

Tutorial letter 103/1/2013

Inclusive Education B (Educational Themes 306)

ETH306W

Semester 1

**Department of Inclusive
Education**

This tutorial letter contains important
information about your module.

BAR CODE

Dear Student

This tutorial letter contains the following information:

- 1 General guidelines HIV/AIDS in our schools
- 1 **HIV/AIDS in South Africa**

1.1 Background

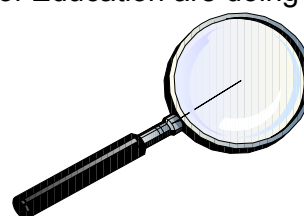
In your Study guide for Inclusive Education B there is no reference to HIV/AIDS. I'm sending you the following information because learners with HIV/AIDS are also regarded as learners with special needs in education system. The epidemic proportion into which AIDS/HIV is growing in South Africa and in other countries, does not involve only the learners with HIV/AIDS but also their families, friends, classmates and the whole education system. More information on HIV/AIDS is not enough anymore because attention should be urgently paid to the emotional and financial implications which HIV/AIDS has on the school system and the whole community.

Research indicates that South Africa has the fastest growing HIV/AIDS epidemic in the world. It is estimated that over four million people of South Africa's population of 40.6 million are HIV positive. About half of South Africa's population are children and it is probable that 50-65% of South African 15-year-olds will die of HIV/AIDS-related illnesses within the next thirty years. It is estimated that by 2005 nearly one million children will have lost one or both parents and by 2015 ten percent of the South African population - about 3.6 to 4.8 million children - will be orphans. It is therefore clear that the traditional ways of childcare will be under pressure to accommodate large numbers of children infected and affected by HIV/AIDS.

According to Coombe (2000, 3) the South African Governments new strategy concerning HIV/AIDS is up to now strictly focussed on the predisposing factors of HIV/AIDS, preventing or finding a cure and monitoring health interventions. It does not address the social, development, human rights, economic and infrastructural consequences of the epidemic for vital sectors such as labour, education, agriculture, the public service of the public sector. The Government has therefore come under pressure to consider how HIV/AIDS will influence the country's future.

1.2 The impact of HIV/AIDS on the South African education system

The influence of the HIV/AIDS catastrophe on the South African education is slowly beginning to show and scenarios for the future are bleak. It is estimated that at least 12 per cent of educators are reported to be HIV positive and that means that over 53,000 educators will die by 2010. By then school effectiveness is bound to decline rapidly because many other educators will be ill, absent and dying, or pre-occupied with family crisis. It is therefore difficult to make teacher requirement projections with any degree of confidence. The effect of HIV/AIDS will eventually also have to be taken into consideration when schools and the Department of Education are doing their budgets. The AIDS epidemic is producing many affected children and orphans, resulting in creased hardships, especially for impoverished families. Children from households with infected family members are for instance forced to assume care and adult responsibilities.



In a UNICEF report it is stated: 'Neither words nor statistics can adequately capture the human tragedy of children grieving for dying or dead parents, stigmatised by society through association with HIV/AIDS, plunged into economic crisis and insecurity by their parents= death and struggling without services and support systems in impoverished communities.'

1.3 South African schools and HIV/AIDS education

In the Department of Health's Executive summary of a National integrated plan for children infected and affected by HIV/AIDS it is urged that all existing initiatives should be integrate and accelerated. Programmes and initiatives in four fields were identified.

- 1 *Community-based Care:* As far as Community-based Care and support is concerned, the care system should be transformed to ensure effectiveness and appropriateness. Family and community strengths should be identified to maximise the potential of each community to care for their vulnerable children.
- 2 *Voluntary Counselling and Testing:* The provision of HIV counselling and testing services has been shown to decrease risk behaviours and may therefore result in decreased transmission of HIV.
- 3 *Primary schools:* In view of the magnitude of the task (8 400 000 primary school learners), the scarcity of human and financial resources, the potential impact that large scale full time training could have on the effective functioning of schools, a phased approach, following a cascading model, is advised.
- 4 Due to various factors the *support and sustaining of Secondary school programmes have been limited.* Although peer-group education poses some challenges, it is acknowledged that peer-group education is an effective way of reaching learners regarding issues such as sexuality education and HIV/AIDS. Various models are currently being implemented by a number of schools countrywide and wider implementation is recommended.

To put all these proposals into practice will take a lot of input and will be a mammoth task. This is reflected in a report of the former South African minister of Education, Mr Kadar Asmal. He stated that plans to combat HIV/AIDS in schools are hindered because of a lack of teachers who are trained to offer life skills as a school subject, vague Aids information and cultural and religious influences which offer resistance to sex education. In his report to President Mbeki, Mr Asmal indicated that even some of the teachers who have been trained to discuss HIV/AIDS with their pupils find it difficult to discuss the issue openly in a class. Some of the teachers mentioned that they do not have the necessary skills to give emotional support where needed and others indicated that they find it difficult to discuss sexuality openly. In the report it is also mentioned that other challenges will arise as the influence of the pandemic becomes evident in the school system. It includes the cost of relieve staff for sick teachers, the need for home and hospital teaching for sick learners and counseling for teachers who have not declared their Aids status.

2 Guidelines for examination preparation

2.1 The examination paper consists of Section A and Section B

Please note that your examination paper will consist of TWO sections. You must do **EITHER** Section A **OR** Section B depending on the school phase for which you are registered. **Please do not do both the sections!!!**

Section A - For ECD Phase students only

Section A consists of six questions.

Question 1 consists of 10 multiple choice question and 10 true/ false questions.

Questions 1 counts 20 marks.

Question 2- 6 counts 20 marks each.

You have an option to answer 4 questions from question 2, 3, 4, 5, and 6

Each of the questions counts 20 marks. That means 4 questions x 20 marks = 80 marks

Total of the examination paper = 100 marks

Some questions deal with the identification of an impairment. Some of the questions in the examination paper consist of a description of impairment and an explanation of the support that a teacher can give to a learner with this impairment in a classroom. Prepare yourself for such a type of question. Also look at the various learning problems including perceptual problems that young learners in the primary school might have.

Section B – For the Intermediate, Senior and FET Phase students only

Section B consists of questions 7, 8, 9, 10, 11, and 12. You have to answer question 7 which comprises 10 multiple choice questions and 10 True/ False questions.

Question 7 counts 20 marks.

From Questions 8-12 you have to do FOUR questions. Each of these questions counts 20 marks.

Thus, 4 X 20= 80. Subsections are provided in some of the questions.

Total of the examination paper = 100 marks

Some questions deal with the identification and characteristics of an impairment. Some of the questions in the examination paper consist of a description of impairment and an explanation of the support that a teacher can give to a learner with this impairment in a classroom. Prepare yourself in this regard.

2.2 Study guide and tutorial letters

Your study guide is quite comprehensive and therefore you can attend to the following sections for examination purposes:

2.2.1 Students registered for the ECD Phase

Study guide:

❖ **Read only:** Study unit A: Study Unit 3

- Section C Study Units 8 and 9
- Section D: Appendices: J, M

❖ **Study:** Section A Units 1 & 2

- Section D (page 142 and onwards) of the Study Guide. Concentrate on Appendices A, B, C, D, E, F, G, H, I, K, L and M
- Appendix N p319-327 (sections 1 and 2) Leave out O & P
- You should know the content of Tutorial letters 102 and 103 for the examination. There are questions on Autism and Down's syndrome in the examination.

2.2.2 Students registered for the Intermediate, Senior and FET Phases

Study guide:

- ❖ **Read only:** Section C

- ❖ **Study:** Section A: Study units 1, 2 and 3
 - Section B: Study unit 6
 - Section D: Appendices A, B, C, D, E
 - Appendices H and I
 - Appendix N p319 – 327
 - Appendices O and P
 - Content of the tutorial letters but you need **NOT study Down's syndrome** and **Autism for examination** and you need **NOT study** the section on HIV/AIDS of tutorial letter 103.

Best wishes with your studies!

Your lecturer

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