CHAPTER 2
LITERATURE REVIEW

2.1   INTRODUCTION

The review of literature in this chapter explores related studies on how teachers understand and implement policy and curriculum innovations (such as the AIDS Action Programme for Schools) in school contexts. In Zimbabwe a series of changes have been implemented in the Ministry of Education, Sport, Arts and Culture (GoZ, 2006a). The AIDS Action Programme for Schools is one of the new changes in policy and curriculum implementation. Hence, Chapter Two examines existing research on teacher understanding of policy and curriculum innovations and how the teachers respond to changes with regard to their knowledge, attitude, skills, concerns and educational practices in implementing an innovation. The chapter further explores the existing literature in terms of the state of research conducted on the topic under study. It evaluates areas in the existing knowledge base on teacher policy and curriculum conceptualisation in addition to implementation where the findings of this study would contribute as added knowledge.

In exploring the literature sources, the content is organised around themes for further analysis. Literature on the Zimbabwe HIV and AIDS Policy framework is reviewed. The background and rationale for the Zimbabwe school-based AIDS prevention programme, namely the AIDS Action Programme for Schools are discussed. Then, a critical synthesis of literature on the role of education in preventing the spread of HIV and AIDS, teacher conceptualisation and policy implementation, teacher response to curriculum change are explored. Lastly, I explore the literature to establish a suitable theoretical framework for this study, which is Hall and Hord's (1987; 2001) Concerns-Based Adoption Model (CBAM) presented in Chapter Three. The theoretical framework provides conceptual knowledge of how teachers understand and implement curriculum innovations in schools and also serves as an analysis tool in Chapter Five.

2.2   RATIONALE FOR HIV AND AIDS EDUCATION IN ZIMBABWE

HIV and AIDS education research among the youth in Zimbabwe reveals that HIV and AIDS poses a major threat to the well-being of every Zimbabwean including adolescents in schools (Katsinde & Katsinde, 2007:102; Chireshe, 2006; Leach & Machakanja, 2003; UNAIDS, 2000). Those infected are battling with the disease, but there are others who are affected: children who lose their parents, young children who have to take on the added responsibility of looking after other children and especially young girls who drop out of school to provide home-based care (Chirawu *et al.,* 2007). The poignant factor is the ripple effect that HIV and AIDS have on Zimbabweans and adolescents in secondary schools in particular.

Studies on secondary school students' HIV and AIDS awareness undertaken in Western countries and in Southern Africa, including Zimbabwe, revealed that the students were aware of HIV and AIDS and related issues (Chireshe & Chireshe, 2003; Maluwa-Banda, 2004; Katsinde & Katsinde, 2007). In Zimbabwe, the Ministry of Health and Child Welfare suggests that the cheapest, surest and sustainable solution to prevent HIV infection is behavioural change (Katsinde & Katsinde, 2007:99). Hence, it is important that adolescents in schools have accurate information on sexuality and quality reproductive health knowledge in order to achieve sound adolescent health. To this end, the Ministry of Health and Child Welfare in Zimbabwe embarked on major awareness campaigns involving teaching society how to promote protective measures and avoid HIV transmission. The youth is a special group targeted by HIV and AIDS awareness campaigns because of their vulnerability to HIV infection. Students are at risk of HIV infection as they become targets of adults who may exploit them sexually (Katsinde & Katsinde, 2007:100).

A study carried out by Katsinde & Katsinde (2007:109) in Zimbabwe revealed that students aged seven to nineteen years of age were sexually active, of which the majority were boys. In the study, most of the reasons for teenage sex related problems depended upon to how students interacted with each other. The fear of HIV and AIDS tended to be downplayed by other labels and stigmas which appeared to be paramount. Despite the fact that AIDS does carry labels and stigmas enough to frighten students, the study revealed that both boys and girls feared other forms of discrimination more such as being labelled 'stupid' or 'unloving' by peers or those

they interacted with. Katsinde & Katsinde (2007) also revealed that girls considered that engaging in sexual intercourse was another way of making love relationships stronger. It was also found that boys regarded coitus[16] as a way of achieving recognition and popularity. I assume that, the view by the boys is unfounded and a misconception which needs to be corrected through effective implementation of AAPS in schools.

Studies in Zimbabwe and elsewhere indicated that high factual knowledge about HIV and AIDS does not necessarily lead to change in behaviour (Katsinde & Katsinde, 2007:102; Maluwa-Banda, 2004; ActionAid, 2004). A study conducted by Chirawu *et al.* (2007) revealed that despite high awareness levels about HIV and AIDS through the promotion of abstinence, secondary 'virginity' behaviour change, correct and consistent use of condoms and early diagnosis and treatment of STIs (referred to as the ABCD[17] strategy) no significant change was observed. Even with the ABCD strategy, infection rates are still high among the youth of school-going age (UNAIDS, 2010). Consequently, the efficacy of these strategies outlined in the National HIV and AIDS Policy is uncertain. Consistent with the above view, Chireshe and Chireshe (2003) in their study of students' perceptions of the causes and effects of HIV and AIDS in Masvingo Urban High Schools in Zimbabwe found that secondary school students had accurate factual information about HIV and AIDS but at the same time they had some misconceptions. In the study, it was recommended that relevant stakeholders facilitate HIV and AIDS awareness and necessary attitude change among students both theoretically and in practice. Regarding implementation of AAPS, I acknowledge that that using a behavioural approach to implement the subject area has its limitations. Effective implementation of AAPS without considering other variables at play (social, political and economic) might not make much difference in changing the behaviour of learners. However implementation of AAPS is significant in that it increases learners' knowledge of HIV and AIDS. Baxen *et all* (2011:2) argue that 'educators should not only focus on HIV education but should also take cognisance of the social and cultural practices and belief systems that shape people's (teachers') lives.

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[16] Coitus: to have sexual intercourse (Hornby, 2000:230).
[17] The ABCD strategies refer to: A – abstinence; B – behaviour change; C – condom use; D – early diagnosis and treatment.

Maticka-Tyndale (1992) was concerned about the lack of correlation between knowledge and behaviour on issues pertaining to HIV and AIDS awareness among college students in Canada. He therefore carried out a study on social construction of HIV transmission and prevention among these college students. The researcher (Maticka-Tyndale, 1992) found that, although students exhibited a high degree of scientific knowledge on HIV and AIDS, the scientific knowledge on HIV and AIDS had not been incorporated into students' common sense[18]. Similarly, in South Africa, Baxen, *et al, (*2011:1) observed that despite an increase in HIV and AIDS prevention programmes, increase in HIV infection among the youth indicates that the running programmes are not very effective in curbing the transmission of HIV infection. They (Baxen, *et al,* 2011), found that youth were 'engaging in unsafe sexual practices that continue to expose them to HIV infection, despite their high levels of knowledge about the pandemic.

Zambia's Ministry of Education (MoE) in partnership with the Young Women's Christian Association (YWCA) undertook a study on early pregnancies and unprotected sex among school-going children in the Mongu District of Western Province in 2007. The methodology used was a cross-sectional survey. The focus of the study was to gain more insight into the different perspectives regarding the sexual behaviour of adolescents in the complexity of social relations that form the context in which the sexual behaviour takes place. The study explicitly aimed to establish factors that contributed to early and unprotected sex among school-going adolescents. The findings of the survey indicated that many adolescents were sexually active. In that particular study the average age for the first sexual experience for girls was 14,9, and 14,1 years old for boys. It was also found that most of the adolescents did not use condoms. Programmes by the MoE to promote abstinence were not achieving the desired outcomes among school going youth. The particular study also revealed that adult guidance in the sexual development of the youth was minimal – hence the youth got information on sexuality predominantly from peers and the media. Further, findings indicated that both boys and girls had never discussed sexual matters with their parents or guardians.

Considering the importance of adult guidance for HIV prevention, the study recommended that prevention programmes emphasising adult guidance in sex

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[18] Common sense refers to working knowledge that should help a person in daily interactions and behaviour.

education should be embarked on (MoE & YWCA, 2007:5). Results of the study also revealed that about 60% of the girls and 67% of the boys were victims of peer pressure at school or in the community and felt compelled to engage in sexual activities. Of the adolescents who had sex, most of them reported that their first sexual intercourse was without their voluntary consent. They were under pressure by peers and boy/girlfriends (MoE & YWCA, 2007). Lessons learnt from the Zambian case strengthen the need for researching on teachers' understanding and implementation of the subject area AAPS in secondary schools where there are adolescents who engage in sexual relationships.

Mapfumo, Shumba and Chireshe (2007) conducted a study on *Sexual relationships among students in higher education in Zimbabwe: Implications for HIV and AIDS*. It emerged from the study that both male and female students from the two universities viewed men as initiators who took control and responsibility of sexual encounters. The authors viewed the practice as one that increased the vulnerability of women and girls, who might contract HIV as a result. Based on such findings, Mapfumo *et al.* (2007) suggested that methods adopted for the control and prevention of HIV and AIDS should focus upon the roles played by men and women in their sex encounters. Both men and women must take full responsibility for protecting themselves, and each other, from the possibility of contracting HIV.

In the light of the social problems discussed above, the government of Zimbabwe produced materials for use in schools under the AAPS to try to guide students to protect themselves against HIV infection. It is government policy that every class in schools be involved in the AIDS Action Programme for Schools so that learners are assisted to understand the HIV and AIDS pandemic, to change their attitudes and refrain from unsafe sexual behaviour (Jackson, 1992). At least one period per class per week should be assigned for teaching the subject area (GoZ, 2006a). However, indicators such as the increasing number of HIV infections and schoolgirl pregnancies confirm that some students continue to engage in risky sexual behaviour and that the subject area might not be effective (Katsinde & Katsinde, 2007). It was therefore necessary to conduct a scientific study to determine how teachers understand and implement the prescribed AIDS Action Programme for Schools.

2.3 THE ZIMBABWE NATIONAL HIV AND AIDS POLICY FRAMEWORK

In line with the regional conventions, treaties and declarations to which Zimbabwe is a signatory, a number of policies relevant to HIV and AIDS have been put in place by the government of Zimbabwe. Of significance to this study is the National HIV and AIDS policy of 1999 that outlines 43 guiding principles. These principles direct intervention in prevention, care, mitigation and research in response to HIV and AIDS in Zimbabwe (National HIV/AIDS Policy, 1999).

Among the 43 guiding principles, those relevant to this research and relevant to the AIDS Action Programme for Schools curriculum content include:

- A multi-sectoral approach in addressing the AIDS pandemic
- Human rights and dignity for people living with HIV and AIDS
- Confidentiality
- Voluntary counselling and testing (VCT)
- Burnout experienced by care providers
- Protection of the rights of children, both infected and affected by HIV
- Wilful transmission of HIV and AIDS
- Prevention of parent to child HIV transmission
- Condom use promotion and availability (Chirawu *et al.,* 2007:36; National HIV/AIDS Policy, 1999).

2.4 BACKGROUND TO AIDS ACTION PROGRAMME FOR SCHOOLS

The Zimbabwe AIDS Action Programme for Schools is a skills-based health education programme. Notwithstanding its uniqueness, the programme is informed by other skills-based health education programmes such as the Uganda School-based HIV and AIDS prevention programme (O'Donoghue, 1995).

Among the first countries to implement a school-based HIV and AIDS prevention programme in 1987 was Uganda. The programme ran parallel with other health promotion activities in the country and aimed to provide school children with reliable, correct information which resulted in behaviour change. According to O'Donoghue (1995), there were two major challenges with the Uganda programme. Firstly, it was observed that simply providing students with HIV and AIDS content did not

automatically result in behaviour change. Secondly, it was apparent that teachers were the weak link in the project implementation process. It was evident that the teachers were untrained and they were uncomfortable handling information on HIV and AIDS and sexuality issues. The teachers were found to avoid core HIV and AIDS issues and only dealt with peripheral matters such as other health topics (O'Donoghue, 1995).

Similarly, a baseline survey undertaken in Zimbabwe at the onset of the AIDS Action Programme for Schools found that although teachers were keen to teach prevention education, there were some knowledge gaps on the part of the teachers (GoZ, 2003b). Uganda is often seen as a model for Africa in the fight against HIV and AIDS as it boasts strong government leadership, broad-based partnerships and effective public education. All these contributed to the decline in the number of people living with HIV and AIDS in the Uganda from 15% in the 1990s to 5% in 2001 (O'Donoghue, 2002). The approach used in Uganda has been named the **ABC** approach – firstly, encouraging sexual **A**bstinence until marriage; secondly, advising those who are sexually active to **B**e faithful to one partner; and finally, urging **C**ondom use, especially for those who have more than one sexual partner. The **ABCD** approach encouraged in the AIDS Action Programme for Schools is a concept that has been borrowed from Uganda by the Government of Zimbabwe.

2.5   POLICIES FOR THE AIDS ACTION PROGRAMME FOR SCHOOLS

It is significant to note that young people are particularly at risk of HIV infection and sexually transmitted infections. Of specific interest to this study is the fact that at 11,1% Zimbabwe has one of the highest HIV prevalence rates among the youth in Africa (UNAIDS, 2010:183). Zimbabwe, in collaboration with UNICEF, initially introduced the HIV and AIDS and Life Skills policy called AIDS Action Programme for Schools through the Chief Education Officer's Circular Number 16 of 1993 and the programme was revised in 2003 through the Director's Circular Number 3 of 2003. All schools have since been obliged by policy to provide HIV and AIDS prevention education from Grade 4[19] to Form 6[20] (GoZ, 2003a; 2003b).

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[19] Grade 4: in the Zimbabwean education system Grade 4 refers to the 4th year of primary school education.
[20] Form 6 is the 6th year of secondary school education prior to entry into university.

The documents that contain the policy provisions for the AAPS are the Director's circulars Number 2 and 3 of 2003 which prescribe how teachers teaching HIV and AIDS and Life Skills education should implement the subject area. Other relevant policy documents are: the Zimbabwe National Behavioural Change Strategy for the Prevention of Sexual Transmission of HIV 2006-2010 (GoZ, 2006b), and the Secretary's Circular Number 5 of 2000. These policy documents emphasise the role of schools in preventing HIV and AIDS among learners and are punctuated by statements such as, 'Teachers are expected to use participatory and learner-centred methodologies …' (GoZ, 2003a; 2000a); and, 'Heads and teachers are also expected to assist children affected by the pandemic' (GoZ, 2003a:3). In the same vein the Government of Zimbabwe (2006a:19) submits that schools will therefore be equipped to promote life and negotiation skills as well as teach pupils about all effective HIV prevention methods including abstinence, faithfulness and condom use. These policy documents clearly pronounce the rights of children as well as the teacher mandate to educate learners, to control the spread of HIV and to assist children affected by the pandemic (Machawira & Pillay, 2009:753). In addition, policy states that there should be reduced stigma and discrimination of the infected and affected (GoZ, 2006a:27).

In summary, the official policy documents (GoZ, 2006a; 2005b; 2003a; 2003b) outline the following policy, curriculum requirements and components of the AIDS Action Programme for Schools:

- The AIDS Action Programme for Schools must be accorded equal status with other subjects on the curriculum.
- The APPS is a compulsory subject area; at least one period per class per week must be allocated to HIV and AIDS and life skills education.
- Curriculum content for the subject area should be derived from the objectives outlined by the Ministry of Education, Sport, Arts and Culture in policy documents.
- Each school should appoint qualified teachers to teach HIV and AIDS education.
- A gender-balanced core team of at least four teachers per school should be selected to assist the subject area coordinator to develop a school syllabus from the given objectives, teach the subject area to learners, and organise staff development on requested topics.

▪ Teachers assigned to the AAPS team should be allocated reduced subject and co-curricular workload to facilitate this additional duty.

Over and above the preceding requirements and components, the MoESAC Basic Education policy also states that more books on sexual abuse, sexually transmitted infections and HIV and AIDS should be published so that schools have up-to-date books for the AAPS (GoZ, 2006a:27).

Goal number six of the Basic Education Policy (2006:7) in Zimbabwe aims to reduce HIV and AIDS among other diseases in the education sector. The objective is also to contribute to the prevention of HIV and AIDS and other communicable diseases that are preventable through teaching a subject area such as HIV and AIDS education in schools (MoESAC, 2006:7). Further, the basic principle in the National HIV and AIDS policy (1999), emphasises the right of all persons to have access to clear and accurate information, education and communication on HIV, AIDS and sexually transmitted infections.

Accordingly, over 2000 Zimbabwean teachers have been trained to teach HIV and AIDS education using pre-service and a cascade model of in-service training. The subject area is taught in over 6000 schools and should have 'equal status as other curriculum subjects' (GoZ, 2005b:7). Supporting textbooks and teaching materials have been developed and the programme has the full support of the government and other influential groups such as churches (GoZ, 2005b:7). Through the AIDS Action Programme, MoESAC mandates schools to ensure that all learners in primary and secondary schools have information and advice on protection from unwanted pregnancy, STIs and HIV and AIDS (GoZ, 2006a:26). The AIDS Action Programme for Schools, according to MoESAC, is meant to ensure that issues relating to sexual abuse and HIV and AIDS are taught to learners. The AAPS is a didactic information-based programme that seeks to effect attitudinal and behaviour change among learners in order to reduce their risk of HIV infection. Under the AIDS Action Programme for Schools, one weekly HIV and AIDS education lesson is compulsory for all learners at primary and secondary schools (O'Donoghue, 1996:1; 2002).

2.5.1   PURPOSE AND OBJECTIVES OF THE AIDS ACTION PROGRAMME FOR SCHOOLS

MoESAC introduced the AIDS Action Programme for Schools as an educational policy and curriculum innovation to combat the spread of HIV among learners. The subject gives factual information about HIV and AIDS and develops learners' skills to make informed choices and avoid HIV infection (GoZ, 2003c; O'Donoghue, 1996:5). According to the subject area, teachers are mandated to focus on building pupils' life skills to enable them to take better decisions for themselves and assume positive attitudes and behaviour with less emphasis on the science of the disease. Implementation of the subject area was initiated partly because HIV and AIDS constitute an emergency in Zimbabwe. Implementation of the subject area allows learners to make informed decisions about personal health, positive social relationships and how to exercise their constitutional rights as well as respect the rights of others.

Outlined below are the specific objectives of the programme defined by the Curriculum Development Unit at its outset GoZ (2003a), and presented by O'Donoghue (1996:7).

- Develop pupils' knowledge and understanding of AIDS issues and problems.
- Develop desirable attitudes in pupils to good health through what they learn and how they learn it.
- Challenge prejudices and fears which stigmatise people with HIV and AIDS as victims or outcasts, and help pupils develop understanding, support and a sense of community responsibility for the problem of HIV and AIDS.
- Help pupils to understand and deal with their health problems, fears, and anxieties about puberty, sexuality and relationships.
- Let pupils develop values and life skills such as problem-solving, analysis, evaluation and prediction that are conducive to positive, responsible and healthy lifestyles.
- Promote responsible behaviour in pupils that maximises protection from sexually transmitted infections, including AIDS.
- Increase self-assertiveness and self-confidence in pupils in their relationship with peers and adults.

▪ Enable pupils to recognise physical, emotional and sexual abuse and deal with it.

▪ Develop an appreciation of girls and women as equal partners to boys and men in society.

▪ Foster a new youth and pupils' consciousness of themselves as members of a relatively HIV-uninfected group.

▪ Enable pupils to make better use of available resources to improve health care.

▪ Develop an appreciation by pupils of the socio-economic, cultural and historical factors in the transmission of HIV.

2.5.2 CURRICULUM CONTENT FOR THE AIDS ACTION PROGRAMME FOR SCHOOLS

The AIDS Action Programme for Schools curriculum does not have a set syllabus for secondary school education. Information from the Ministry of Education, Sport, Arts and Culture suggests that they are still in the process of designing this. Teachers are therefore expected to derive content from the outlined objectives and a resource book (*Let's Talk about It*) which are supposed to be used for HIV and AIDS education lessons in both primary and secondary schools (GoZ, 2003b). As a result of the fact that schools design their own syllabuses from the objectives, the content taught in schools may not be uniform and standardised as is the case with other subjects in the curriculum.

From the onset of the Zimbabwe AIDS Action Programme for Schools, it was established that the goals of behaviour and attitude change could be achieved through a participatory, pupil-centred approach to teaching and learning (GoZ, 2003a; O'Donoghue, 1996:7). It was also agreed that the basic content of the AAPS curriculum must reflect pupils' everyday lives, dealing with issues of importance to pupils. Hence, the life skills approach is adopted. Life skills are abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life (WHO, 1993). The five foundation life skills areas emphasised in the AIDS Action Programme for Schools in Zimbabwe are: 'decision making/problem solving, creative thinking/critical thinking, communication/ interpersonal skills, self-awareness/empathy and coping with emotions/coping with stress' (O'Donoghue, 1996:8).

In the subject area, the participatory teaching methods adopted are viewed as an essential component of the life skills approach. The emphasis is on 'experiential learning through active participation rather than didactic teaching or listening to lectures' (O'Donoghue, 1996:8; WHO, 1993). During the lessons, pupils practise the life skills needed to help them to avoid risky behaviour.

2.5.3   STRATEGIES FOR IMPLEMENTATION OF AIDS ACTION PROGRAMME FOR SCHOOLS

The Ministry of Education, Sport, Arts and Culture Director's Circular No. 2 of 2003 outlines information which assists school heads and teachers to implement the AIDS Action Programme for Schools in all schools throughout the country at both primary (starting at Grade 4) and secondary school levels since it is a compulsory subject area. These include time allocation, methodology, capacity development for school heads and teachers, building support, resource materials, networking, supervision and record-keeping. The Zimbabwean education system is heavily examination-oriented but the AIDS Action Programme for Schools as a subject area is not examinable. Stakeholders assumed that if the subject area is examined, the focus would shift to giving learners factual information for them to pass examinations rather than to assist them to develop life skills that promote attitude and behaviour change. At the onset, it was observed that it would be difficult to set examination questions to test attitudes and behaviour change. Curriculum initiators considered that making the subject area examinable 'would result in didactic rather than participatory teaching' (O'Donoghue, 1996:8).

MoESAC established that AIDS education should be taught in English in order to be congruent with other curriculum areas where English is used as a medium of instruction. However, in the subject area, teachers have the option to use the mother tongue where use of English does not facilitate communication. On the other hand, in the Zimbabwean cultures, certain topics related to sexuality are sensitive. Teachers find it difficult to communicate sex and sexuality issues with young people because of cultural practices and beliefs (O'Donoghue, 1996:9; Mapfumo, 1999:74). Preliminary studies show that some teachers are not comfortable with sexuality and AIDS education (Leach & Machakanja, 2003). The fact that teachers are not comfortable with the subject area may suggest that a gulf still exists in Zimbabwe between adults and youth pertaining to discussion on sexuality issues.

Initially, fitting the AAPS into the curriculum was debatable. On one hand, it was observed that HIV and AIDS education could be integrated into other curriculum subject areas. On the other hand stakeholders such as churches, non-governmental organisations and other civic groups in Zimbabwe assumed that if the subject area were integrated into other curriculum areas it might not be taught unless there was an established implementation strategy adopted to ascertain that teachers taught the subject area (Chirawu *et al.*, 2007; O'Donoghue, 1996). The position adopted was that AAPS be a stand-alone subject on the curriculum. However, since the subject area was not allocated sufficient time on the school timetable, teachers were encouraged to integrate AAPS wherever possible in their different subjects of specialisation.

2.6   IMPORTANCE OF EDUCATION IN PREVENTING FURTHER SPREAD OF HIV INFECTION

Existing literature focuses mainly on the impact of HIV and AIDS on education (UNESCO, 2000). The rapid spread of the HIV and AIDS pandemic in Southern Africa has impacted negatively on the education sector forcing most governments in the region and their ministries of education to initiate a number of policies and to embark on HIV and AIDS prevention programmes (Baxen & Breidlid, 2004). These efforts are consistent with Millennium Development Goal number six which aims to 'combat HIV and AIDS and other diseases' as well as 'halt and begin to reverse the spread of HIV and AIDS' (UNESCO, 2005:294). The prevention programme also aims at fortifying the HIV and AIDS-affected education sector. The efforts also launch schools at all levels to fight this deadly disease of the twenty-first century. Despite efforts undertaken at national, regional and international level to fight the AIDS pandemic in terms of policy actions and practical interventions, there appears to be little empirical research on teachers' understanding and implementation of HIV prevention (Kelly, 2004; World Bank, 2002; UNAIDS, 1999).

Literature (Leach & Machakanja, 2003; World Bank, 2002) reveals the need to harness the great potential of schools to prevent the further spread of HIV infection and to offer care and support to the infected as well as to protect the education sector from the deadly disease. It is acknowledged that use of a school-based programme such as the AAPS is only one of the many HIV and AIDS prevention

strategies or prongs used in Zimbabwe. In this argument, Kelly (2004) advocates that the principal beneficiaries on HIV and AIDS prevention measures are young people, hence, education must play a leading role in preventing HIV transmission. Education is endorsed in order to strengthen a country's response by focusing on both prevention and care for the infected and affected. In the paper 'Education and HIV: A Window of Hope' the World Bank (2002) illustrates the need to prevent HIV among the nine to fourteen age group – the so-called window of hope.

In literature it is argued that the education of children and youth merits the highest priority in a world afflicted by HIV and AIDS (Kelly, 2004; World Bank, 2002). The justification for this is that good basic education is one of the most effective and cost-effective means of preventing HIV and AIDS. According to the World Bank (2002), education has been seen as a cheap strategy to combat the spread of HIV and AIDS. It equips children and youth with skills to make informed decisions related to their lives as well as to realise long-term healthy behaviours and hope (WHO, 2007). Education is viewed as a powerful means to reduce vulnerability of adolescents to HIV infection, especially girls. It means education is seen as a unique tool to curb the further spread of HIV.

2.7   TEACHER CONCEPTUALISATION AND POLICY IMPLEMENTATION

A baseline study carried out in Zimbabwe when the school-based AIDS prevention curriculum was initiated, found some knowledge gaps on the part of the teachers (GoZ, 2003b). The levels of knowledge about HIV and AIDS and behaviour change remained too low to produce anything approaching an AIDS-free generation (GoZ, 2003c). Similarly, in Mozambique, Visser (2004a) in his study found that age, personal experience with HIV and AIDS and the level at which the subject matter was taught were some of the factors that impacted on teachers' willingness to talk about HIV and AIDS.

For the past ten years studies on implementation of school-based prevention programmes illustrate that teachers have been found to be a weak link in the implementation process (Education Policy Consortium 2001; O'Donoghue 1995). It was also found that while teachers were eager to participate in HIV and AIDS education, they tended to shun people with HIV or AIDS and in some cases they

were uncomfortable about having social contact with people infected with HIV and suffering from AIDS (GoZ, 2003b). For teachers to be able to help learners develop positive attitudes towards people living with HIV and AIDS, the teachers as facilitators need to first develop positive attitudes themselves (GoZ, 2003b).

Policy implementation involves what Jansen (2001a) refers to as the relationship between 'policy images' and the 'personal identities' of teachers. To Jansen, 'policy images' are the official projections through various policy texts of what the ideal teacher looks like and what is expected of him. On the other hand, 'personal identities' are the understanding that teachers hold of themselves in relation to official policy images. Jansen (2001a) states that teacher identities mean teachers' sense of self as well as their knowledge and beliefs, dispositions, interests and orientation towards work and change. Hence, teacher identities are the way teachers feel about themselves professionally, emotionally and politically, given the conditions and demands of their work.

The professional basis of teacher identity involves the ways in which teachers understand their capacity to teach as a result of, *inter alia,* subject matter competence, levels of training and preparation, and formal qualifications. In other words, the formal and prior training that the teacher feels he has shapes his or her ability to understand and implement a particular policy reform (Jansen, 2001b:242). This is a cause for concern about how teachers conceptualise or understand their capacity to implement a proposed policy. Thus, of relevance to this study is how teachers as professional actors view their capacity in relation to the AIDS Action Programme for Schools, given how the policy initiative defines their mandate.

The emotional basis for teacher identity refers to the ways in which teachers understand their capacity to handle the emotional demands made on them by a new policy in the context of existing stresses and pressures. Such difficulties may be in the form of large classes, managing and disciplining learners and demands from school management for accountability on learner performance. In contemporary classrooms, the teacher also has to deal with the emotional trauma of learners with HIV and AIDS and students whose parents or siblings have died or are terminally ill due to the pandemic (Jansen, 2001a). This implies that the emotional disposition of teachers is expressed in terms of teacher response to a proposed policy based on

the stresses and pressures in their operational environment – the school. The captivating questions is how teachers, as emotional actors, conceptualise, experience and respond to the AIDS Action Programme for Schools, given the definition of the subject area's attributes to their role.

The political basis for teacher identity refers to the ways in which teachers 'understand and act on their value commitments, personal backgrounds and professional interests in the context of change demands' (Jansen, 2001b:243), particularly if a teacher is required to teach a new curriculum area in a school. This point of reference might directly or indirectly undermine a particular policy mandate without its being easily recognised (Jansen, 2001b:243). Consistent with the view, Jansen and Christie (1999) state that competences expected of teachers are sometimes viewed by teachers as complex, difficult, demanding, ambitious, unrealistic and impractical given the existing demands on teachers. This reflects teacher understanding of their authority to implement or withhold action in response to a particular policy reform; at school and classroom level. As a consequence, this study will indirectly help to answer the following question:

▪ *How do teachers as policy implementers conceptualise and act on their authority with respect to the AIDS Action Programme for Schools given the outlined teacher mandates?*

The dislocation between policy visions and practical realities in schools and classrooms remains a vexing problem to educational change (Hargreaves, 2005b; Jansen, 2001a:242). Machawira and Pillay (2009:753), who were alert to the challenge, observed that 'policy images of teachers' made demands that conflicted with their personal 'identities as practitioners'. Therefore, Sachs (2001) suggested that identity conflict may lie at the heart of the implementation dilemma in educational change. This observation explains the apparent inconsistency between teachers' espoused and enacted practice in policy implementation**.** I assume that 'unless teachers have a holistic approach to AIDS education, they may unwittingly contribute to the spread of HIV' (Baxen, *et. al,* (2011:7).

Policies and outcomes are influenced by the immediate context in which they are implemented. They are also impacted on by the larger ideas that shape the

perspectives of political authorities. Most implementation studies, however, focus narrowly on issues of policy and practice. The focus of this study is to determine whether a policy initiative has been put into practice, consistent with its legislative intent, and whether implementation outcomes differ from initial expectations.

Literature shows that analysts rarely ascertain whether goals of public policy or the dynamics of social change shape a policy's implementation (Jansen, 2001a). The inability of conventional implementation studies to account fully for the gap between policy intentions and outcomes suggests the need for a more penetrating look at this aspect of policy process. Just as ideas have become a key factor in explaining why policies are enacted at certain times and in particular forms, they may also increase understanding of policy implementation. Implementation, which refers to the way in which decisions are or are not executed, warrants criteria leading to success or failure. To have an insight into teacher policy implementation there is need to understand how policy is turned into practice, how government policy gets or does not get translated into practice and factors that help or hinder implementation (Hunter & Marks, 2002). If there is a problem, then it is not so much an absence of policy as a surfeit because those charged with its implementation lament the constant outpouring of initiatives – all competing for attention and stretched resources, both human and financial (Hunter, 2003; Hunter & Marks, 2002). Teachers are policy gatekeepers in that they can facilitate policy innovation or they can prevent change.

In a context of considerable uncertainty, policy overload and major organisational turbulence, the processes of implementing policy and reaching sustainable decisions are likely to become more difficult to put in place successfully. Governments in Southern Africa, including Zimbabwe, insist that the policy framework is clear and unambiguous and that what is required is effective implementation (Jansen, 2001a). Delivery is the mantra, not lack of policy; the issue is how national policy aspirations can be translated into clear policy guidelines at local level.

2.8   CURRICULUM IMPLEMENTATION BY TEACHERS

Curriculum implementation involves change. In terms of this view, Hargreaves (2004) suggests that globally it seems that educational innovation and change is a policy priority and major public news. Successful implementation of innovative programmes

and their sustainability initially requires an inherent change in people (Slabbert, 2001:291). Consistent with educational change, Swanepoel and Booyse (2006:1) state that teachers are the key players in the facilitation of programme implementation and change. Analysing the views submitted by the authors I contend that teacher facilitation of programme implementation and change depends on their tacit theories, professional qualifications, beliefs and value they attach to a task such as the AAPS.

A study undertaken by Poppleton and Williamson (2004) on teachers and school change found that the active involvement of teachers in implementing school change is more powerful than any of the variables for promoting a positive attitude, receptiveness and positive feelings. The more teachers participate in responsible and initiating roles in school change, the more positively they welcome the change and the more willingly they participate in future change (Poppleton & Williamson, 2004:289). Similarly, Swanepoel and Booyse (2006:1) stress the importance of the active involvement of teachers as the key agents for change and implementation in the school or classroom.

Wood and Olivier (2007:1) observe that there is great pressure on teachers to deliver and produce good results in academic subjects, leading them to give insufficient attention to the holistic development of the learner. In Wood and Olivier's (2007) view, teachers often feel despondent and develop a lack of intrinsic motivation in their academic work. Existing research findings show that teachers generally do not possess skills, knowledge, attitudes and values required to be effective HIV and AIDS facilitators (Wood & Olivier, 2007; Lethoko, 2002; Steyn & Van Wyk, 1999). Teachers have to develop a belief in their ability to cope in their school environment and to deal with problems that erode their self-efficacy. As teachers, they need to develop the needed confidence to be effective HIV and AIDS role models. Teachers with positive self-efficacy might effectively teach and impart life skills to learners because teacher self-efficacy is positively related to general teacher behaviour in the classroom, and specifically during delivery of HIV and AIDS education lessons (Wood, 2004). High-level teacher efficacy results in high learner achievement and motivation as well as successful programme implementation (Wood & Olivier, 2007:2; Hoy & Woolfolk, 1993:358).

Chiwela and Siamwiza (1999) undertook a study on teachers' knowledge, attitudes, practices and skills in teaching HIV and AIDS prevention and psychosocial life skills. The results reveal that 25% of the teachers acknowledged that they did not understand HIV and AIDS and life skills, and they felt unqualified to teach the subject. About 30% of the teachers thought that sex education led to promiscuity among learners. The finding by Chiwela and Siamwiza (1999) shows a misconception among the teachers who were believed to be facilitators of the HIV and AIDS prevention programme.

Chireshe (2006) undertook a survey involving 314 school counsellors and 636 students on the effectiveness of school guidance and counselling services in Zimbabwean secondary schools. Data was collected using questionnaires. The study revealed that the majority of both school counsellors and students viewed the school guidance and counselling as a positive innovation but that its effective implementation was being negatively affected by lack of resources, training in guidance and counselling and non-performance of counselling duties by some school counsellors. In the study, school counsellors viewed the school guidance and counselling policy as not mandatory. Both teachers and learners viewed the subject as being of low status and not one to be taken very seriously. Also, planning, needs assessment and evaluation of school guidance and counselling services were rated negatively. Teachers who taught guidance and counselling were perceived as incompetent (Chireshe, 2006). Overall, Chireshe (2006) found that surface level implementation was being done in guidance and counselling in most Zimbabwean secondary schools. Since the study explored the effectiveness and delivery of guidance and counselling in Zimbabwean secondary schools, it provides explicit information on how teachers interpret and implement government policy.

Educational research seems to have neglected investigation into teachers' attitudes, conceptualisation and perceptions of HIV and AIDS, along with other related issues and how these affect their role in delivering HIV and AIDS education. In the developing world, including Zimbabwe, minimal research has been conducted to understand the individual and contextual factors that affect teachers' understanding of their roles to help moderate the spread of HIV and AIDS and how this process affects their pedagogical practices as teachers. Visser (2004a) observed that there appeared to be an assumption that with practical training, time and curricula space a

teacher is the appropriate medium to deliver HIV and AIDS content to learners. Visser (2004b) argues that teachers who have a high awareness of personal risk are likely to talk about HIV and AIDS. I contend that in addition to teachers' high awareness of personal risk to HIV and AIDS (Visser, 2004b), the teachers' concerns should also be addressed by policy makers, Ministry of Education, and school management for teachers to have high self-efficacy.

A review of the literature illustrates that there is a lack of research focusing at the micro-level on teacher conceptualisation and implementation of HIV and AIDS prevention education in school contexts (Baxen & Breidlid, 2004:17). Baxen and Breidlid's (2004:17) research stance considers teachers as producers, interpreters and reproducers, mediators and purveyors of knowledge and safe sex messages. Teachers may be viewed as people who work in a field where HIV and AIDS knowledge is considered private or secret. In terms of Baxen and Breidlid's (2004:17) observations, teachers have been positioned as deliverers of an uncontested, already negotiated body of HIV and AIDS knowledge within settings that are unproblematic. Teachers have consequently been targets of training programmes that have largely portrayed 'them as lacking the knowledge and skills to teach' life skills or HIV and AIDS effectively (Baxen & Breidlid, 2004:17). Implied in such research is the assumption that teachers are subjects in a system rather than individuals who are contributors, negotiators and facilitators in their working contexts.

In Zimbabwe, government policy documents explicitly outline mandates given to teachers in order for them to fulfil their roles as givers of knowledge and facilitators of the learning process (GoZ, 2003a:2). Statements such as, 'School Heads and teachers are expected to assist children affected by the AIDS pandemic', and 'Teachers are expected to use participatory and learner-centred methodologies' (GoZ, 2003b:2) have placed 'emphasis on the role of schools' in the prevention of HIV infection through sexual transmission among pupils. Such policy positions proffer 'an expanded role for teachers in the implementation' of the AAPS (Machawira & Pillay, 2009:753). The Zimbabwe National Behavioural Change Strategy for the Prevention of Sexual Transmission of HIV (2006-2010) highlighted that schools are equipped to promote life and negotiation skills as well as to educate about all effective HIV prevention methods including abstinence, faithfulness and condom use

(GoZ, 2006b:19). Such policy positions clearly spell out the mandates 'of teachers to create an AIDS-free generation' (Machawira & Pillay, 753).

Silent in policy documents (GoZ, 2003a; 2003b) is the consideration of teachers' knowledge and attitudes as important factors in implementing HIV and AIDS prevention programmes such as the AIDS Action Programme for Schools. Policy pronouncements do not address how teachers' understanding, beliefs and concerns impact on their delivery of policy mandates in schools in the context of HIV and AIDS.

2.9   TEACHERS'   RESPONSE   TO   CURRICULUM   CHANGE   AND IMPLEMENTATION

Teachers are frontliners in policy implementation. They serve as a way through which policy results are realised since they bring policy into the classroom. They mediate between education policy and practice. However, an analysis of literature on education policy and practice reveals that there seems to be much more emphasis on policy issues than on the actual practice in classrooms (Lloyd & Yelland, 2003; Hall & Hord, 2001). Reid, Brain and Bowels (2005) suggest that since policies are implemented by teachers in schools, there is need for an examination of the implementation process. Successful curriculum change depends on a strategy that utilises teachers' professional knowledge, skills, attitudes, motivation, values and concerns (Reid *et al.*, 2005). According to Lloyd and Yelland (2003:82) policy initiators and curriculum *drivers* should focus on the knowledge, attitudes and skills integral to teacher change.

There are multiple decision-making points for secondary school teachers at different stages of curriculum implementation. The first stage called initiation is defined by Fullan (2001b:53) as, 'the process leading up to and including the decision to proceed with the implementation'. Rogers (2003) and Burgess, Robertson and Patterson (2010:52) refer to the initiation as an information-seeking stage that is balanced with a personal needs assessment. The next stage, *persuasion*, occurs when a teacher forms a positive or negative attitude towards an initiative (Rogers, 2003:169). In the persuasion stage the teacher considers the particular elements of the initiative such as the relative advantages, compatibility and complexity (Burgess *et al.*, 2010:52; Rogers 2003:15). Implementation is execution and is the last stage.

Execution can be accomplished with total loyalty or may consist of compliance with constraints and alteration of procedures and routes. It begins when the individual teacher decides to put an initiative into use in his or her teaching in the classroom. According to Rogers (2003:16), it is at this stage that the 'trialability'[21] and 'observability' characteristics of an initiative become critical to a teacher's positive attitude and adoption.

Consistent with the idea of putting an innovation to the test, Walsh and Gardner (2006) and Burgess *et al.* (2010:52) submit that if a teacher is able to select and test aspects of an initiative, and that trial produces beneficial results for the teacher, then a positive attitude and further implementation is likely to occur. This change process involves first a change in behaviour and, where the teacher acknowledges success, a possible transformation of the teacher's beliefs, attitudes and knowledge (Burgess *et al.*, 2010:52; Clarke & Hollingsworth, 2002:947; Rogers, 2003). In the view of Hall and Hord (2001), teachers who implement an initiative after the trial stage and adopt aspects of an initiative are generally classified as curriculum implementers (users).

Bailey (2000) contends that getting teachers deeply involved in envisioning and managing change means abandoning the idea of a preconceived outcome. It should also not be assumed that enough is known about particular school cultures or needs of individual classrooms. Bailey's (2000) argument is extended by Clasquin-Johnson (2011:61) who views that it is therefore impossible to design just one (one-size-fits-all) programme which will repair the ills of school and society. This realisation may enhance our understanding of why some teachers refuse to accept implementing policy or curriculum changes (Bailey, 2000). However, it should not be assumed that teachers have all the answers, or that local problems cannot be informed by a broader perspective and more comprehensive knowledge base (Bailey, 2000).

It is noted that teachers' receptivity towards curriculum reform depends to a large extent on their level of involvement and acceptance of the change effort. In the context of this study secondary school teachers were found to respond to curriculum change by pushing or sustaining curriculum change, resisting it, or actively subverting change. Teacher agency in curriculum change can be passive or active (Clasquin-

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[21] The term 'trialability' is derived from the word trial. In this study it refers to the process of testing the applicability and impact of AAPS before the teacher makes a final decision to adopt and implement it.

Johnson, 2011:67). Existing research (Bowins & Beaudoin, 2011:8; Mosia, 2011:122; Clasquin-Johnson, 2011:167; Wood & Oliver, 2007:175) reveals that teachers respond to policy or curriculum implementation and change in the following ways:

a)   ignoring
b)   resisting
c)   adopting or
d)   adapting the official policy or curriculum reform.

The above teacher-response strategies are further discussed below.

2.9.1   IGNORING CURRICULUM CHANGE

In Zimbabwe, Cleghorn and Prochner (1997:346) found that early childhood teachers ignored the policy mandate to implement a play-based curriculum. The teachers in that particular study continued teaching reading and writing instead. The teachers reported that they were constrained by lack of materials for a play-based curriculum, large classes (average pupil: teacher ratio of 50:1) and pressure from departmental officials to achieve a certain amount of progress in academic subjects within the first three months of the academic year.

Studies such as those conducted by Chireshe (2006:214) and Chirume (2007:45) in Zimbabwe, Kachingwe *et al.* (2005:199) in Malawi, Samuel (2004:162) in India, Clasquin-Johnson (2011:136) in South Africa, Burgess *et al.* (2010:52) in Australia and ActionAid (2004:8) in Kenya, reveal that limited resources and inadequate professional development are barriers to effective curriculum implementation and a critical factor in teachers ignoring change. On the issue of teacher response to change and use of resources, curriculum materials have long been viewed as the primary means through which to infuse the methods and goals of educational reform into the classroom (Brown, 2009; Remillard, 2005:211).

Historically, for their part, teachers were often considered passive users of these curriculum materials. Remillard (2000:331) and Forbes (2011:19) observe that most curriculum resources, developed over the years, are made to speak through teachers rather than directly to them. As a result teachers rarely enact curriculum materials precisely as is expected by policy makers. Forbes (2011:19) notes that perspectives

on the teacher-curriculum relationship should recognise and embrace as an affordance[22] the important role that teachers play in curriculum change and material use. Similarly, in Greece, Kallery and Psillos (2002:777) found that most Grade R teachers in their study ignored many of the official requirements. In their study in Mexico, Datnow and Castellano (2000) revealed that the most common reaction to top-down mandates is to reject the change and continue as before. Accordingly, Rowan and Miller (2007:256) contend that teachers ignore change as a result of the failure of policy makers to obtain teacher cooperation or moral purpose.

Bristo (2010:2) notes that change shakes or threatens the comfort zone and makes teachers doubt both their roles in the school and their efficacy to fulfil those roles. It is a threat to the established models of those who are affected by the change (Remillard, 2000). A study undertaken by Sorour (1997:643) in Egypt found that 'teachers are a critical factor in making reform work provided they understand and assimilate it, are convinced by it, and most importantly benefit from it', otherwise they oppose the change. In 2000 Kenya introduced an active learning and play-based curriculum. Despite the merits of the new curriculum, teachers continued to teach reading, writing and mathematics. The teachers ignored guidelines for the new curriculum because they were pressurised by parents' demands that their children be taught to read and write. Hence, teachers face a dilemma when the new curriculum emphasises values that are opposite to the cultural traditions of society (Remillard, 2000) and they are compelled to ignore and resist the reform. The above discussion is relevant to my study in that I approached data collection with an open mind, having understood teachers' experiences in policy and curriculum implementation.

2.9.2 RESISTING CURRICULUM CHANGE

Like practitioners in other fields, teachers are reluctant to adapt new practices or procedures unless they feel confident that they can make them work (Mosia 2011:122; Guskey, 2002:386). For the teachers to change or try something new means risking failure. In addition Phatudi (2007:6) contends that national policies have evoked resistance and criticism from many quarters in various fields of knowledge as they were seen as an imposition by the government. In their study in Greece, Kallery and Psillos (2002:59) found that there are significant disparities

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[22] Affordance: refers to a benefit (Forbes, 2011:19).

between policy and implementation. The teachers in that particular study ignored many of the official requirements. Prior to the study by Kallery and Psillos (2002), Datnow and Castellano (2000:777) found that the most common reaction of teachers to top-down official mandates is to reject the change and carry on as before. Zimmerman (2006) submits that when change is top-down, many teachers fail to see the necessity of the new initiative. In addition, Bristo (2010:1) says that change brings with it an increased workload; hence most teachers will actively resist new initiatives if they do not see the relevance of such implementation. Accordingly, Rowan and Miller (2007:256) argue that teacher resistance to change is a result of the failure of policy makers to obtain teacher cooperation or moral purpose.

As viewed by Hargreaves (2005b:11), teacher resistance to change can be the result of a fear of change or loss of motivation. According to Hargreaves, this is a common response to change by mid-career teachers who may have a wealth of experience. If teachers see through the smoke and mirrors of educational reform, they will resist the change (Hargreaves, 2005b:11). Consistent with this view, Gitlin and Margonis (1995:385) say that teachers resist change because their self-esteem may be undermined. Ballet and Kelchtermans (2008:59) also concur that self-doubt triggers various emotional responses and can be a source of resistance to change. Ballet & Kelchtermans (2008:60) further submit that teachers experience feelings of uncertainty and insecurity when they doubt their capacity to cope with change. Teachers resist ill-designed and poorly implemented reforms because they have been swamped by innovations and excluded from policy discussions (Fink & Stoll, 2005). Fink and Stoll aver that resistance can signify good sense because of teachers' deep understanding of their institutional circumstances.

According to Gitlin and Margonis (1995:397-398), teachers resist change because of increased workload, lack of consultation and contrived collegiality during curriculum implementation. Heifetz and Linsky (2002) warn leaders that asking people to change is in essence challenging how they identify themselves. Calabrese (2002) and Zimmerman (2006:240) contend that principals should guard against blaming teachers for resisting change without taking into account any underlying systemic issues that could be at the heart of the implementation problem. In the view of Datnow and Castellano (2000:794), attention should be given to teachers who resist

change, since failure to address their concerns, however small their number, can derail reform efforts and cause failure to adopt the change.

2.9.3 ADOPTING CURRICULUM CHANGE

The number and types of change teachers undertake during the process of implementation can indicate the breadth and depth of change (Hall & Hord, 2001). Datnow and Castellano (2000:778) reveal that a series of imposed changes creates a culture of compliance leading teachers to search for ways to implement the expected change as painlessly as possible. Literature (Carless 1998:354) on teachers' adoption of change describes a common pattern whereby an individual moves from the entry level, awareness or initiation[23] stage (Burgess *et al.*, 2010:51) through to a personal construction and control stage referred to as renewal, (Hall & Hord, 1987) intervention or as critical (Bigum & Green, 1993) where pedagogical skills and teacher understanding are put to creative application to the innovation (Lloyd & Yelland 2003:84; Russell, 1995:173).

Hargreaves (2005b:9) submits that teachers' responses to policy changes often show frustration. Compliance to reforms may mean teacher behaviour change, but their attitude may remain the same. This confirms what Crump (2005:9) says, namely that values and attitudes are major factors of motivation and performance at work. Penuel, Fishman, Yamaguchi and Gallagher (2007:927) contend that the adoption approach teachers engage in constitutes implementation fidelity. Penuel *et al.* (2007) further argue that teachers must either assimilate teaching strategies into their current repertoire with little substantive change or they ought to reject those suggested changes altogether.

Accordingly, simply adopting curriculum change could be limited and unimaginative, especially if changes are made only around the edges of teaching and learning, rather than affecting the classroom itself (Hargreaves, 2005a:9). For teachers to adopt change there is need for curriculum reforms to take cognisance of classroom conditions. Ballet, Kelchtermans and Loughran (2006:2010) warn that externally imposed teaching behaviours, defined competences and objectives down-play teachers' meaningful involvement in curriculum planning and reduce their extent of

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[23] Initiation: Fullan (2001:53) views initiation as the process leading up to and including the decision to proceed with implementation.

professional control. This may limit teachers' abilities to reflect on, collaborate with and adapt to change.

2.9.4   ADAPTING CURRICULUM CHANGE

Prior research suggests that adaptation is central in teachers' use of curriculum materials and that no curriculum is used blindly or without adaptation (Drake & Sherin, 2006:159). Exploring teachers' patterns of adaptation when using new curricula can provide interesting insights into the ways in which teachers incorporate reform principles into their instructional practices (Drake & Sherin, 2006:154). Teachers implement curricula to varying degrees depending upon what curriculum resources are available to them and their understanding of the materials, the nature of their students and constraints of time (Remillard & Bryans, 2004:364). Their use of these curriculum materials can be characterised along a continuum from implementation with absolute fidelity, in which teachers enact curriculum materials as designed, to invention or adaptation (Brown, 2009:17), in which curriculum materials serve as a foundation for modification based upon their professional decision making (Forbes, 2011:19; Forbes & Davis, 2010:365).

Drake and Sherin (2006:182) state that 'when working with a complex, conceptually rich curriculum, different teachers make different choices and adaptations'. In response to change, basically, teachers read, evaluate and adapt an innovation. Forbes (2011:20) observes that while teachers' curriculum adaptations are often minor and inconsequential, they can demote the goal of curriculum developers and they can also fundamentally shape and maintain core classroom cultures. However, the ways in which teachers adapt[24] curriculum reform are not always consistent with expected outcomes (Schneider, Krajcik & Blemenfeld, 2005:283). An appropriate balance needs to be struck between programme fidelity[25] and mutual adaptation considerations. Close collaboration between curriculum developers and teachers can facilitate the process of adaptation (Guskey, 2002:387). In accordance with this view, Gitlin and Margonis (1995:403) recommend that policy makers should focus on the preconditions for change and afford 'teachers the authority and time to teach in ways

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[24] Adapt: means making significant changes to a curriculum during its implementation. These changes primarily involve either the presentation of the conceptual material or the role of the teacher in the lesson.
[25] Programme fidelity: means the quality of being loyal to a programme or curriculum and not distorting or betraying it.

they find educationally defensible'. Similarly, policy *drivers* or facilitators should take cognisance of factors that influence teacher response to change. Accordingly, in relation to my study, it is important to take cognisance of teachers' experiences with the AAPS.

2.10 FACTORS THAT INFLUENCE TEACHERS' RESPONSE TO CURRICULUM IMPLEMENTATION

It is generally agreed that teachers' conscious and unconscious beliefs about a theory influence change. There are external and internal factors that influence teachers' responses to change. The factors which are relevant to this study are discussed below (Bantwini, 2010:84; Prinsloo, 2007:165).

2.10.1 EXTERNAL FACTORS

The external factors relevant to this research are teacher professional development, resources and support.

2.10.1.1 Professional Development

An evaluation by the Ministry of Education (HIV/AIDS in Education Assessment Team, 2004) of the implementation of the second phase of the AIDS Action Programme for Schools in Zimbabwe in 2004 revealed that, regardless of the mode of training adopted, the training of teachers did not reach all schools or, where it did, the school-level training was limited. According to the assessment, the inadequate training of teachers militated against effective programme implementation and to some extent caused the negative attitudes of some teachers (HIV/AIDS in Education Assessment Team, 2004; Chavunduka *et al.* 2004). If the training had been successful, it could have produced teachers who display the three key virtues of an effective HIV and AIDS educator reported by Schenker (2001), namely: openness, sincerity and a sense of humour.

In Prinsloo's (2007) study in South Africa, results from the Life Orientation (LO) teachers revealed that teachers had little rigorous formal training in the presentation of LO programmes. Their training had consisted of one- to three-day short courses on the content and aims of the programme. Teachers criticised the knowledge and

experience of the trainers/facilitators who had been appointed by the relevant department to empower them for their task (Prinsloo, 2007:164). Their major criticism was that the trainers had limited teaching knowledge, inadequate knowledge of didactic methods in the learning area and little knowledge of the current conditions in schools and classrooms. That is, facilitators did not seem to comprehend the problems in contemporary classrooms and they lacked the necessary knowledge and skills. The study (Prinsloo, 2007:165) also found that the success or failure of teacher implementation of LO programmes was closely linked to the said factors because teachers who lacked training and skills lacked motivation and confidence. In addition it was found that teachers lacked motivation to implement LO because the subject area had low status among teachers. Teachers who taught the curriculum were labelled as ineffective by colleagues. The results show that teachers acknowledged that they had little influence on the learners and were unable to alter the learners' behaviour.

In another study in South Africa, Jansen (2002:199) found that despite unprecedented investments in policy making and policy production, 'there appears to be very little change in the daily routines of schools and classrooms'. There continues to be 'a policy-practice gap' in South African education (2002:199). The study found that the significant part of the explanation for the distance between policy and practice lies outside of conventional factors attributed to education reform under Third World conditions. These may be the lack of capacity, the large number of under-qualified teachers or resistance to change by some conservative communities. What government officials intend in terms of the project and actual practices in classrooms are always inconsistent.

Ndamba *et al*. (2011) carried out a study on teacher preparedness for the implementation of the HIV and AIDS Education Policy at primary school level in Masvingo urban. The major challenge reported was the lack of adequate content as the majority of the teachers did not do HIV and AIDS education during their training at teachers' colleges. Other problems cited in the study (Ndamba *et al*., 2011) were that teachers were not free to discuss sexual matters with both boys and girls in one class and administrators rarely supervised or observed the teachers teaching AIDS education lessons. Similar to these findings Wood and Olivier (2007), in a study in South Africa on increasing the self-efficacy beliefs of Life Orientation teachers, found

that the teaching of the subject was a daunting task for most educators since they did not believe that they were equipped to be effective instructors and modellers of life skills. Therefore, classroom practice can be weak and apathetic due to the lack of adequate basic knowledge on HIV and AIDS.

A survey conducted by ActionAid (2004) in Kenya revealed that about 50% of the country's 240 000 teachers did not receive any training in HIV and AIDS education. The teachers reported that teacher training programmes in the country were not comprehensive and systematic enough to equip practicing teachers with knowledge, adequate skills and materials. It is imperative that that those who are about to take part in implementation of the new curricula should be educated.

Writing about 'change in developing countries', Carless (1998:355) suggests the following four elements as compulsory for successful teacher training in support of curriculum change:

▪ Permanent and locally available in-service training, for example through a cascading model;

▪ Establishment of effective systems for supervision and support of teachers;

▪ Adjustment of the content of teacher training to the teachers' own level of knowledge and experience; and

▪ Encouragement of teacher motivation and commitment, for example through improved working condition or opportunities for professional development.

The above submission suggests that in order to ensure successful curriculum change, training needs to be continuous and developmental rather than bit by bit. Teachers need both on- and off-site training. The former 'relates the innovation to the realities of the school context, and the latter, to permit the opportunity to reflect on the meaning of the innovation away from the pressures of daily routines (Carless, 1998:355). Traditional external professional development sessions such as train-the-trainer may induce change as these sessions assist teachers to understand the content of a curriculum initiative and may influence the decision to initiate engagement with the innovation (Burgess *et al.*, 2010:52; Fullan & Hargreaves, 1992).

Cohen & Hills (2001) reveal that expecting teachers to embrace a new curriculum without sufficient training and information as to why such change is necessary, often leads to inadequate support to adopt the initiative. Training events, however, place teachers as passive stakeholders where knowledge is delivered by experts (Kennedy, 2005:237). Bolam, McMahon, Stoll, Thomas, Wallace and Greenwood (2005) and Stoll, Bolam, McMahon, Wallace, and Thomas (2006) suggest that a high investment of time, effort and focus may be required to sustain the development of a learning community of teachers as well as to actually implement the curriculum initiative. Overall, training reduces the problem of teachers' misconceptions about change. Sweeny (2003) argues that if teachers' professional development needs are not met, they can easily become stuck at some lower levels of growth, perhaps even for the rest of their career.

2.10.1.2 Resources

Inadequate funding of educational reforms is a common feature in most sub-Saharan African countries. The implication of inadequate funding in curriculum development and implementation is that teachers of whatever category are poorly represented in development and planning, poorly trained and poorly remunerated (Oloruntegbe, Duyilemi, Agbayewa, Oluwatelure, Dele & Omoniyi, 2010:707). There is minimal research on the implementation of the AIDS Action Programme for Schools at secondary school level in Zimbabwe. As a result the nearest research reviewed under resources is on guidance and counselling. Mapfumo (2001:11) revealed a shortage of human resources on the guidance and counselling programme.

In the context of this study, the shortage of human resources with relevant qualifications to teach HIV and AIDS and life skills is a concern as shown in Chapter Three, Table 3.1. All twenty teachers who participated in the study had degrees, but no qualifications in HIV and AIDS education. Other studies have noted that headmasters did not allow sufficient time for guidance and counselling (Chireshe, 2006:214; Chivonivoni, 2006:33; Chireshe & Mapfumo, 2005:19; Kasaira *et al.*, 2004:61). While school heads appreciated the value of guidance and counselling, Ndanga (1991:4) found that they expressed concerns about the challenges of accommodating the subject on the timetable. Thus implementation of the AIDS

Action Programme for Schools may be affected by time as well as human and material resource constraints.

2.10.1.3 Teacher Support

Support is a key variable in curriculum implementation and change. Teachers who are initially enthusiastic about an innovation, may easily become disillusioned if there is lack of support for the change, such as inadequate resources, lack of teacher collaboration and negative sentiments from colleagues or the school head (Bowins & Beaudoin, 2011:4; Carless, 1998:354). Headmasters create the organisational features that support curriculum changes in schools. They influence the teachers' capacity to implement curriculum change by demonstrating critical support, a desire for change and the belief that change is possible (Hertberg-Davis & Brighton, 2006:90).

The dissemination of an innovation from curriculum developers or change agents is often insufficient to achieve understanding amongst potential implementers. What is needed is negotiation of meaning between developers and teachers, so that a shared vision of the implications of the change can be developed (Hartell, 2005; Carless, 1998:356). Similarly, writing about teacher consent, Hartell and Maile (2004:187) contend that 'it is crucial to note that information is a prerequisite for consent'. It means people cannot faithfully implement change they know nothing about, hence the need for professional development. Consistent with the issue of the need for teacher support, Bantwini (2010:86) notes that the absence of inspectors of schools has resulted in a culture where teachers often go to their classes without proper preparation and planning. The impact on the potential for curriculum change can be so severe that an overall assessment of the state of preparedness prior to developing and launching the reform is essential (Dyanda, Makoni, Mudukuti & Kuyayama, 2006) to 'ensure that key needs are addressed concurrently, thus increasing the likelihood' of the success of the reform (Bantwini, 2010:86).

Teacher collaboration is an important factor in implementing curriculum change. By sharing their successes and concerns during meetings and planning times, respected teachers cultivate self-efficacy in their colleagues and help them refocusing (Zimmerman 2006:243). Rogers (2003) expresses the view that through collaboration

influential teachers can exert influence over their colleagues in the adoption of innovations. In their study, Bechtel and O'Sullivan (2007:221) indicate that the collaboration and support teachers receive from fellow teachers, principals and students facilitate their adaptation to change. As noted by Fullan (2001a) and Zimmerman (2006:243) 'peer pressure combined with peer support is most effective in developing a culture of change in schools'. Consistently more literature stresses the importance of collaboration and being supported by colleagues during a change process (Hartell, 2007; Fullan, 2003; Johns, 2003:345). Fullan concludes that when teachers experience change as a group, the collegiality that occurs allows the teachers to adapt more effectively.

In the same vein Lloyd and Yelland (2003:94) suggest that in reform processes it is essential to engender an environment of care rather than one of censure. Support coupled with demands is essential for continuing educational improvement. Support allows those involved 'in the difficult process of implementation to tolerate the anxiety of occasional failures' (Guskey, 2002:388). Further, 'pressure is often necessary to initiate change among those whose self-impetus for change is not great' (Airasian, 1987:393). It provides the encouragement, motivation, and occasional nudging[26] that many practitioners require in order to persist in the challenging tasks that are intrinsic to all change. Drake and Sherin (2006:159) confirm that for curriculum to be a vehicle for reform, teachers must be supported and guided in making adaptations that maintain the reform-oriented goals of the curriculum.

When teachers in their own setting try to independently implement change and build their mastery to the routine level of task management (Stage of Concern), that is when support becomes so critical for the teacher to succeed in implementation (Sweeny, 2003; Joerger, 2002). According to Sweeny (2003), if teachers are not supported the following may occur:

- they cannot continue to grow
- implementation problems will often overwhelm them and the innovative practices will be discarded, and
- weaker coping strategies may be adopted.

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[26] Nudging: in this particular study nudging involves pushing the teacher(s) gently or gradually in a particular direction so as to reach a particular curriculum implementation level in response to change.

In the context of this study O'Donoghue (1995:ii) suggests that good quality teacher training plus support is needed to ensure the success of the AIDS Action Programme for Schools in the long run. Teachers must be trained on both the participatory approach to education and on the specific materials that are to be used in the classroom. Teachers desperately need guidance on how to deal with sensitive, emotional and sexually explicit issues that may cause fear and embarrassment to themselves and/or their learners (O'Donoghue 1995:ii). Similarly, Mugweni, Mufanechiya and Dhlomo (2011:95) suggest that institutions should be committed to empower practitioners by scaffolding and providing them with ethically structured support if change and implementation is to be realised in reform efforts. These external factors work consistently with teacher internal factors.

2.10.2 INTERNAL FACTORS

2.10.2.1 Teacher Attitudes and Beliefs

Teacher change is behavioural and perceptual, that is, attitudinal and cognitive (Pennington 1995:705). Zimmerman (2006:239) notes that attitude towards curriculum change is a variable that has been a factor to employee acceptance of new policies. Teachers' attitudes towards and beliefs about curriculum change obviously play a fundamental role in their understanding of the reform and affect their behaviour in the classroom (Bantwini, 2010:83; Blignaut, 2007). Freeman (1992:2) refers to the cognitive factor as the internal mental landscape of the classroom. It means teacher response to change is an integration of thought and action (Ni & Guzdial 2007:2-3; Freeman 1992:1). The attitudes towards curriculum change and implementation that teachers develop tend to be derived from their experiences as learners, their training, their teaching experiences, their interaction with colleagues and the societal values and norms of their working contexts (Carless, 1998:354). In addition, Ni and Guzdial (2007:4) aver that teachers' prior experiences play a role in convincing them to adopt curriculum change and implementation. Consistent with Carless's (1998) submission, Bowins and Beaudoin (2011:1) state that though many factors were found to affect teacher adaptation to change, 'the experience of these teachers mainly appeared to affect their confidence'. When teachers' attitudes are congruent with the innovation, then they are likely to be positively disposed towards implementing the change. Bowins and Beaudoin (2011:1) aver that if change is

incompatible with teachers' existing attitudes, resistance to the reform is likely to occur. Chisholm and Leyendecker (2008) argue that in practice ideas are recontextualised and displaced and are often unable to meet the social development goals demanded of them.

In a study pertaining to teachers' responses to a new early childhood education curriculum in Australia, Burgess *et al.* (2010:53) found that 395 of the teachers expressed negative attitudes to the launch and implementation of the initiative. It was established that the negative attitudes emanated particularly from concerns associated with workload or work priority which seemed to highlight the multiple curriculum initiatives. In that particular study it was also found that the content of the curriculum initiative provoked teachers' negative responses to change. According to Burgess *et al.* (2010:53), teachers either found the documents daunting or they felt confused or disappointed. Time was also an issue for the teachers with negative attitudes and a critical concern across all educational settings where teachers attempted to find time to undertake professional development (O'Sullivan, Carroll, & Cavanagh, 2008:170; Stoll *et al.*, 2006:221; Little, 2001).

Like teacher attitudes, teacher beliefs impact on practice during curriculum implementation. Previous research has stressed the importance of teacher beliefs when adapting to change (Bechtel & O'Sullivan, 2007:221; Tsangaridou, 2006). In Bowins and Beaudoin's (2011:4) study on the manner in which experienced physical education teachers adapted to a new curriculum in Canada, it was found that change was effectively implemented when teachers believed that the change would enhance their students' learning. As Fullan (2003:34) indicated, change would not be possible unless teachers believe they were doing something worthwhile. Ha, Lee, Chan and Sum (2004:421), however, observed that in tasking teachers to implement reforms very little consideration is 'given to the teachers' pre-existing beliefs and perceptions of the need to change'.

In a different context Perry *et al.* (1999) undertook a study on teachers' beliefs about the learning and teaching of mathematics in New South Wales (NSW), Australia. The survey technique was employed where the sample of 273 secondary school mathematics teachers responded to a questionnaire. The study found that teachers'

espoused[27] beliefs about mathematics teaching and learning were important because these seemed to influence their practice and teaching approaches.

Another study was commissioned by World Education in Ghana to establish an up-to-date picture of teachers' HIV and AIDS knowledge, attitudes and behaviour. The study explored teachers' willingness to participate in HIV and AIDS programmes, their knowledge and capacity and the magnitude of their personal risk-taking (Adamchak, 2005). It was found that although teachers were willing to help with HIV and AIDS education efforts, not many had undergone professional development to effectively teach HIV and AIDS education. The study established furthermore that teachers were reluctant to talk about and demonstrate the use of condoms. Teachers in the study believed that exposing students to condoms promoted promiscuity. Overall, the study found that risk-taking among teachers was low but present. The majority of the teachers perceived schools as safe and secure zones for students and the teachers expressed ambivalence about interacting with people who might be HIV-positive (Adamchak, 2005).

Bantwini (2010:84) argue that people involved in school reform have their own ideas about how change should proceed, and that they act on these attitudes. It is a misconception to think that teachers are without wills of their own and that they can be manipulated (Bantwini, 2010:84). In the context of this study, it becomes clear that an insight into teachers' attitudes and beliefs must inform policy makers to develop and facilitate (Fullan and Miles, 1992) the AIDS Action Programme for Schools curriculum implementation in the classroom and future curriculum change.

2.10.2.2 Motivation and Workload

The level of development that a particular nation experiences will be in some way a reflection of the calibre of the teachers that it has (Oloruntegbe *et al.*, 2010:706). In his study, Bantwini (2010:86) notes that teachers viewed requirements of a new curriculum as threatening since it demanded more of their limited time. Hart (2009:26) reveals that teachers contended that they did not have enough time to do what they were expected to do in their daily practice. Researchers such as Giles and

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[27] Espoused beliefs refers to what teachers say about something; in this particular context, it refers to what teachers say about mathematic influence their teaching of the subject.

Hargreaves (2006), Kennedy (2005), Fullan (2005) and Zimmerman (2006) concur that there is a sharp imbalance between teacher time and teacher workload.

Bantwini reports that teachers were of the view that they were overloaded with administrative work and, for them, it was therefore impossible to do that kind of work for the poor salary they got. In their study on teacher understanding and implementation of curriculum change, Burgess *et al.* (2010:57) reveal that teachers expressed a concern with their personal workload, overwhelming content and lack of time. This implies that teachers were experiencing an increased workload and as a result, this might have impacted negatively on their responses to curriculum implementation.

Jansen (2001b) indicates that failure of education policy is a direct result of the over-investment of the state in the political symbolic rather than its practical implementation in terms of personal availability of funds and related issues. My experience in schools shows that teachers are sometimes assigned to teach subjects not according to their areas of specialisation, but according to the needs of the school. Some teachers relate the issue of salaries to the question of work overload. As Stoffels (2004) notes, a lack of job satisfaction during curriculum change was apparent in the responses of some teachers who stated that curriculum change intensified teachers' workload. In his study in South Africa, Bantwini (2010:86) finds that teachers compared their remuneration with that of friends in other fields of work, and concluded that they were not fairly remunerated. Oloruntegbe *et al.* (2010:707) contend that teachers' salaries contributed to low motivation and negative impressions during curriculum implementation.

A study carried out by Action Aid aimed at showing how HIV and AIDS education was received by schools and implemented in India and Kenya. Among other things, the study found that attempts to implement HIV and AIDS education in schools was constrained by the existing social and cultural restraints and power inequalities in discussing HIV and AIDS and sexual relations (ActionAid, 2004). As a result, HIV and AIDS messages were not communicated at all or were taught selectively. In a study by Wood and Oliver (2007:175) in South Africa, it was revealed that teachers in general were unmotivated and demoralised and had little hope for positive change in the school system. Many of the teachers had lost their passion for teaching, but it

appeared that reflection was a powerful tool to assist teachers to gain their self-efficacy and sense of purpose. According to Osterman and Kottkamp (1993), reflective practice is a process that empowers the individual and the group and decreases defensiveness, alienation, powerlessness and isolation.

2.10.2.3 Teacher Knowledge

Priestley (2010:2) views teachers as having been situated in policy as facilitators of transformation. In the view, teachers are the official bearers of 'professional models of transformational change' (Priestley (2010:2; Scottish Executive Education Department, 2006). The meaning each teacher attaches to curriculum change acts as his or her map to understanding the new curriculum and the implementation journey, and frequently determines the success of the reform (Bantwini, 2010:89; Zimmerman, 2006:239; Perry *et al.*, 1999). Further, 'teachers employ their knowledge of daily conditions and experiences as lenses or windows through which they view new reforms' (Bantwini, 2010:89).

Bantwini (2010:89) further submits that beliefs, values, experiences and daily challenges influence and shape the meanings that teachers actually attach to the new reforms, which in turn play a vital role in their acceptance and classroom implementation. Lemon (2004:269) warns that ignoring these issues can aggravate the gap between political symbolism and implementation. It is a fact that the adoption of an innovation or change is influenced by social and cultural background of the individual (Toyin, Adebola, Motunrayo, Mohammed & Omeiza, 2010:8; Mackenzie, 2011:64; Perry *et al.,* 1998). In some circumstances, the shifting of occupational boundaries has led to a widely noted lack of clarity (Mackenzie, 2011:64) about teacher mandates in curriculum change.

If teachers are to implement change successfully, it is essential that they have a comprehensive understanding of the principles and practice of the proposed change (Carless, 1998:355). Carless mentions that it is desirable that teachers understand both the theoretical underpinnings and classroom application of the innovation, since the lack of sound subject knowledge leads to ineffective curriculum implementation. Fullan (2001b) warns of the cardinal fact of social change, namely that people will always misinterpret and misunderstand some aspects of the purpose or practice of

something that is new to them. Bantwini (2010:84) contends that it is important to know teachers' perceived meanings when aiming to understand and help them, particularly when the assigned meaning does not align with the intended new curriculum vision.

Similarly, Pennington (1995:705) submits that a teacher's awareness and knowledge of alternatives is coloured by that teacher's experience and philosophy of teaching which acts as a psychological barrier, frame, or selective filtering mechanism. In an investigation of implementation of a new language policy in Greek secondary schools, Karavas-Doukas (1995:53) found that teachers showed incomplete understanding of the reform they were mandated to implement, and that these misconceptions led to negative perceptions of the innovation. Teacher understanding can be enriched by generating specific teaching methods for the change, along with resource materials that can be used without adaptation in the targeted classrooms (Carless, 1998:556).

In Zimbabwe, the culture of silence is a popular assumption to explain the poor public policy on the institutionalisation of HIV and AIDS education to learners in secondary schools (Stuwart, 2004). As revealed by Musengi, Ganga and Mugweni (2011:2) the process of sexual maturation or growing up and its management in adolescence appear to be affected by a culture or the conspiracy of silence. This culture of silence in many communities including Zimbabwe is due to the observance of taboos and stereotypes associated with sexuality issues (Moyo & Muvezwa, 2004). Shumba et al. (2006:23) found that in the African culture, discussing issues on sexuality was wrongfully perceived as eroding societal values and norms. My assumption is that these taboos and stereotypes in the context of Zimbabwe make stakeholders hesitant to recommend the deliberate teaching and learning of HIV and AIDS information in early childhood classes (Musengi et al., 2011). It should be understood that a culture of silence creates a context where neither parents nor teachers systematically and deliberately inform young children about how to cope with HIV and AIDS and sexual abuse. The result is the children's lack of informed knowledge and skills for dealing with HIV and AIDS-related problems. The lack of informed knowledge, guidance and life skills often cause anxiety, stress, and emotional turmoil for the individual child (Moyo & Muvezwa, 2004).

Fuller (1994) conducted a case study in the United States of America to examine factors that primary school teachers say determine the formation and modification of their conceptions. Three female teachers (two taught sixth grade and one fifth grade) from public schools participated in the study. Data were collected using interviews and observations. Fuller found that the role of the teacher is important because the teacher makes decisions on whether or not to implement change. The study provides illuminative information on teacher conceptualisation and pedagogical practices in school policy and programmes.

Consistent with Fuller's (1994) findings, Thompson (1992) views teachers' understanding as emanating from their teaching experience and beliefs and that there appears to be a strong relationship between teachers' conceptions and their practice in classrooms. In day-to-day life we see, interpret and react to the world according to what we have experienced in the past. Cohen (1990:339) maintains that teachers are historical beings who do not simply shed their old ideas like a shabby coat and slip on something new. Cohen argues that as teachers reach out to embrace an innovation, they reach out with their old professional selves. An analysis of these findings in relation to my study portrays that, among other variables, critical to the classroom implementation of the AAPS are secondary school teachers' understanding.

In Zambia, Chiwela and Siamwiza (1999) carried out a survey to establish teachers' knowledge, attitudes, practices and skills in teaching HIV and AIDS prevention and psychosocial life skills. About 25% of the teachers said that they had limited knowledge of HIV and AIDS and psychosocial life skills. The teachers viewed themselves as unqualified for AIDS education. Of the teachers, 30% were of opinion that that sex education led to promiscuity among students. Some of the teachers revealed that they worried about their own HIV and AIDS status and were willing to share the sentiments with someone.

In South Africa, Prinsloo (2007) undertook a qualitative study on the extent to which schools and Life Orientation (LO) teachers succeeded in achieving outcomes of the programmes. Teachers' views regarding their training and skills in the LO area were investigated. Factors that determined successful implementation of the programme were probed. Data was collected using semi-structured questionnaires and interviews

with school principals and LO teachers. The results from the principals' data presented the following constraints in their creating a supportive climate for teachers' implementation of LO: lack of a value system, lack of parental involvement, the influence of the community, lack of proper role models among the teaching staff, difficulties with policies of the Department of Education, and issues of cultural diversity. All the principals of culturally diverse schools in this study mentioned that teachers had difficulty in creating relationships of trust and a climate of success in the classroom.

In Zimbabwe, using a narrative research design, Machawira (2008) investigated how three HIV-positive teachers in primary schools understood, interpreted and acted on the Zimbabwean school HIV and AIDS and Life Skills policy. The study found that in a context where AIDS is prevalent there are limits to what education policy can achieve if it remains out of touch with the real world where children and teacher 'are either infected or affected by HIV' (Machawira & Pillay, 2009:573). The study also found that while the Zimbabwean HIV and AIDS policy is about 'bodies' and about 'emotions', it is blind to the 'bodies' and the emotions of those implementing it. (Machawira & Pillay, 2009:573; Machawira, 2008) concludes that it is this oversight that creates the wide gap between policy intentions and outcomes. Some of the teacher factors can act as barriers to change as explored below.

2.11   BARRIERS TO CURRICULUM IMPLEMENTATION AND CHANGE

As elucidated earlier, curriculum implementation and change is both a 'highly complex phenomenon' (Carless, 1998:353; Markee, 1997) and one that requires further research. As a result, study after study indicates that there has been relatively little change behind the classroom door (Hall & Hord, 2001). Barriers to curriculum implementation and change have been seen to cause unsuccessful adoption and they frustrate implementation efforts.

A study undertaken in Australia by Burgess *et al.* (2010) on decisions of early childhood teachers in curriculum implementation, reveals that a range of factors, some of which are critical to successful change process, also act as barriers to change. A range of process and contextual factors that were recognised as key barriers to change are:

- Non-involvement or lack of support by key stakeholders (Stoll & Fink, 1996).

- Colleagues who have rejected initiatives (Hall & Hord, 2001; Anderson, 1997).

- Difficulty in maintaining motivation (Garet, Potter, Desimone, Birman & Yoon, 2000).

- The overwhelming nature of multiple initiatives (Fullan, 1999).

- Lack of knowledge of the change process (Hall & Hord, 2001).

- Lack of time (Easton, 2008; Little, 2001).

- Lack of confidence in working on the new curriculum material and habit (Ni & Guzdial, 2007:7; Greenberg & Baron, 2000).

- Failure to recognise the need for change (Zimmerman, 2006:239).

The study also found that barriers to change operated in school systems, and the most frequent factor was the impact of other stakeholders on the teacher. Sweeny (2003) notes that change facilitators should avoid ignoring what teachers say so that they understand the teachers' level of need for support and ensure that assistance is always on target. In combination these barriers cause similar responses of partial implementation or the decision to ignore and abandon particular changes (Burgess *et al.* 2010:56), resulting in the smouldering of the process of change (Lamie, 2004:115; Fullan, 1999). Similarly, Ni and Guzdial (2007) argue that the main barrier to adoption is the problem of convincing colleagues to implement a reform.

2.12   CONCLUSION

In this chapter literature on the AIDS Action Programme for Schools and teacher response to curriculum change is explored. The inclusion of HIV and AIDS education under the AAPS as a curriculum area ensures that the government of Zimbabwe's policy visions on reducing HIV infection among youths in secondary schools and the general population are achieved through fostering attitudes and behaviour change. In the initial phase of investigating literature, the Zimbabwe HIV and AIDS policy framework was explored. Of significance is the realisation that the Zimbabwe school-based HIV and AIDS prevention programme is driven by a strong policy framework.

Literature on professional development that had been explored revealed that there is lack of research that focuses on how teachers understand and implement policy in

Zimbabwean schools. Jansen (2007) agrees that while the bulk of research conducted so far has been useful at policy and advocacy level, there has not been adequate investment in a critical examination of the place called 'school'. According to Baxen and Breidlid (2004:17) there is a stark lack of research that focuses on teachers and schools. This emphasises the fact that there is very little research done to explore and fully and explicitly document experiences in schools related to the HIV and AIDS pandemic.

Further, Baxen and Breidlid (2004:17) observe that where teachers have been subjects of research, they have been seen as deliverers of an uncontested, already negotiated body of HIV and AIDS knowledge in schools. It has also been assumed that teachers, especially at secondary school level have not to be affected or infected by HIV and are able to teach sex education issues without being influenced by their own experiences during the lessons. In this regard, teachers have consequently been targets of training programmes that have largely portrayed them as lacking knowledge and skills to teach life skills and sex education effectively (Baxen & Breidlid, 2004:17). The reviewed literature reveals that teachers are key players in educational change and policy implementation.

Overall, literature reviewed shows that teachers respond to change in different ways (Bantwini, 2010; Burgess *et al.*, 2010; Zimmerman, 2006; Pennington, 1995). Teachers ignore or avoid change, resist change, adopt change or adapt the change. It also reveals that internal and external factors such as attitudes, experience, habits, support, and professional development impact on teacher response to curriculum change. Most of the studies done in Zimbabwe (Machawira, 2008; Chireshe, 2006; Chirume, 2007; Kasaira *et al.*, 2004), reveal teacher reluctance, lack of motivation and shortage of resources during policy implementation as barriers affecting curriculum change.

In this study, I undertook a qualitative stance and explored the secondary school context where the AIDS Action Programme for Schools was implemented by teachers. It is my intention, via this study, to contribute to existing research by introducing a line of inquiry that explores how teachers conceptualise and implement the school-based HIV and AIDS prevention programme. I contend that the teachers' conceptualisation (knowledge level), personal identities, attitudes, and concerns work

as filters of their told and acted (espoused and enacted) beliefs. What teachers talk about or what they do in their classrooms is critical to obtaining an insight into teacher understanding and implementation of curriculum reform. Similarly, teacher knowledge and beliefs also facilitate fidelity implementation or resistance to change, resulting in what (Jansen, 2001b) refers to as a policy for action versus policy in action dilemma. Chapter 3 discusses the theoretical framework of the study.

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