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Appendix One
Ethical Clearance Certificate



Appendix Two

Data Collection Instruments

1. Summary of Research Questions and Methods

Research Question	Proposition	Methods
How do images of the ideal teacher, as reflected in government policy, compare to the self-described identities of teachers in the context of HIV/AIDS?	The images of the ideal teacher as reflected in government policy often do not consider the realities of teachers, and thus are likely to be in conflict with the images and identities teachers living with HIV/AIDS have of themselves.	<ul style="list-style-type: none">• In-depth document analysis of key government policy instructions on HIV/AIDS and Life Skills, and also donor agency documentation.• Key informant interview with the following officials in the Ministry of Education: Director of Planning; HIV/AIDS Unit; District Education Officer- HIV/AIDS; school heads.• Interviews with officers in: UNESCO, UNICEF, teacher unions.• Narrative interviews with five teachers living with AIDS.
How do the experiences of teachers living with HIV/AIDS affect the way they respond to and enact government policy on HIV/AIDS in the classroom?	Teachers living with HIV/AIDS struggle to cope with their status and the associated burden of illness and its impact on their work. At the same time, they have to face the demands of their job, the stigma and shame associated with the disease, and the need to support other teachers and pupils to cope with the disease. Their own	Narrative interviews with five teachers living with AIDS.



	personal experiences will affect the way they respond to and enact government policy on HIV/AIDS in the classroom.	
To what extent can the framework of 'teachers as emotional actors' reconcile the differences between policy ideals and teacher understandings of their identities in HIV/AIDS contexts?	Policy makers need to consider that HIV/AIDS is an emotional issue and that teaching is more than a mechanical act. It is a highly intensive human activity, a transmission of values, a meeting point of feelings and an exchange of deep emotions. The consideration of teachers as emotional actors might reduce the discrepancy between policy visions and teacher understanding of their roles and identities.	Analysis of the research data on the experiences of teachers against the information on policy ideals gathered through document analysis and interviews with key informants.



2. Value of the Chosen Method to the Research

Critical Question	Method	Value
How do images of the ideal teacher, as reflected in government policy compare to the self-described identities of teachers in the context of HIV/AIDS?	Document Analysis Schedule	This will provide me with in-depth information on the image of teachers as reflected in the official documents and the expectations that policy makers, community and donors have of teachers teaching HIV/AIDS and Life Skills. This data will allow me to corroborate and supplement evidence from other sources, such as the interviews.
	Key informant Interview sheet	This will allow me to interact with the key players and get their views on images/visions of ideal teachers vs. the practical realities that teachers, particularly those living with HIV/AIDS, face today.
How do the experiences of teachers living with HIV/AIDS affect the way they respond to and enact government policy on HIV/AIDS in the classroom?	Narrative Interview Schedule	This will bring me into the lives of teachers living with HIV/AIDS, so that I can get an understanding of their experiences with implementation of the HIV/AIDS policy.
	Personal Diary	This will allow me to record the proceedings of any interview soon after it is completed and before I forget the key issues. It allows me to disclose my feelings and reflections on the teachers' experiences.

3. Document Analysis

An analysis of the policy documents or policy instructions from government or other key players in the education sector is important to gain an understanding of how teachers are portrayed by the government, the international community and the school community. It also shows how much the official images of teachers have changed over the years with the increasing prevalence of HIV/AIDS.

The following documents will be analysed for this research:

- Ministry of Education Sport and Culture's Policy on HIV/AIDS and Life Skills
- Other policy instructions and administrative circulars issued over the years
- Ministry of Higher and Tertiary Education Policy for Teacher Training Colleges
- Evaluations of the Life Skills programme
- Key documents from teacher unions

The questions below will guide the document analysis:

1. Which organisation produced the document?
2. When was it written?
3. To whom was it written?
4. What were the explicit intentions of the document?
5. What was the central message of the document?
6. How are teachers portrayed in the document?

4. Key Informant Interview Sheet

The purpose of this interview is to get the views of the policy makers and those who have an influence on the policy process. It aims to find out their expectations of teachers teaching HIV/AIDS and Life Skills, and also what visions/images of teachers they hold. Lastly, it will seek to establish whether the policy makers consider the realities of teachers living with HIV/AIDS in their policies.

1. Name of Interviewee: _____

2. Organisation: _____ Position: _____

3. Years in the organisation: _____

- What role does your organisation play in the development of HIV/AIDS and Life Skills policy?
- Have you personally been involved in the policy development process?
- What does the policy say about the teaching of HIV/AIDS and Life Skills in school?
- What role are teachers expected to play in policy implementation?
- In your view, what are the shortcomings on the part of the teachers implementing HIV/AIDS and Life Skills policy?
- How can the performance of teachers in this regard be improved?
- What does the policy say about teachers living with HIV/AIDS?
- In your view, do you feel that government support for teachers living with AIDS is adequate?
- What more do you feel should be done for teachers living with HIV/AIDS?

5. Narrative Interview Schedule

Schedule A: My Story (narrative biography of each teacher)

The purpose of this interview is to get to know more about the interviewee, and it is also about establishing a relationship with them. By getting the respondents to talk about their life histories, it is my hope that they will open up to the researcher.

- Tell me about yourself. Who are you?
- When and where were you born?
- How did you grow up?
- Tell me more about your family before you were married – i.e. father, mother, brothers and sisters.
- Do you have a family of your own now? Can you tell me about them?
- Where do you live?
- Tell me about your work. Where do you work? How long have you worked there?
- What do you enjoy doing?

Schedule B: The HIV diagnosis – how I felt after I was diagnosed HIV-positive

The purpose of this second interview is to get the respondents to start opening up on when they were diagnosed and how they felt after the diagnosis.

Start interview with a summary of the issues from the last interview.

- What were your life and career goals before you were diagnosed?
- When did you learn that you were HIV-positive?
- How did you learn about the diagnosis?
- How did you feel after you were diagnosed?
- What did you do when you learned that you were HIV-positive?
- How do you feel about your diagnosis now?
- How have your goals been affected by the diagnosis?
- What are your plans for the future?
- How are you coping with HIV/AIDS?

Schedule C: How HIV/AIDS has affected my personal life

The purpose of the interview is to find out what changes HIV/AIDS has brought to the personal lives of the teachers.

- What changed in your life after the diagnosis?
- How has it affected your health situation, resources, etc.?
- How has HIV/AIDS affected your family life?
- How has it affected your spiritual life?
- How has it affected your relations with your friends and community members?

Schedule D: How HIV/AIDS affects my life at school

The purpose of this interview is to understand how HIV/AIDS affected the professional lives of the teachers.

- What made you choose to become a teacher?
- How has HIV/AIDS affected your teaching?
 - *Execution of tasks*
 - *Demands of your work*
 - *Presence at work*
 - *Communication of HIV/AIDS messages to pupils*
 - *Overall performance in school*
- How has HIV/AIDS affected your interactions with students?
- How has HIV/AIDS affected your relationship with other teachers at the school?
- How has HIV/AIDS affected your relationship with your supervisors?
- How has HIV/AIDS affected your relationship with parents and the community?

Schedule E: How the school community responded to my status

The purpose of this interview is to get the subjective experiences of the teachers on how the school community responded to the HIV/AIDS diagnosis.

- Have you disclosed your status to anyone in the school community? If not, do you think they are aware of your status?



- If you have disclosed, what has been the response of the headmaster, fellow teachers, parents and pupils?
- How do you feel about your disclosure/non-disclosure?
- Does being HIV-positive affect your interactions with other members of the school community?
- Do you think that disclosing your status has made a difference in your relationships with other members of the school community?

Emotions

Please describe the different emotions that you went through as a teacher when

- a) you discovered you were HIV-positive.
- b) you tried to reconcile your HIV-positive status with the expectations placed on you by the school and the Ministry through the Life Skills policy.
- c) you could not keep up with your teaching responsibilities.
- d) you felt other teachers were talking about you.
- e) you had to deal with parents and other members of the community.



6. Personal Diary

Interviewee: _____

Position: _____ Contact Number: _____

Date of Interview: _____ Duration: _____

Taped: ____ Yes ____ No

Interviewee was:

Tense	1 2 3 4 5	Relaxed
Holding Back	1 2 3 4 5	Open
Reluctant	1 2 3 4 5	Straightforward

My relationship with the interviewee:

Atmosphere of the Interview:

- What were the main issues or themes that emerged?
- What information did I get (or fail to get) during each interview?
- Did I gather any new interesting and relevant information?
- What non-verbal communication did I receive?
- What were my concerns regarding this interview?
- What ideas did I gather which might have implications for my research design?

Appendix Three

Informed Consent Form

Research Title:

“Teachers living with HIV/AIDS”: Underplaying the role of emotions in the implementation of HIV/AIDS policy in Zimbabwean primary schools

Dear Participant,

I am inviting you to participate in a research project aimed at exploring the experiences of teachers living with HIV/AIDS, to explore how their experiences affect the ways in which they teach HIV/AIDS and Life Skills. The research seeks to establish whether the official expectations placed on teachers through policy take account of the realities and identities of teachers in a world with AIDS. I will explore whether the images of what ideal teachers should be and how they should conduct themselves are consistent with the personal identities of teachers living with HIV and AIDS.

Your participation in this research project is voluntary and confidential. You will not be asked to reveal any information that will allow your identity to be established, unless you are willing to be contacted for individual follow-up interviews. Should you declare yourself willing to participate in an individual interview, confidentiality will be guaranteed. You may decide to withdraw at any stage should you wish not to continue with an interview.

Accompanying this letter is a document explaining your *role in the research process*.

The results from this study will be used to inform future policy on the realities of teachers in a World with AIDS, and in doing so try to reduce the gap between policy and practice. It is my hope that, through listening to your experiences, we can deepen our understanding of issues facing teachers in a World with AIDS.



If you are willing to participate in this study, please sign this letter as a declaration of your consent – that is, that you participate in this project willingly and that you understand that you may withdraw from the research project at any time. Participation in this phase of the project does not obligate you to participate in follow-up individual interviews; however, should you decide to participate in follow-up interviews your participation is still voluntary and you may withdraw at any time. Under no circumstances will the identity of interview participants be made known to *any parties or organisations that may be involved in the research process and/or which have some form of power over the participants.*

Participant's signature Date:

Researcher's signature..... Date:

Yours sincerely,

YOUR NAME



Your Role in the research process

I propose to conduct about five interview sessions with you as a participant, and these will be recorded on audio tape. Each interview will last for a maximum of ninety minutes. I hope to carry out the interviews over a period of up to two months.

The interviews will look at your life story, how the HIV diagnosis has affected your personal and professional life, and how you interact with members of your family and the school community.

The interview will be recorded on audio tape to avoid leaving out any important information and to avoid disrupting the interview process. If you consent to the use of the tape recorder, please sign below.

Participant's signature..... Date

Appendix Four

Extract from my Research Diary

Today I begin my research journey. I woke up today with a question nagging me: How do I find my research partners? Researching the lives of HIV-positive teachers is a mammoth task. During the development of the research proposal I was aware of the challenging task that lay ahead of me. As more and more people read my proposal, I realised that I might have underestimated the enormous challenge that lay ahead, the complex ethical issues involved and the fact that this research would require a great deal of emotional labour and introspection/personal reflection from myself as a researcher. All the comments from colleagues and lecturers who read my proposal carried the warning: you need to be careful as this is a process involving asking people to recount very deep and potentially painful /traumatic moments of people's lives.

So here am I, ready to start the process of identifying participants. One suggestion from the proposal defence which I took to heart was the need to try to identify as many potential participants as possible, and to try to select the five that I feel will have stories that are interesting, that will add value to my research and that will not contradict each other. I have two starting points. [1]Towards the end of 2004, as I was working as programme specialist H/A with UNESCO, we held a colloquium for the sub-region, where we invited HIV-positive teachers to tell their stories in a panel being moderated by Mr B. Dhliwayo, a consultant who is also living with HIV and AIDS.

It was this panel discussion that gave birth to my research proposal idea. This was based on the view that HIV-positive teachers have stories to tell, stories that are powerful and that can actually influence policy, and they need to have their voices heard. The parting words from one of the teachers were, "We need to be part of the solution and not the problem." From that panel discussion I remember there was one female teacher who was very articulate in sharing her experiences, and how she talked about how her openness had paved the way for other HIV-positive teachers to share their stories. I had taken down her contact details as I thought that one day I might want to work with her in my research. She would be my first contact.



Appendix Five

Themes and Categories from the Data Analysis of Ruva's Story

Theme	1. Teacher as Ideal citizen vs Teacher as HIV-positive	2. HIV illness and Job Performance	3. Teachers as emotional actors
Major - categories	1.1 Images of the Ideal Teacher	2.1 Absenteeism and the response of the school community	3.1 Dealing with a positive HIV test result
Sub-categories	<p>1.1.1 Teachers as perfect citizens.</p> <p>1.1.2 Multiple roles of teachers; I am taken as a confidante.</p> <p>1.1.3 Expectations of teachers; I am expected to be an all-rounder.</p> <p>1.1.4 Perception of self as ideal teacher vs. perception as person contaminated with AIDS.</p>	<p>2.1.1 Absenteeism; I would be on and off from work.</p> <p>2.1.2 Parents' attitudes; Some parents do not like their children to be taught by HIV-positive educators. They will not really give reasons as being the teacher's HIV status but they might say it is because the teacher is absent a lot.</p> <p>2.1.3 Ministry's position towards teachers with HIV and AIDS.</p> <p>2.1.4 Unfair sick leave conditions; I did not chose to be sick.</p> <p>2.1.5 The reality is often when teachers are sick they will not go home because they always fear that they will use up their days which they might need when their situation gets critical.</p>	<p>3.1.1 I did not take a taxi home: I walked; maybe I wanted to burn it out or get time to compose myself.</p> <p>3.1.2 I did not understand how this could happen when my son was still so young.</p> <p>3.1.3 Loss of hope.</p> <p>3.1.4 Difficulty; This was a really difficult time for me It was one phase of my life that I will not forget.</p> <p>3.1.5 I lived by the day.</p>



	<p>1.2 Teacher as HIV-positive</p> <p>1.2.1 <i>Society perceptions of who gets infected by HIV.</i></p> <p>1.2.2 Society associates HIV with someone who is sick.</p> <p>1.2.3 <i>I see myself as a whole person and the issue of HIV and AIDS does not come into it.</i></p> <p>1.2.4 AIDS as a disease of the promiscuous.</p>	<p>2.2 Illness and its impact on teaching HIV/AIDS and Life Skills</p> <p>2.2.1 <i>Impact on teaching: being positive has negatively impacted on my teaching.</i></p> <p>2.2.2 Sometimes when I am not well I am forced to deliver lessons from the chair.</p> <p>2.2.3 <i>I used to find delivering lessons on HIV very tough.</i></p>	<p>3.2 The body that carries the feelings and emotions</p> <p>3.2.1 <i>Anger after receiving a positive test.</i></p> <p>3.2.2 <i>I would ask God, why me?</i></p> <p>3.2.3 Going through serious emotional turmoil.</p> <p>3.3.4 <i>Worry; How would my kids take it, what is going to happen to them? How were they going to view their lives when they grew up? How were they going to feel in relationships when they grew up knowing that their mother had died of AIDS?</i></p> <p>3.3.5 Regret.</p> <p>3.3.6 <i>Loneliness.</i></p>
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ⁱ Herpes Zoster is an acute, localised infection caused by the varicella zoster virus which results in a painful, blistering rash. Also known as shingles, it is caused by the same virus that causes chicken pox. After an episode of chicken pox, the virus becomes dormant in the body. Herpes zoster occurs as a result of the virus re-emerging after many years. It is common in the elderly and in immune-suppressive conditions such as diabetes and HIV/AIDS.

ⁱⁱ Ankyloglossia, or tongue tie, is a condition in which the free movement of the tongue is restricted due to abnormal attachment of the base of the tongue towards the tip of the tongue. Children with tongue tie may be unable to protrude the tongue, touch the roof of the mouth or move the tongue from side to side. They are often unable to articulate words.

ⁱⁱⁱ Anti-retroviral therapy is the recommended treatment option for HIV and AIDS. Anti-retroviral drugs inhibit the replication of HIV. Different classes of antiretroviral drugs act at different stages of the HIV life cycle. The drugs are broadly classified by the phase of the retrovirus life cycle that the drug inhibits. When drugs are given in combination, HIV replication and immune deterioration can be delayed, and survival and quality of life is improved. In some individuals, hypersensitivity to some drugs may occur although this varies by drug, drug combinations, ethnicity, and individual.

^{iv} DART stands for Developing Anti-retroviral Therapy for Africa. The programme is a five-year clinical trial of anti-HIV therapy in 3 300 patients with advanced HIV disease or AIDS in Uganda and Zimbabwe. The trial investigates two questions; 1) Can anti-HIV drugs be given in the absence of routine laboratory tests relying on clinical assessments? 2) Can HIV drugs be given intermittently rather than continuously to provide a similar level of benefit to patients but with less toxicity? The trial aims to assess the most effective strategy for use in resource-poor settings where laboratory capacity is often minimal or non-existent.

