Appreciative inquiry into lifeskills-based HIV/AIDS education in South African schools

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With a steady rise in the prevalence of HIV and AIDS throughout the world it has become vital for programme implementers at all levels to ensure that all HIV intervention programmes are effectively put into practice. The present research used qualitative and quantitative data to evaluate the lifeskills-based HIV/AIDS education programme being implemented in primary and secondary schools in South Africa, with special reference to KwaZulu-Natal. A qualitative questionnaire gathered information from nine respondents at three levels: Department of Education district officials, educators and learners. Six key themes were consequently identified to guide the evaluation: communication, empowerment, resources, networking, motivation, and evaluation and feedback. A quantitative questionnaire completed by 30 educators revealed an overall positive attitude towards the programme, regardless of the educator’s gender, age or level of formal education. The results are discussed with special reference to continuation and improvement of the lifeskills-based HIV/AIDS education programme.

Keywords: appreciative inquiry, health interventions, health promotion, programme evaluation, school-based programmes

Introduction

Since the beginning of the HIV pandemic, numerous school-based HIV and AIDS education programmes have been implemented, mostly in the United States and the United Kingdom. As early as 1988 the American Academy of Pediatrics published an article on the need for a multifaceted approach to HIV/AIDS education in schools (Committee on School Health, 1988). The article suggested including the following aspects in training educators: health promotion, disease avoidance, progression through the age levels and grades, the importance of micro-organisms and general cleanliness, the nature of HIV transmission, HIV and AIDS myths, higher-risk behaviour, HIV prevention and treatment of AIDS, and social and psychological aspects of the disease. Also mentioned was the need for the school-based programme to be periodically assessed and regularly updated so as to conform to current knowledge and developments (Committee on School Health, 1988).

Since then a wide array of researchers have conducted various studies into the benefits of conducting HIV/AIDS-related programmes with youth (e.g. Huszti, Clpton & Mason, 1989; Hein, 1991; Kirby, 1995; Melianby & Phelps, 1995; Schonfeld, O’Hara, Perrin, Quackenbush, Showalter & Cicchetti, 1995; Sigelman, Derenowski, Woods, Mukai, Alfred-Liro, Durazo & Maddock, 1996; Schonfeld & Quackenbush, 2000; Haffner, 2001; Sileo & Gooden, 2003). From a South African perspective one cannot discuss implementation of an HIV/AIDS-related education programme without taking cultural factors into cognisance, as many South African’s are deeply entrenched in traditional cultural practices. These are passed on from generation to generation and are accepted as the norm. These cultural practices tend to influence individuals in all facets of their lives, even if the practices are potentially unsafe or may have serious implications for health and wellness.

Although Africa is vast, many cultural and traditional beliefs are common throughout the continent. Van Dyk (2001) proposes taking the following topics into consideration when planning HIV/AIDS-prevention programmes: ancestors, witches and sorcerers, conceptions of ‘pollution’ and germs, notions of personal immortality, the perceived importance of having children, perceptions about condoms, the importance of community life and traditional healers. Close examination of the above-mentioned studies revealed that various elements of these programmes have been incorporated in some form or another into the content of the national lifeskills-based HIV/AIDS education programme in South Africa.

A HIV/AIDS-curriculum-based programme has been rolled-out nationally, within the Life Orientation learning area, as part of outcomes-based education (OBE) in South African schools in direct response to a suggestion made in the HIV/AIDS/STD Strategic Plan for South Africa 2000–2005 (Department of Health, 2000). The programme was officially launched across all provinces in the country. The main activities linked to the intervention programme are to: train personnel in the Department of Education (i.e. master trainers), educators and peer educators; conduct advocacy workshops (for various stakeholders); select and supply support materials for use in classrooms; monitor and evaluate programme implementation; and encourage and
facilitate community-based HIV-related care and support, as well as voluntary counselling and testing (VCT) programmes (Department of Education, 2004).

The National Integrated Plan for Children and Youth Infected and Affected by HIV and AIDS, drafted by the national departments of health, social development and education, in 2000, is a specific well-laid plan of action that aims to: promote HIV and AIDS awareness to educators, learners and the general school community; encourage preventative measures; and, positively impact on HIV prevention, the reduced incidence of HIV and AIDS and other STIs, and the care and support of all children affected or infected by HIV. Educators are trained to implement the programme at schools, while high-school learners are trained as peer counsellors to provide support for their peers who may be infected or affected by HIV. The intervention programme imparts factual information on HIV and AIDS, such as relating to HIV transmission, myths and misconceptions, high-risk behaviour, immunology, virology, VCT, methods of HIV prevention, various treatment options, general hygiene, health promotion and disease prevention. Emphasis is placed on lifeskills-training with a wide variety of topics being included, such as: sexuality education, interpersonal relationships, conflict management, anger management, gender stereotypes, self-esteem, positive self-image, decision-making, problem-solving, assertiveness and negotiation. This empowering approach gives children the knowledge and skills to make life-choices from an informed perspective. The inclusion of parents, school governing bodies, traditional healers and other stakeholders in the community makes this a well-rounded approach, similar to HIV education programmes run in other countries in Africa (e.g. Uganda: see Kinsman, Harrison, Kengaya-Kayondo, Kanyesigye, Musoke & Whitworth, 1999).

The Medical Research Council conducted a quantitative study into the lifeskills-based HIV/AIDS education programme being implemented in South African schools (see Reddy, James & MaCauley, 2003) and the following constructs were measured by a set of variables: HIV-related knowledge and skills, attitudes to condom use and people living with HIV or AIDS, perceptions about sexual behaviour, communication about safer sex, social support and programme efficacy. While valuable findings regarding school youths’ responses to implementation of the programme were uncovered, critical information about the values and judgments of the various stakeholders was lacking.

According to the method of appreciative inquiry, research is directed towards appreciating what it is about the social world that is positive and then exploring it (Reed, Pearson, Douglas, Swinburne & Wilding, 2002). This allows one to interrogate the successes of a programme and locate its potentials and possibilities. However, the question ‘Why only the positive aspects?’ often surfaces. Belsie (2001) explains that people tend to succeed most when they look for what is ‘right.’ Once one has created positive energy as a result of the appreciative process “they also know clearly how to make more moments of success” (Hammond, 1998, p. 7). Appreciative inquiry does not refuse acknowledgement of negative emotions, thoughts and comments, but welcomes this negativity to be expressed in interviews, etcetera. Once the negativity has been acknowledged and validated one may move on to consider what works. Thus, what one focuses on expands, and in this way stakeholders may accept their limitations by overshadowing negative images and relationships (Cherney, 2003).

Researchers conducting interventions using appreciative inquiry are often viewed with suspicion and apprehension. As a result of their constant emphasis on the positive they are often perceived as unrealistic, idealistic, lacking in critical thinking or as being propagandists (Chapagain, 1999). While the lifeskills-based HIV/AIDS education programme in South African schools has filled a void, more emphasis needs to be placed on the future of the programme. Bushe (2003) points out that organisations will grow in the direction that concerns what topics they repeatedly ask questions about and so focus their attention on. Accordingly, the school-based intervention programme needs to ask more ‘positive’ questions so that it may grow in a positive direction. Hence this study aimed not only to search for information about the effective implementation of the national HIV/AIDS education programme in South African schools but also hoped to create a positive, enabling framework to strengthen its implementation in the future.

Programme evaluations are conducted for different reasons. Seedat, Duncan & Lazarus (2001, p. 190) mention two major purposes: “to consider issues and questions concerning the development of social programmes” and “to analyse evidence about the impact of social programmes in order to answer specific questions about its development.” Since this study was intended to consider the provisioning of effective social services it focuses on the second purpose, which is formative. Kalishman (2002, p. 228) citing Stufflebeam (1991) points out that “the purpose of evaluation is to improve, not prove.” If as a researcher one works from this premise then one needs to view evaluation as a tool that is meant to help programmes work better and to ensure that the programme participants receive better service. While the national lifeskills-based HIV/AIDS education programme may appear to be running smoothly there will always be room for improvement. Sanders (2001) adds that the process of programme evaluation allows researchers to distinguish the worthwhile aspects of a programme from the insignificant ones, which may be subsequently discarded or revised. Furthermore, evaluation is ongoing at all levels irrespective of the name we give it. Any product that affects human safety (like HIV and AIDS education in schools) should have some form of evaluation built into the process, while human services such as education should have continuous, disciplined evaluation. Herein lies the advantage of using appreciative inquiry as a form of programme evaluation (Sanders, 2001).

The assumption guiding the present research was that by emphasising the positive aspects of the HIV/AIDS education programme, it would be helpfully propelled into the future within a more effective and community-sensitive framework. Another envisaged benefit was to instill messages of hope and possibility in the school and local community. We considered that after years of programme implementation the various stakeholders may have reached a stage of
merely accepting and maintaining the status quo and that appreciative inquiry had the potential to powerfully affect people who may have come to feel disempowered.

This study focuses on an evaluation of the strengths of the national lifeskills-based HIV/AIDS education programme being implemented in South African schools; appreciative inquiry, in which positive questions were asked, formed the core of the research effort (see also Cooperrider, 1990). Special attention was given to evaluating the best aspects of the programme so as to determine its future potential. The study hoped to uncover that which is most valuable about the programme, what is working, and how the programme’s implementers can capitalise on its positive aspects. In addition, a sample of educators was used to assemble quantitative data on attitudes towards the programme.

The aims of the research were thus twofold: to conduct a qualitative evaluation involving appreciative inquiry, of the lifeskills-based HIV/AIDS education programme currently being implemented in schools in KwaZulu-Natal Province, South Africa, and to reveal educators’ attitudes towards the programme. It was expected that educators would generally hold positive attitudes towards the programme.

**Methods**

The lifeskills-based HIV/AIDS education programme is currently being implemented in schools throughout South Africa but with some variations at the district level. In the past, most evaluations of similar programmes have been mainly quantitative studies with a strong emphasis on statistical data. In social and psychological studies, where there is a need for qualification as well as quantification (Coolican, 1999), there has been greater acceptance of qualitative research methods, such as appreciative inquiry. A more human, scientific approach is typically more open-ended and oriented towards discovery, making such research suitable for exploring people’s more complicated, real-life experiences, as well as having implications for social action (Rennie, 1994). From the perspective of social action and community psychology, allowing the community within which you work to be actively involved in all stages of the research process is vital. This means using participatory and group-oriented methods, such as appreciative inquiry (MacPhail & Campbell, 1999).

Appreciative inquiry refers to both a search for knowledge and a theory of intentional collective action, both designed to help evolve the normative vision and will of a group, organisation, or society as a whole (Cooperrider & Srivastva, 1987). In order to gauge general attitudes towards the curriculum-based HIV/AIDS lifeskills programme, local KwaZulu-Natal Department of Education district officials, educators and learners were asked to answer three open-ended questions. The three questions attempted to “focus on the subjects’ experienced meaning instead of on descriptions of their overt actions and behaviour” (Vaille & Halling, 1989, p. 44). The information gathered was used to draw up a second questionnaire for educators that employed 10 close-ended statements, which restricted the time a respondent could spend on the questionnaire and eliminated irrelevant responses.

**Sampling design**

For the first questionnaire the choice of subjects was based on stratified, systematic non-proportional sampling design. The strata identified were Department of Education district officials who were involved in facilitating workshops for the lifeskills-based HIV/AIDS education programme, as well as educators and learners who had been trained to implement the programme at a grassroots level. This design was used to identify specific groups of people who possessed the characteristics of the social phenomenon being researched in this study (see also Mays & Pope, 1995). In each of the three groups identified, a random sample of three individuals was selected from a list provided by the district office of the Department of Education. Only three officials at the district office had extensive knowledge of the direct implementation of the HIV/AIDS education programme, so all three were interviewed. Mays & Pope (1995) explain that statistical representativeness is not a key factor when the main research objective is to understand social processes. A total of nine subjects participated in the qualitative study.

With the second questionnaire a single stratum of subjects (educators) was identified and a random sample of 30 educators was selected from a list provided by the district office. These primary- and secondary-school educators were selected by virtue of their direct involvement in the implementation of the programme. Each had been trained at different stages of the programme. The participants were briefed about the aim of the research and asked to sign a consent form and then to indicate their responses on the questionnaire.

**Research instruments**

The first questionnaire had three open-ended questions: 1) ‘Describe your experience of the programme?’; 2) ‘What do you appreciate about the programme?’; and 3) ‘How can this programme be improved?’ The need for this type of questioning is supported by Ryan, Soven, Smither, Sullivan & VanBuskirk (1999), who point out that a questionnaire directed by appreciative inquiry contains critical information about the values and implicit judgments of stakeholders; thus, the information acquired suggests where latent energy for change may exist. Open-ended questions allow participants to respond with a wide range of possible answers (Vadum & Rankin, 1998). It was considered that since there are no limitations placed on responses received by open-ended questions it would be possible to capture the richness of the participants’ experiences with the programme. The nine respondents had to write down their personal, individualised responses on the answer sheet provided.

The second questionnaire consisted of two sections. Section A solicited the respondents’ demographic details. Section B included a Likert-type scale, with 10 close-ended statements that were intended to determine the respondents’ attitudes towards the programme. There were no right or wrong answers to these statements and respondents had to indicate, with the use of an ‘X’, their feelings towards each of the 10 statements (five positive and five negative statements). The information gathered from this section of the second questionnaire was then used in the
statistical analysis (see also Neuman, 2000). Aspects of the programme covered in the questionnaire included a variety of topics, materials and resources, intersectoral collaboration, length of training, support from district officials, attitude change, additional projects, channels of communication, age appropriateness of the various programme levels, and teamwork.

**Data analysis**

The open-ended questions of the first questionnaire were analysed using the following steps: 1) All the texts were read several times; 2) the texts from each one of the three groups (i.e. district officials, educators and learners) were examined separately; 3) each text was analysed individually and key themes were identified by breaking down the information into natural meaning units or natural nuance units, and a summary or essential profile was written; 4) a summary of each strata’s responses was written (a common profile), again paying attention to recurring themes; 5) a final summary of all responses was drawn up (group or pattern profile); and 6) the themes identified were explicated in detail to reveal the respondents’ experiences of the programme.

For the close-ended statements of section B of the second questionnaire, a statistical method of data analysis was used. A 5-point Likert-type scale (see Behr, 1988) was developed for use in section B. Respondents used an ‘X’ to indicate whether they strongly agreed, agreed, were unsure, disagreed, or strongly disagreed with each of the 10 given statements. The response to each statement was assigned a value from ‘5’ to ‘1.’ These values were reversed (i.e. ‘1’ to ‘5’) for the negatively worded statements. Each participant’s total score was obtained by adding up the values they assigned to the 10 individual statements. A high total score was indicative of a positive attitude towards the programme and a low score indicated a negative attitude; each respondent could score a possible highest score of 50 and lowest score of 10, the average score being 30. Scores above the average indicated a positive attitude towards the programme while scores below the average of 30 were indicative of a negative attitude towards the programme.

The discussion of the results is based on chi-square analysis. SPSS software was used to analyse this quantitative data and the conventional level of $p \geq 0.5$ was accepted for statistical significance.

**Results and discussion**

**Qualitative findings**

The following discussion examines the key themes that were identified in relation to the experiences of the participants and their suggestions for improving the programme. Six key themes were identified in the responses to the first questionnaire: communication, empowerment, resources, networking, motivation, evaluation and feedback.

**Communication**

Communication was a central theme and referred to the exchange of information (regarding various issues of importance and not just the lifeskills-based HIV/AIDS education programme) among and between the stakeholders (i.e. district officials, educators and learners). Communication on all levels had improved due to implementation of and participation in the programme and appeared to have played an important role in creating awareness, improving understanding, and helping the cascading of information gathered during training workshops. Communication was achieved through a variety of means: holding regular meetings (in the school, ward, circuit and province), the distribution of materials (teacher’s manuals, learner’s workbooks, parents’ guide, pamphlets and charts) and access to information in the local languages (Afrikaans, English and Zulu).

**Empowerment**

The participants felt greatly empowered and this constituted the highlight of their experience with the programme. Almost all respondents indicated that participation in the programme had allowed them to use the knowledge and skills they acquired not only for themselves but also to help others and especially to actively address issues related to the HIV pandemic.

**Resources**

This refers to the tools or equipment necessary for efficient and effective implementation of the programme. Resource availability and appropriate resource allocation were highlighted by the respondents: they had varying opinions about the supply of resources, the lack thereof, as well as the quality of the resources. The resources mentioned were human, budgetary and material. With human resources there was overwhelming consensus that the lack of personnel on various levels was impacting negatively on implementation of the programme, while the budgetary resources appeared to be a strong point of the programme. The district officials accessed the budget directly and expressed satisfaction with the available budget. However, the topic of material resources was met with mixed feelings. Some respondents expressed gratitude for the resources available to them and others felt that more materials were needed, and there were some critical comments about the content of the materials.

**Networking**

According to the respondents, working together with other government departments (e.g. Department of Social Development and Department of Health), non-governmental organisations (e.g. the Child Protection Unit [CPU]; the South African National Council for Alcohol and Drug Abuse [SANCA]), and other community groups had a positive impact on implementation of the programme. Many respondents felt that an important strength of the programme was the constant intersectoral collaboration on many levels, which allowed access to a wide variety of information and materials.

**Motivation**

The theme of motivation was of particular importance to educators and to a lesser extent to learners. Conditions at schools were not always conducive to programme
implementation and training and there was a dire need to ‘encourage’ effective implementation in the schools. Relevant incentives could be offered to encourage support of the programme and to increase levels of support, participation and commitment among all stakeholders.

Evaluation and feedback
This theme appeared to be closely linked to the theme of motivation. Some participants were concerned about not receiving regular contact sessions with programme facilitators once the initial four-day training session was completed. Regular contact with others who are directly involved with the programme could also serve as a source of motivation. The respondents expressed the need for more evaluation, feedback and follow-up in order to ensure continued effective implementation.

Participants’ suggestions for improvement
The respondents felt that several key areas need greater attention from programme coordinators.

Intersectoral collaboration
Some respondents indicated that greater levels of collaboration between organisations involved in HIV and AIDS awareness and training is required in order to improve the implementation of the HIV education programme in the schools.

Resources
According to most respondents, human resources were lacking. They suggested that the more people involved in the implementation of the programme the better the delivery of services. The provisioning of adequate human and material resources is an area that appears to require much attention at various levels of programme implementation.

Programme workshops
Selected educators and learners had participated in workshops and then took new information back to their respective school, where it could cascade to the general school population. These respondents felt that certain aspects of the workshops could be improved upon, namely increasing the target population, including follow-up or feedback workshops, and increasing the length of training.

Quantitative findings
The sample completing the second questionnaire consisted of two men and 28 women, with an age range of 41 to 50 years, and an average of four years of formal education. As expected, the mean score for all participants (35.5) indicated that, overall, the educators had a positive attitude towards the lifeskills-based HIV/AIDS education programme. The chi-square analysis of biographical data indicated no significant differences between positive attitude and gender, age and education (Table 1).

Table 1: Chi-square statistics ($p > 0.05$) for the difference between positive attitudes and gender, age and education

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<th>$X^2$</th>
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<td>Age</td>
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<td>Education</td>
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Department of Education were not consistently available to provide support to schools, and most respondents (53%) felt that the period of training for implementing the programme was inadequate. More encouragingly, however, the majority (87%) believed that the programme had resulted in positive changes in the attitudes of those persons involved. Also, 80% of the respondents felt that the resource materials supplied by the Department of Education had assisted greatly with programme implementation in the classroom. Most of the individual scores were between 29 and 39 (out of a possible highest score of 50), with 22 of 30 respondents falling into this range. These were relatively good scores, which support the earlier statements regarding the respondents’ overall positive attitude to the programme.

Conclusions and recommendations
Cooperrider (1990) argued that virtually any pattern of organisational action is open to alteration and configuration. However, the right conditions need to exist in order to encourage such change; and the guiding image for the future is to be found deep within the internal dialogue of the organisation. The research presented here may serve to create dialogue at various levels within the lifeskills-based HIV/AIDS education programme being implemented in South African schools by creating a suitable environment for this dialogue, which can positively drive the programme in the future.

Despite the participants’ overall positive attitude towards the programme, it became evident that certain issues need to be addressed. The following specific recommendations to improve the programme are based on the information gathered in the questionnaires and observations made during the research:

- More site visits, follow-up, and closer interaction between Department of Education district officials and educators as well as between district officials and learners are needed. This shortcoming entails a long-term approach, as it would require, for example, the possible restructuring of relevant sections of the Department of Education so as to maximise available manpower.
- The shortage of human resources is not specific to the Department of Education’s district office, but is also apparent in the personnel shortages at schools. Educators often feel overwhelmed by their current workloads and would like to see more posts open up, especially ones devoted to the lifeskills-based HIV/AIDS education programme.
- Follow-up workshops with educators and learners previously trained or involved in the programme would
help to ensure continuity of the programme and allow district officials to determine areas of the programme that require amendment.

- In terms of possible changes to the programme, the following areas require investigation: higher levels of community participation, particularly in rural areas; creation of projects for peer educators to ensure experiential learning opportunities; accessing larger number of learners via onsite workshops; and challenging gender stereotypes while respecting cultural boundaries.

- There is a need for more intersectoral collaboration in order to ensure positive growth of the programme. Intersectoral collaboration appeared to be working better at the Department of Education’s district office than it was in the schools. Educators and learners at schools should be encouraged and persuaded to use the available community resources.

- Better channels of communication are needed between all groups involved in implementation of the programme. Forums for discussion should be created at various levels (e.g. within the school, community, district, province and throughout the country) and between various stakeholders (e.g. learners, educators, department officials, parents, traditional healers, nkosi (traditional leaders) and other relevant individuals or groups).

- The materials supplied to schools were found to be useful; however, a review of their contents needs to be conducted, as respondents raised concerns regarding the cultural relevance of some material.

- Previous HIV/AIDS school-based interventions have focused on HIV prevention but there is a dire need to focus on HIV prevention but there is a dire need to place greater emphasis on the promotion of physical and mental health and wellness.

- At a national level, the Department of Education should consider conducting appreciative inquiry at all schools implementing the lifeskills-based HIV/AIDS education programme. This would provide schools, and the districts within which they lie, an opportunity to create platforms for constructive dialogue and to encourage positive growth of the programme.

Finally, we suggest that without research there would be no improvement, and without improvement the lifeskills-based HIV/AIDS education programme being implemented in South African schools will slowly lose its relevance, meaning and proactive input. This study takes one step towards creating ideas for further research and dialogue and action around the programme, which is necessary at all levels of implementation to ensure useful changes and effective continuity of the programme.

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