah it’s number fourteen. So there is possibility for teachers to prevent the spread of HIV/AIDS. So the heights about 95 percent. She thinks that education can be helpful to prevent the spread of HIV/AIDS.

T: So she saying that for the part of the education there are of a HIV/AIDS, informing can be helpful to prevent the spread of HIV/AIDS. But also sports, games can be helpful. She saying also for the part of massmedia, … apart through education in arrow to prevent the spread of HIV/AIDS but also she saying that a films. She has chosen films about people can learn from that and for the case of morals she says that they learn from advice and ideas from parents and
the society in general and to prevent the spread of HIV/AIDS. And also spiritual education, spiritual counselling or … can prevent the spread of HIV/AIDS. This is what she says.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

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Transcription of interviewed teacher SUM1

T: The first part. Look at the first part. Yeah, It is about personal information. It is about personal information. Yeah, it is 1:2, interview guide 1:2. Number one, the objective of the interview. Number one, is age.

T: 53.

T: Ok, primary school education, here. Primary, yes.

T: Ok, it is this one. Grade B. Yes.

T: It is MpwaMpwa.


T: Yes, 8 years. So it is 8 years.

T: It is yes. The next one, it is yes.

T: Yes, 22. 22 years. It is 22 years.

T: Now coming to interview guide 2:2, yeah.

T: Question number one.

T: Question number two.

T: He is saying through massmedia, that is question number two. Well, question number one, he said, what he knows about HIV/AIDS, it is a killer diseases, that is number one, number two, that has no cure, and number two, he just know about HIV/AIDS…education is provided to pupils about it, so the whole thing he teach he knows about HIV/AIDS. First, question number one is concerned. And now, question number two. It is asking how does he know about HIV/AIDS. He says through massmedia.

T: Yeah, he is saying that apart from massmedia, it was, looking at people who was infected by HIV/AIDS, and also he has seen people die from HIV/AIDS. That is how he knows about HIV/AIDS. Yeah.

T: Number three.

T: Ok, yeah. Number three, it is yes.

T: Number four. It is yes. For four, part a, it is yes.
T: So he is saying here, about 4, part b, to him, It is a young brother and a sister.

T: Number five is yes. So he got it through teachers education. Yes.

T: Question number seven, it is yes.
T: Question number eight.

T: Yeah, so he is saying, number eighth, It is through subjects in the class, that one…apart from science that is related to HIV/AIDS, so that they are teaching from that lesson, through that subject, and also through groups and group discussion, and talking to, to pupils and teach about HIV/AIDS. Yes, that is what he is saying.

T: Number nine.

T: It is yes, number nine.

T: Number eleven.

T: Number eleven, he is saying yes.

T: It is four, number twelve. Four, number twelve.

T: Number thirteen.

T: Number thirteen, It is yes.

T: Number fourteen.

T: He is saying, number fourteen, there is a possibility just to reduce, and not to prevent.

T: Number fifteen.

T: So, he is saying 50 percent.

T: And, he is saying, in case of morals which are required, It is, just to give good morals, for the parents, give their advice and counselling to their children about HIV/AIDS. And for the case of education, it is just really direct education, which is directly related to HIV/AIDS. So, that is what he is saying.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

Transcription of interviewed teacher SUM2

T: The first part is about personal information.

T: 27. 27, yes.

T: A-level.
T: It is, yes, grade B.

T: So, he is also doing a diploma. So, he is also doing a diploma, but he is having a break now. So rather we put it in a…

T: Morogoro, It is Morogoro, yes.


T: Three and a half year.

T: So, It is yes.

T: Three months.

T: Now, interview guide 2:2, yes.

T: Question number one.

T: Yeah, he is saying that this is a human immune virus, that is what he is understanding about HIV/AIDS, that it is infected by sexual intercourse, blood transfusion, sharing razorblades, etc. That is what he is saying. And it has no cure, yeah, and also it has spread to many places, to other places.

T: Question number two.

T: He is saying that he knows about HIV/AIDS through peoples talkings, that is what he knows, and…somone who is infected, and also through massmedia and what he reads. Yeah.

T: So, number three.

T: He is saying yes, number three, number three, he is saying yes.

T: Ok, number four A, It is yes.

T: So, It is a relative that was a merril, that was infected. Number four B, A merril, he has already taken care of a merril who was sick.

T: Number five.

T: Number five, It is yes.

T: Yes, so, It is through teachers college education and also seminars. That is what he is saying. Yes.

T: Yeah, then he is saying, number eight, that It is through class room subjects, that’s how he comes and teach the pupils, and also through Peer-eduaction, It´s a group education, where they take those children in the same age and teach them in groups, and that’s PR-eduaction.

T: Number nine.
T: Nine, It is yes, number nine, It is yes.

T: Ok, now he is saying, the ways to, because It is easy to educate each other, and it’s a way through which, people can learn how to protect themselves, that’s why he has said, to make use of those methods that he has mentioned previously.

T: Number eleven.

T: Number eleven, he is saying yes.

T: Number twelve.

T: He says It is about six, number twelve. Yes.

T: Number thirteen, he is saying yes.

T: So, he is saying yes.

T: Number fifteen.

T: He is saying about 70 percent.

T: Number sixteen.

T: So, he is saying that people should abandon unethical traditional norms, like, he is saying drinking clubs, and, you know, we have our own, local traditions, like playing the drums, and dance, special dances, and things like that, so, all these things are involving children and pupils, they like to be involved in to some sexual interactions, related to that they soon get the infection. So, he suggesting that way, for the case of morals.

T: So, for the part of education, he is saying, there should be a…form of education, at home and everywhere, and at school, about HIV/AIDS, the subject of HIV/AIDS.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

T: First, one of his suggestions, he has given suggestions, there should be as many subjects as possible, teaching or including the topics of HIV/AIDS, for example he has said the english subject and other subjects, so there should be a real incorporate of the topics about HIV/AIDS. That was his suggestion.

Transcription of interviewed teacher SUM3

T: One point two. Interviewguide one point two. Question number one. It’s nine, yes.

T: O-level.

T: 2005
T: Three years.

T: No.

T: Interviewguide two point two. He is saying virus infect the body immune, that´ s number one.

T: Number two. The most infected ones, are the youth, but also children, the younger ones through their mothers they can be infected, that´s what he saying.

T: He is saying by looking at those infected people and also talking to family, having talking to medical practitioners (de som utför medicinsk vård)...explaining to him about that, and the massmedia.

T: Number three. Number three he says yes.

T: Number four A. Four he is saying yes.

T: So it´s a near relative. Number four B.

T: Five. Number five no.

T: So if it is no, number six eh.

T: Yes. Number seven it is yes.

T: Number eight, so it´s class subject. Concouling.

T: Number nine. It is yes.

T: He says that...is best for the environment, because the environment itself is a choosing in a way that it is easier to seduce and cheat to these young ones so that they are attracted by other ones into sexual inherit, something like that. That is what he is saying.

T: Number eleven, he is saying yes.

T: It´s like eight.

T: He is saying no. Not all.

T: Number fourteen. So it´s yes. That they got possibility.

T: Okej, it´s like 95 percent he say. Yeah.

T: Number fifteen. It´s morals. So he´s saying for the case of education sort of kind of education it is a that informal one. They teach ...grow up the kids, children...it is proposal. And for the case of moral it is ...education, concouling, it is treatment, something like that. That is what he is saying.
T: Any question you want to ask? He is talking about some problems in this area, environment, especially in this school…, so he is asking if I told, if there is any possibility to support that situation so that education can keep on running through this area.

**Transcription of interviewed teacher SUF4**

T: One point two, question number one. 51.

T: O-level.

T: Grade A.

T: Nhoaba.

T: 98.

T: One year.

T: It is yes.

T: Four years.

T: Interviewguide two point two. So two…it infect the body immune, and it is a, it can be spread by … ways. That’s what she knows about this.

T: … through massmedia, and getting, looking at transparence of HIV/AIDS infected ones, and seminars.

T: Okej, it is yes.

T: It’s relative. A young sister.

T: Five, it is yes.

T: Through seminars.

T: She is saying yes, number seven.

T: She is saying through songs, … some songs… to teach about HIV/AIDS, like subject in the class.

T: Number nine. So after looking at the impact of HIV/AIDS… those who are infected … bothers to protect themselves against HIV. This is what she is saying about HIV.

T: Number eleven. She is saying yes.

T: Like five.

T: She is saying, so she says yes.
T: How many has leaving school because of this matter? So she is saying none.

T: So she is saying yes, number fourteen.

T: Fifteen. She says 90 percent.

T: So she is saying that for the part of education, …education it is through massmedia, and meetings and in at home she said at home and creating places of understanding about HIV/AIDS, talk to all, education should be even for all. That is what she say. And for the case of morals it’s a, those … morals should be let, should be abounded she said, like women and function she said, which also promoted the spread of HIV/AIDS. …In heritage, you know there are some occasion here, in HIV/AIDS, women yeah. Once brother’s wife has died and then another one, the youngest one or, can take that woman for wife, you know, it’s like that.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

Transcription of interviewed teacher SUF5

T: Question number one, interview guide 1:2.

T: 52.

T: O-level.

T: Grade A.

T: Korogwe. Korogwe.


T: 8 years.

T: Yes.

T: 20 years. Yes.

T: Ok, interview guide 2:2. Question number one.

T: Question number two. She is saying that HIV/AIDS is an uncurable discease.

T: Question number two.

T: Then she is saying through seminars and massmedia, and reading books, and leaflets.

T: Number three.

T: She says yes. Number three.

T: She says yes.
T: Yes, she has not directly taken care of a patient, a HIV patient. But she was indirect, rather caring for people, indirect, yes.

T: Ok, number five.

T: She says no, number five. So, she has not really attended seminar or rather workshop, rather it was this people coming here, and talks in a way that, very…so to her that’s not really seminar, and, she suggest to get a seminar, or workshops about HIV/AIDS.

T: And so, number six is not needed. Question number six, yes?

T: Number seven.

T: She says yes, number seven.

T: Number eight.
T: Class room subjects, she says, only class room subjects. Yes.

T: Number nine.

T: She doesn’t have, no. So, number nine, It is no.

T: So, she doesn’t have a subject, relating to HIV/AIDS in the class.

T: And, I wondering if question number ten is? So, what shall we do with question number ten? Because she, she doesn’t.

T: Ok, so, number eleven.

T: She says yes. Much more!

T: Number twelve.

T: So, she says about four.

T: So, She says yes.

T: So, she says no, for that question of teachers.

T: She says yes. So, she says that, that it’s possible, but they need some seminars and ways of get knowledge so that they can transmit the knowledge to other people. So we have to praise the lord of, supporting our ways through seminars and workshops, and also…ways of getting knowledge.

T: Yeah, number fifteen.

T: She says, It is about 90 percent.
T: She is saying practical and theoretical education is helpful to prevent the spread of HIV/AIDS. Practical and theoretical education.

T: And for the case of morals, so, she says, for the case of morals, it’s a way of growing up children that can be protected through…HIV/AIDS, that can prevent the spread of HIV/AIDS. But for the case of parents, it’s very difficult, she say that, It needs, to show, for example, by, video or videoshows, real, real environment, somebody wants, he or she’s looking at the video or the recorded tape…can make an impact and stop the spread of HIV/AIDS. Although, It is difficulties, she is saying.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

Transcription of interviewed teacher RF1

T: That’s question number one, got some information. Coming to number one, it’s about age. 42. Number one 42.

T: Number two, education. It’s O-level.

T: Number three. Professions, grade A.

T: Number four. It is Morogoro.

T: 1996.

T: Three years. Yes.

T: Two years.

T: Interviewguide two point two. Question number one. Yeah she is saying what she knows about HIV/AIDS it’s a, it’s an uncureable diseases, that’s what she knows, it’s a disease that has killing (glo) people, yeah. That’s what she knows, she says.

T: Question number two. You got two point two. Okej, now she is saying for question number two, it’s trough massmedia, media, and also attendance, seminars, and radio…about HIV/AIDS.

T: Question number three. She said no in question number three. So if it’s no for number three then number four we might be having some problems but let me ask her. So we leave number four.

T: Number five. She says yes. Seminars.

T: Number seven. She says yes.

T: Number eight. She is saying number eight it is through discussions and peer education and peer educators, so they make discussion about teaching each other in groups, and number two is through singing some songs which are designed specifically to deliver the message about HIV/AIDS.
T: Question number nine. She says yes.

T: Number ten. She says to help pupils to avoid the problem with HIV/AIDS.

T: Number eleven. She says yes.

T: Number twelve. She says two.

T: She says yes.

T: Number fourteen. Yeah. So she says in this part about the possibilities of teachers to help prevent the spread of HIV/AIDS that to some percentage they can but not much. … Yeah.

T: She says 50. 50 percent.

T: Yeah, now she’s saying part of morals which are required to prevent the spread of HIV/AIDS first of all they should, they should avoid those causative environments, which is a, to the, to the spread of HIV/AIDS, so it’s simply to avoid, to be in places like that, to immoralities that pass HIV/AIDS, to avoid those causative environments and also to be patience in seminars,…seminars. Then she says, and also parents have their role to teach good morals their children, so it’s about concouelling about the parents, and for the case of education she says there should be a specific subject that will…, that will teach around HIV/AIDS and now they don’t have the subject, …they only having some topics sometimes, so she is suggesting that subjects which is about HIV/AIDS to help the children about some understanding about HIV/AIDS. That’s what she says.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

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**Transcription of interviewed teacher RF2**

T: Now coming to interviewguide it is one point two. And it’s about personal information, coming to question number one. 59.

T: It’s O-level. Question number two.

T: And number three. Okej, it is A.

T: Number four. Fourteen months.


T: It’s eleven years. Eleven years.

T: It is yes.

T: Miyaka. Sabinatato.
T: So it is two…

T: Coming to interviewguide two point two. Question number one. Now she is saying, now she is saying for question number one. She knows about HIV/AIDS it’s a killer disease and it has no cure, that’s one, and also she says it is important to provide education for the people to prevent themselves against HIV/AIDS. That’s what she knows about HIV/AIDS.

T: Then coming to question number two. She is saying that a, for question number two it is trough massmedia, seminars, attendance of seminars, and spirit education that’s how it comes she knows about HIV/AIDS.

T: And now to number three. So she says yes. Number three.

T: It is yes, four A.

T: It is yes.

T: So she says she has ever cared for a younger sister who was affected. Yeah.

T: Question number five. She says yes. Yes.

T: Question number six. Massmedia, teachers education, seminars, workshops, yeah. And all this was, that’s okej.

T: Then number seven. She says yes.

T: Yes, yeah now she saying that she used to teach by using books, and discussion in groups and because she has those young ones started at three, so…picking up further to teaching about HIV/AIDS, so what she is doing having these small, small groups and discussions and… books.

T: Number nine. Number nine it is yes.

T: Number ten. She is saying that a, she has decided to teach that way about HIV/AIDS because it prevents AIDS, so the topic, it is relevant, that’s one. Two, she says it is important, very important for the young ones to know about HIV/AIDS…because of the context, that the situation is existing now, so it’s important to teach them the aware of HIV/AIDS.

T: Number eleven. So she says yes.

T: Number twelve. Then what she says, one she remember for the present here, it’s about two, but for the previous here she can’t remember, so it is now two.

T: So she says she isn’t sure.

T: So she says no, about that question of teachers.

T: So she says a, that what is normally happening. It’s not the fault of teachers, you know, in most instances, what is normal happening they call, the schoolmeeting, where as those parents of the girls that got a pregnant, are called and they brought to the court so they may call and
get the ones who have connected the schoolgirls, that’s what is happens, so it is actually very difficult to find a teacher that are involved with that... and most teachers. Yeah, and teachers is just the ones to explain that they are involved with their daughter.

T: Now she is saying it’s important for the teachers to provide education about information of HIV/AIDS to the pupils..., that’s number one, number two, she advices on a regular about HIV/AIDS. And not only for the teachers but also for the people, they should “gulp” the attitude of taste.... But also she say that it is important even for the pupil, the students to, context, because she’s leaving the next…level they have got one pupil who is infected of HIV/AIDS… and it is also known something like that she’s, I mean, that kid is infected, but nobody to take care of, to precude his where about and...he or she’s just surrounding on thing, his one things so maybe in one way or another it can happen that even there maybe cause of playing and doing what they can be infected to. Yeah, yeah, yeah. Like shuttering their pencils sometimes they use razerblades so, they can in one way or another spread the infection, so that’s what she is suggesting.

T: Number fifteen. She suggesting it’s about 80 percent. 80 percent.

T: Now she is saying for the part of morals which is quite to prevent the spread of HIV/AIDS, first it is a to promote, to do some promotions, to educate the people and through drama and seminars, that what she says and in having in case of a..., you know from..., coming from their husbands..., because of HIV/AIDS. If find a brother that is... let... by wife, so she says that should be abounded, and also she says those witchdoctors or ...doctors in environment especially they use some methods which are not apropriate like sharing of razerblades, so she is suggesting that that should also be abounded, and also she is added on morals and decision, that decision also involve sharing of razerblades..., so all those things to should be left to prevent the spread of HIV/AIDS. But for the case of education she said that a informational education....

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

T: She is adding about in case of accidents it happens that a, sometimes, the blade they use, those a.... So that blad which is a, which is a, which is a moving around, so it is easy for someone to get the infection. So what she is going to ask is in case of an accident it’s important to take test first of those who are injured to make sure there is no..., there is no..., once you are.... to prevent...that’s what she say.

Transcription of interviewed teacher RF3

T: Now, coming to interview guide 1:2. The first part is about personal information.

T: And now, question number one. 45, question number one.

T: Question number two, O-evel, Ok, it’s O-level.

T: Number three. It’s grade A.

T: Question number four. MpwaMpwa.
T: 1981.

T: 10 years.

T: Yes.

T: Ok, 17 years. 17 years, Yes.

T: Interview guide 2:2.

T: Ok, now she say that, what she knows about HIV/AIDS, it´s, an uncurable disceases, it´s an uncurable disceases, it´s not even a vaccination, so if you are infected actually...yeah, that is what she say.

T: Number two.

T: So, It is through massmedia and workshop, and visiting and looking at infected people. That´s number two.

T: Number three.

T: Number three, she says yes.

T: So, four A, also It is yes.

T: So, she has taken care of a sister.

T: Number five.

T: She says no.

T: So, question number six, doesn´t apply.

T: Number seven.

T: Number seven, she says yes.

T: Number eight.

T: Yeah, So, she says that It is through reading some stories, she is teaching kiswahili, so there are some stories that she use to read. That is the way that she is teaching about HIV/AIDS.

T: Number nine.

T: It´s kiswahili, yes. Ok.

T: So, she say that, she has decided to use that way because, the community, has not yet enough education about HIV/AIDS. So, she want´s to top up.

T: Number eleven.
T: She says yes.

T: Number twelve.

T: It’s about six. So, she says six.

T: She says yes.

T: The question about teachers, she says no.

T: Yeah, she is saying that, yes, teachers can take role in, possibility of preventing the spread of HIV/AIDS, and they should be given education, sufficient education, be given seminars and workshops, be given some instruments, and materials that they can work with, through providing education to people.

T: Number fifteen.

T: So, she says for about 80 percent, if the education will be provided in a appropriate way.

T: Number sixteen.

T: Now, she is saying that, for the case of education, the public education, public meetings, are important to provide much about, a prevention of spread of HIV/AIDS, also individual counselling, can also be helpful to prevent the spread of HIV/AIDS.

T: But also, for the case of morals, she says, that our norms and values, especially the traditional ones, can be helpful to prevent the spread of HIV, because normally we had those ones and, It was important, they used to institute, the youth and the pupils to involve in some inmoral activities, and, that way, It can prevent the spread of HIV/AIDS, so she says.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

Transcription of interviewed teacher RF4

T: Now coming to, this is number four, it´s interview guide 1:2, the first part is about personal information, now coming to question number one.

T: 45.

T: O-level.

T: Ok, grade A. Grade A.

T: Botimba. Botimba.

T: 1981.

T: It’s 20 years.
T: Yes.

T: Ten months, so, she has mostly been here.

T: Ok, interview guide 2:2.

T: And now she is saying, number one, what she knows about HIV/AIDS, first of all she has given a definition of It, as far as it happen that, our body’s immunity is just low, so, that’s about that question about HIV/AIDS, and, it is infected by means of sexual intercourse, mostly and, it is difficult, to finally get HIV/AIDS virus, not just by eating with a patient or taking care of, you know, so, in general that is what she tolds us about, her understanding concerning HIV/AIDS.

T: Now coming to question number two.

T: Now she says, she says through massmedia and leaflets, that’s how she comes to know about HIV/AIDS.

T: Question number three.

T: Now, she says no.

T: And now, question number four is not applicable then.

T: Question number five.

T: Now, she says no, number five.

T: Number six, so, number six is not applicable too.

T: Now, number seven.

T: Now, It is yes.
T: Number eight.

T: Now she is saying that, through counselling, she give counselling to the young ones and giving education on HIV/AIDS.

T: Number nine.

T: So, It is yes.

T: So, she say that, she is teaching that way, so that to prevent, new ways of spread, new spread, yeah, and it’s a national and international problem, a national disaster. That’s why she has decided to teach that way.

T: Question number eleven.

T: She says yes.
T: Number twelve.

T: She has forgotten for the previous data, and now what she knows or what she remembers is, for the current year and that is two. Two, yeah.

T: Now she says yes.

T: Now the question about teachers, It is no.

T: Number fourteen.

T: Now, she is saying that, what she is thinking about the possibility of teachers to prevent the spread of HIV/AIDS, It has, they have to proceed, on educating the young children about HIV/AIDS, that is what she says. Yeah.

T: Number fifteen.

T: It is about 80, she says 80 percent.

T: Ok, now she say that, for the case of education, is that from massmedia is, sufficient, It is very helpful to prevent the spread of HIV/AIDS.

T: But, for the case of morals, now she says, if parents or guardians, should take their role in counselling and provide education to their children and to those around them, this can be helpful in reducing the spread of HIV/AIDS, but also, she has said that we should insist on good morals at home, so, good morals should start at home, that can prevent the spread of HIV/AIDS.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

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**Transcription of interviewed teacher RF5**

T: Coming to interviewguide one point two the first case is about personal information coming to question number one. 55.

T: O-level.

T: Tabura.

T: 1975.

T: 30 years.

T: 49. Yes

T: It´s two years.

T: Now interviewguide two point two, question number one. So she says it´s an uncureable diseases that´s what she knows about HIV/AIDS.
T: Question number two. Yeah now it is through stories, other patients, massmedia, that’s how she comes across to know about HIV/AIDS.

T: Number three she says yes.

T: She says yes, four A.

T: ….in children especially, so sons and daughters rather.

T: She says yes.

T: So it was a seminar.

T: Yes.

T: Number eight. Now she says only by explaining, and giving some examples, that what she is saying.

T: So she says no, and if nine is no, what about ten? Yeah.

T: Eleven. I mean they have that, very small a, okej.

T: 2004. So that is for the two she remember from the current here, she can’t remember the previous.

T: Now she say that a teachers alone come up with that and….

T: Yes she says no, about teachers. They quitted because of the pregnancy, the pregnant ones, but for the teachers, no.

T: So number fourteen, it is a test to do that, the government can do that.

T: Number fifteen. She says about 50 percent.

T: Number sixteen. So she says in the part of education it’s a public meetings that will...to help people understanding and also seminars…to prevent the spread of HIV/AIDS. And for the case of morals she says the parents should protect their own children and also film and picture that will grow those emotions should be restricted that what she is saying about to prevent the spread of HIV/AIDS.

F & T: Any final words? Anything you want to add or ask us? Thank you very much for your co-operation!

T: Now she is asking about, that there are a lot of money, lot of provided, journalism specifically for the people infected of HIV/AIDS especially in that environments…for the teacher and now the money doesn’t reach where it is sent, now she is asking where do that money go?