BARRIERS TO EDUCATION
ASSESSMENT REPORT

11 November 2009

CONTENTS

1. INTRODUCTION

Despite South Africa's successful transition to democracy; poverty, illiteracy and HIV & AIDS continue to dominate the lives of millions of South Africans.

The struggle many families experience in the face of high unemployment and low levels of literacy has been compounded by the onset of HIV and AIDS. The pandemic has led to a significant increase in the number of orphans in need of care. At the same time, poverty undermines the ability of the extended family to absorb these children. Already burdened by the demands of their own families, many find it impossible to extend their meagre resources to care for the children of family members lost to the pandemic.

Children growing up in these circumstances are often extremely vulnerable. They are rendered vulnerable by, amongst others:

- The demands of having to care for dying parents.
- The bereavement associated with the loss of their parents.
- The loss and lack of material security (household income, shelter, security of tenure and physical protection).
- The lack of food security resulting in hunger and an increased risk of malnutrition.
- The loss of childhood as a result of having to take on adult roles (e.g. provider and caregiver to younger siblings).

This may at times contribute towards:

- An increased likelihood of absenteeism, failure and premature exiting from formal schooling.
- An increased risk of substance misuse and involvement in (survival) crime.
- An increased vulnerability to exploitation (violence, sexual abuse, child labour etc).
- An increased vulnerability to HIV infection and teenage pregnancy.

The objective of the Barriers to Education Project is to strengthen children, families, schools and communities to create an enabling environment in which all children can recognise their full potential.

The interventions planned were based on identified barriers to education occurring at the individual, household, school and community level and the activities of the various project partners have been structured to simultaneously intervene at these various levels over a three year period to mitigate these barriers and help create a environment conducive to learning and a community that is passionate and committed to the education of its children. The project included significant capacity building elements through which members of the community were be capacitated and resourced to continue these activities after the withdrawal of the project partners. In this way, the project will create a mechanism for individuals, households, schools and the broader community to sustain enabling learning environments and to continue to support the learning and development of their children.

To date, the Barriers interventions have largely focused on addressing infrastructure development such as material, physical, cognitive and emotional well-being of OVC's through interventions at three selected schools (Thuthukisa, Gabangolwazi and Nkumani) in the Richmond area of KwaZulu-Natal South Africa. However, it is well known that to secure the future of an individual one of the best investments that can be made is in their education. Education is also a cornerstone for prosperous economies and a key to sustainable development.

2. COMMUNITY BACKGROUND AND CHARACTERISTICS

Richmond is located in the uMgungundlovu District Municipality in the KwaZulu-Natal Midlands. The northern boundary of the Municipality is located approximately ten kilometers from the N3 highway. The Municipal centre, Richmond Village, is situated about 38 km south-west of Pietermaritzburg. Historically, this geographic area was partly in a former homeland and on the edge of the former Natal province. The context was one of poverty and unemployment. Few local job opportunities meant that many breadwinners were absent from home because of migrant labour. Children would thus have experienced disruptions in the family unit, absence of adults, and a poor socio-economic environment.
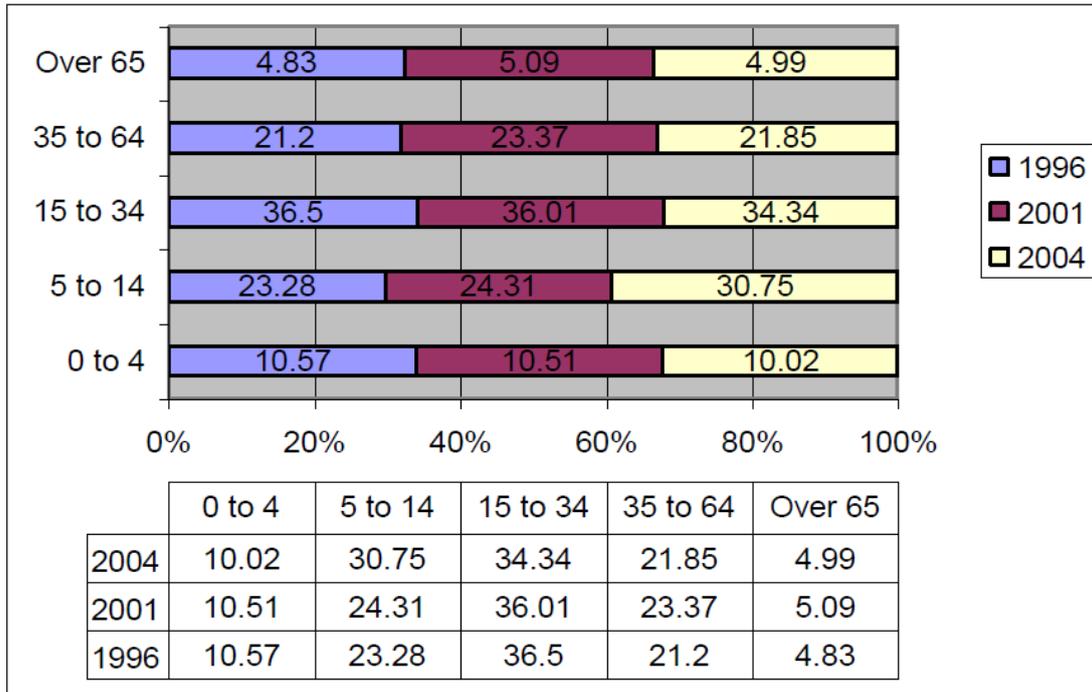
2.1 Population

Trends According to the 2001 census data, the total population of the Richmond Municipality is approximately 63 222 people (MBD: 2005). This marks a proportionately marginal growth rate from 61 673 people recorded in 1996, in fact the population increased by only 1549 people during this decade.

An overall population growth rate of 2.51% per annum for the Richmond area is higher than the estimated overall population growth for South Africa of 1.0% per annum over the period 2000 to 2010 (Barker, 2003:49). The projected population figure for the Richmond area in 2004 is estimated at 64 072 and was estimated using the 0.7% per annum growth rate. The information received from Global Insights suggests a much higher figure compared to the census data. It estimates the current (2006/07) population at about 79 325 people.

2.2 Age

As indicated in the table below, population is dominated by the youth (15 to 34 years of age) which accounts for 23 333 people or 37% of the total population. This has serious implications in terms of development planning. It requires the municipality to develop and implement programmes addressing the needs of a youthful population. These may include education facilities, creation of job opportunities and improving access to social facilities. Most importantly, emphasis should be paid to promoting a positive living and managing the devastating impact of HIV & AIDS.

Table: 2.1: Age Structure

	0 to 4	5 to 14	15 to 34	35 to 64	Over 65
2004	10.02	30.75	34.34	21.85	4.99
2001	10.51	24.31	36.01	23.37	5.09
1996	10.57	23.28	36.5	21.2	4.83

2.3. The Impact of HIV & AIDS

It is estimated that between the years 2000 to 2010 approximately seven million South Africans will die from HIV & AIDS related diseases. The number of deaths from HIV & AIDS will be considerably larger than that from any other single cause of death and will probably double the number of deaths from all other causes combined. According to research conducted by the then Town and Regional Planning Commission, it is projected that by the year 2020, the rate of infection and deaths from AIDS related diseases would increase dramatically. A recent study conducted by the University of KwaZulu-Natal reveals a 41% prevalence of HIV & AIDS at antenatal clinics within the uMgungundlovu District Municipality. Even though the infection rate of HIV & AIDS in Richmond and KZN could not be ascertained with accurate certainty it can still be inferred that the HIV & AIDS pandemic will lead to the following:

- A significant number of households will suffer a loss of income when the economically active member/breadwinner dies of the HIV& AIDS pandemic.
- Families of HIV & AIDS victims will be forced to divert their income, which could have been used for other socio-economic activities to conduct burial ceremonies which themselves have become very expensive.
- The economy of Richmond in particular and KZN province will be negatively affected as income will be lost due to absenteeism caused by ill health and the necessary training of new incumbents additionally, learners education is compromised due care for individuals affected by HIV.

2.4 Educational Level

Table 2.2: Education Profile

HIGHEST EDUCATION LEVELS ATTAINED BY OVER 20 YEAR OLDS	2004	2001	1996	% CHANGE 1996 - 2001	% OF OVER 20 YEAR OLDS, 1996	% OF OVER 20 YEAR OLDS, 2004
No Schooling	10449	10457	10468	-0.11	33.61	28.11
Some Primary	9698	8599	7347	17.04	23.59	26.09
Complete Primary	2302	2302	2302	0.00	7.39	6.19
Secondary	8858	8294	7605	9.06	24.42	23.83
Grade 12	3859	3351	2788	20.19	8.95	10.38
Higher	2001	1200	635	88.98	2.04	5.38

As indicated in the table above, the overall percentage change in persons with no schooling as a percentage of the total number of over 20 year olds decreased moderately between 1996 and 2004. The encouraging statistics are the large increases in those with grade 12 and higher education of 20% and 89% respectively. This means that 40% (35% in 1996) of the Richmond area population has some secondary, matric level and or higher education. This has implications for poverty reduction and productivity growth in the labour sector. Although there is a 10.38% increase compared to 2001 and 1996 learners still faces many barriers to education.

2.5 Employment

The rate of unemployment in Richmond is 39.45% which means that for those employed; the ratio of dependency is eight people dependent on every earner (Richmond Municipality IDP, 2007). This situation also affects household incomes, with 77% of households subsisting on less than R1500 a month in 2007.

Table 2.3: Employment Status

Employment status (number of persons)	
Employed Full-Time	27.73%
Self-employed	4.69%
Sub-total	32.42%
Part time / contract / temporary	7.81%
Casual	0.39%
Unemployed	39.45%
Housewife	4.69%
Pensioner	15.23%
Sub-total	67.57%
TOTAL	100%

Source: LED Assessment report UMDM-November 2006 (uMDM IDP Review 07/08)

3. METHODOLOGY

Teachers and learners from three schools participated in this assessment: one was a primary school Gabangolwazi in which only the principal was interviewed, and two were high schools (Thuthukisa and Nkumani), both learners and teachers were interviewed. The assessment required a selection of schools that were assisted in resource and infrastructure development. The area sites are characterised as small towns in KwaZulu-Natal and surrounding schools that were affected by severe political conflict in the 1980's and 1990's. The three schools assessed ranged from deeply rural primary and high schools with limited resources where all learners and teachers are isiZulu speakers. The sampling for the assessment was purposive addressing the objective of the Barriers to education project which is to strengthen children, families, schools and communities to create an enabling environment in which all children can recognise their full potential. The assessment required a selection of learners that would represent those in the programme.

Participatory techniques using focus group interviews were used in this assessment. Participatory techniques focus on context of this assessment as a discursive space where there is interplay of social and political forces and unique power relations. It addresses the failure of other techniques to give voice to participants. According to Prosser (1998) participatory techniques result in collaboration between researcher and participant, the latter becoming involved in the research process as equal partner. Babbie (2002) explains that participatory techniques to data collection make possible the production of knowledge in an active partnership with the participants who are affected by that knowledge. Participatory research techniques are favourable in that it attempts to eradicate the power imbalances between the researcher and the participants in the research. The participants become the co-researchers in the assessment whose knowledge of the community they serve is valued for sense-making.

Using participatory techniques would enable a greater chance of inquiry and investigation. Willig (2001) and Babbie (2002) argue that participatory techniques are not only appropriate for researchers particularly concerned with social redress, but also singularly appropriate to the particular nature of the assessment where a sensitive issue is being addressed.

3.1 Focus group interviews

Focus group interviews were used to access learners understanding and experiences' of the Barriers programme in the context of HIV and AIDS. Focus groups are group interviews. De Vos (2002) explains they are a means of better understanding how people feel or think about an issue. Learners were selected because they have certain characteristics in common that they could relate to the topic. The group is "focused" in that it involves some kind of collective activity. According to De Vos (1998), in focus group interviews the interviewer is normally called the moderator because the role of the interviewer is to stimulate the participants to communicate. The moderator stimulates communication from the participants. He or she needs to facilitate the group through identifying and utilizing the group dynamics, exploring the range of attitudes, opinions and behaviours in the group; and observing and facilitating the process of agreement and consensus in the group.

4. KEY FINDINGS

During the assessment it was identified that the same themes or issues were raised during the focus group interviews. Issues were then grouped to form themes. These themes will be discussed further below.

4.1 Curriculum

Curriculum silence occurs when teachers, teach knowledge about HIV & AIDS and sexuality selectively. Social and cultural constraints in discussing HIV & AIDS, sexual relations and power inequalities are impeding teachers' efforts to discuss HIV & AIDS and manifests in the practice of 'selective teaching' as follows: entire lessons on HIV & AIDS and sexuality not being taught from the syllabus, no direct reference to sex in HIV & AIDS lessons, and messages on abstinence as the sole means of communicating about HIV and sexual relations. The teachers in the assessment suggested the following reasons for selective teaching:

- difficulties in discussing sex (a taboo subject), resulting in discussions of HIV without talking about sex, for example:

You know it's very difficult to tell a learner who does not have the basics at home. You are only coming with this subject in the classroom whereby the learner is expecting to you to teach subject matter not other matters in as far as life is concerned . Its just ABC, abstain, be faithful, use condoms. And we tell them to abstain. That's how we just end there. We don't go as far as being faithful and using condoms because they are not yet that age.

Societal and religious pressures condemn discussion of safer sex, leading to HIV & AIDS lessons emphasising abstinence without introducing issues on safe sex. Another reason given by teachers for selective teaching is that parents disapproved of their children being taught about sex. However, the life-skills programme in the schools have created an enabling environment/space for learners where learners are able to engage psycho-social challenges they face and are encouraged and supported to become more active, resourceful and constructive agents in their own learning, education and personal development. Learners feel more comfortable talking about different issues such as HIV & AIDS, teenage pregnancy, rights and responsibility of children, life stages etc. It was encouraging to know that learners are beginning to communicate these issues with their parents even though at times could be difficult to articulate due to cultural norms. Learners are also talking about such issues amongst their peers. Furthermore, learners feel comfortable to talking openly to community health care workers (CHCW) about these issues as an enabling environment is created for the learners. Learner's have said that the (aunties) are good to them are not judgemental. This suggests that teachers need further training in how to educate learners about issue of HIV & AIDS, sex etc. Furthermore, this also indicates that teachers feel that it's the parent's responsibility to talk about such issues with their children; thereby, their lack of commitment to teaching learners these matters. Additionally, the school principal from Gabangolwazi suggested that the life-skills programme should be aligned with the school curriculums which complement each other as well as been consistent in what one teaches.

4.2 Barriers experienced in the school context

To avoid merely assuming that learners experience only barriers to education, learners were specifically asked about conditions that impacted on their motivation to attend, and perform well at school. Learners commented that they attended school for educationally based reasons (e.g., to learn to read and write, to do mathematics, to enable them to get a job one day, etc); social factors (e.g., to see friends and play sport); family/parental motivators (e.g., wanting to do well to please parents or family), and physical reasons (e.g., to get food). Performance in class, and participation in class in particular, seemed to be determined by personality characteristics (e.g., being extroverted or shy) as well as by the desire to appear knowledgeable to others. Interaction with friends, participating in sport and the availability of food seemed to be particularly important as motivating factors for learners in grades 8 and 9. However, it was evident that the learners in the assessment experienced various barriers to obtaining an education. Barriers experienced within the school context can be categorised into those related to (I) access to educational resources (II) problems experienced by learners with response to their educators (III) absenteeism (IV) pregnancy.

4.2.1 Educational resources

Learners experienced various deficiencies in terms of access to educational resources such as computers, textbooks and library facilities, etc. Learners from the two high schools described the library as "like a picture" (for looking at but not for use). However, there were some positive reports; for example, some disagreed and stated that they do use their library often. The use of the library depended entirely on leaner initiative and willingness to learn. Learners from Thuthukisa stated that library books can only be read in the library and cannot be borrowed. In addition, many learners complained about the quality and quantity of human resources available at their schools in relation to educators, administrative and cleaning staff. For example, having insufficient cleaning/maintenance staff meant that children were commonly required to sweep and clean their classrooms at times that may have been used for educational activities. This was also observed by the assessment team on their visits to the schools. It is understood that it's not a bad thing for children to take ownership of their schools; however, it becomes a problem when learning time is devoted or taken up to cleaning the school. In addition, these schools are resource poor and are therefore unable to employ cleaning staff. It is imperative then that the School Governing Body mobilise to get parents involved in the up-keep of the school as the school belongs to the community and therefore need to take care of its assets. Parents need to be more active and involved in their children's learning.

Table 4.1: Observed change due to educational resource provision

Educational Resources	Observed change
The following resources have been purchased **Thuthukisa**: Chalkboards, Computers, fitting locks and bookshelves, computer desks, chairs, burglar guards (windows and doors), cabling	✓ Having the installation of bookshelves has made it possible for learners to use books at the library, which helps learner to complete their assignment better, however, learners are allowed to use the books in the confines of the library. ✓ The availability of computers provided at Thuthukisa is not only proving to be useful to learners at the respective schools but has also become an asset to the community members who are now able to have documents such as the curriculum vitae etc typed up without incurring the cost of going to Richmond (town). The computers have since been stolen from Thuthukisa but this matter is being actively followed up with the police.
Gabangolwazi: Partitioning of the school hall (to be used as classrooms and converted to a hall when necessary), strong room, chalk boards and tiling of resource centre in progress.	✓ The provision of the partition created fewer disturbances in the class room for both the grade R and one learner. They are able to learn independently. ✓ Grade one learner's reading skill has improved because they are able to concentrate better. ✓ Teacher attitudes to learning have improved since chalk boards have be erected. Teacher is able to be more effective and able to provide more examples to illustrate lesson objectives. ✓ Having the strong room has assisted in the security of school property and valuable assets. We are now able to purchase a photocopying machine and television set that will improve learning at the school.
Nkumani: Resource Centre (computers, cabling, computer desks, chairs, bookshelves, Burglar guards in progress.	✓ The availability of computers provided at Nkumani is not only proving to be useful to learners at the respective school but has also become an asset to the community members who are now able to have documents such as the curriculum vitae etc typed up without incurring the cost of going to Richmond (town).

Educational Resources	Observed change
	✓ Learners use the computer on a rotational basis. They able to understand what a data base is and the basics of computing. ✓ Currently, they do not have a computer teacher to ensure learning continues.

4.2.2 *Problems experienced by learners with respect to their educators*

Learners often experienced the behaviour of their educators as barriers to learning. Although educators in such settings face many challenges, learners comment that they do not explain sufficiently, and are often critical or personally derogatory when learners give incorrect answers or ask questions. Learners complained that educators were often not approachable or were absent. At Nkuname learners have articulated that they seldom use the computers as there is no computer teacher. The teacher however stated that the teacher who assisted sought employment at another school on a part-time basis but will be back next year. On the other hand, computers that have been donated to Thuthukisa through the Barriers programme have been stolen; however the school Principal said their working with the police in trying to recover them.

4.2.3 *Absenteeism*

Learners acknowledge that not attending school hinders their academic progress. Either their own physical illness, or that of family members, other problems at home, as well as lack of resources (e.g., no clean uniform), caused this absenteeism. Deliberate absenteeism in the form of truancy was associated with delinquent behaviour such as stealing and substance use (cigarettes, dagga, and alcohol). Some learners said that children had to work and therefore did not attend school. This work included references to sex work, which is an unfortunate consequence of the learners' poverty stricken context. Additionally, it was found that a trend occurred during certain days of the week due to the provision of food at schools. Teachers have noticed on the specified days the programme provide meals attendance is almost at 90% presence. This also suggests the level of poverty in the community is high and children use different coping mechanisms to source food. This is also possibly an indicator that some of these children are from child headed households who are unable source social grants as some could be under the required age to apply for social grants.

4.2.4 *Pregnancy*

For many female learners, schooling is disrupted by pregnancy. It appears girls are often in relationships that have unequal power dynamics and the female learner is left with the responsibility of the pregnancy and disrupted schooling. Schools seem to adopt different responses to these pregnancies such as expelling the female learner from the school being one of them.

This is a way in which gender discrimination forms a barrier to learning. The learners were aware of pregnancy as a potential barrier to learning. One of the educators at Thuthukisa has indicated that pregnancy is still high; she has requested that the programme should assist and perhaps intensify on the life-skills programme. However, the programme can only do so much and the rest is up to the learners, parents and the community at large. Furthermore, this also indicates that learners are not practicing safer sex. Some learners have articulated:

"I would like to learn and finish at school without falling pregnant (Grade 9)". Some are forced to do things they do not like to do, then they keep quiet, they don't talk. (Grade 9)"

5   CONCLUSION

The town of Richmond and its surrounding communities gained prominence in the media and in the political arena in the 1990's through the violence that wracked the area. Richmond in 2006 has fallen off the map with poverty as it's the most debilitating and pervasive exclusionary pressure. In its intersection with other factors, in particular HIV and AIDS, poverty deepens, entrenches, and sustains oppression in this community. People struggle to survive without the political influence to change the situation.

Barriers experienced within the school context related partly to the poor infrastructure within the broader community, with the rural and deep rural schools evidencing particularly difficult conditions, and partly to deficiencies in educational and infrastructural resources in the schools themselves. Children face many hardships which makes attending, accessing and participating in school difficult. These circumstances create challenging conditions for learning and make the learning process a struggle for these children.

Interventions such as the Barrier programme have tried to create enabling spaces where children are able to engage with the psycho-social challenges they face. They are encouraged and supported to become more active, resourceful and constructive agents in their own education and personal development. The provision of infrastructure is important to ensure that learning takes place. However, more interventions need to be aimed at multiple levels, thereby not only addressing material needs but also beginning to address a fractured society and individuals. Thus, effective interventions should not only be confined to a surface level of providing facts and facilities, but need to be designed to assist with a deeper process of healing.

It was a privilege for Sinani to be involved in this pilot project and we thank CINDI and its partners for this valuable opportunity to follow up on the research conducted by the University of KwaZulu-Natal. Sinani remains committed to ongoing follow up with the schools in Richmond and we look forward to reporting further on the progress of this work.

6   REFERENCES

Babbie E. (2002). *Social Research.* Belmont, CA: Wadsworth Group.

De Vos, A.S. (1998). *Research at Grassroots: A primer for the caring professions.* Pretoria: Van Schaik Publishers.

De Vos, A. S. (2002). *Research at Grassroots: For the social sciences and human science profession.* Pretoria: Van Schaik Publishers.

Prosser, J. (1998). Image based research: A sourcebook for qualitative Researchers. London: Falmer Press.

Richmond IDP Review. (2007/2008). Richmond Municpality Intergrated Development Plan Review.

Willig, C. (2001). Introducing qualitative research in psychology: adventures in theory and method Open University Press Publishers