

UNDERSTANDING CURRENT TEACHER IMPLEMENTATION OF ZIMBABWE'S PRIMARY SCHOOL AIDS CURRICULUM: A CASE STUDY.

STARLIN MUSINGARABWI

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**UNDERSTANDING CURRENT TEACHER
IMPLEMENTATION OF ZIMBABWE'S PRIMARY
SCHOOL AIDS CURRICULUM: A CASE STUDY**

Starlin Musingarabwi

**Submitted in fulfilment of the requirements for the degree of
Philosophiae Doctor Educationis in the Faculty of Education at the
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Promoter: Prof Sylvan Blignaut

DECLARATION

I, STARLIN MUSINGARABWI, 200059889 hereby declare that the *thesis* for Philosophiae Doctor Educationis is my own work and that it has not previously been submitted for assessment or completion of any postgraduate qualification to another University or for another qualification.

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ABSTRACT

Zimbabwe's Ministry of Education Sport, Arts and Culture offers as one of the primary school curricula, an AIDS curriculum which all Grades 4 to 7 teachers in Zimbabwe's primary schools mandatorily implement with a view to contributing towards the prevention of the spread of HIV/AIDS among the young primary school learners. The purpose of this research was to explore and describe teachers' understanding and implementation of Zimbabwe's primary school AIDS curriculum regarding the ways in which they articulated teaching practices and processes in their classrooms. The study also aimed to elicit the teachers' views on how personal and contextual factors impact their adaptation and enactment of the curriculum. The study also sought to establish teachers' perceptions of their practical experiences with the implementation of Zimbabwe's primary school AIDS curriculum and their suggestions for improving practice.

The study follows a qualitative case study design with minimal quantitative results. It involved three purposively selected primary school grade six teachers (n=3) each of whom was asked to teach five lessons while being observed over a period of three months. Each teacher availed his or her teaching scheme/plan to the researcher who conducted document analysis to glean their symbolic conceptualisation of actual classroom practice of the curriculum. This was followed by three semi-structured interviews with each participating teacher to elicit their perceptions.

A content analysis using ideas borrowed from the grounded theory approach was employed resulting in thematic findings. The findings of the study confirm and enhance the theoretical significance of the phenomenological-adaptive perspective of educational change and Honig's (people, policy, places) and cognition model for describing teacher implementation of the mandatory AIDS curriculum. The findings also confirm the complex ways in which human-generated personal and contextual factors played out in framing and shaping teachers' personal adaptation of the mandatory AIDS curriculum. The study confirms the adaptation claim that as cognitive sense-makers, teachers mutate and enact a curriculum according to their personal subjective interpretations in the context of unique use-setting implementation realities.

Although one of the participants' understanding and practice displayed considerable comprehension of the requirements of the curriculum, the other teachers displayed an understanding of this curriculum in a superficial way, and experienced few positive experiences and several conceptual and operational constraints in its implementation. Drawing on their practical experiences with the implementation of the curriculum, teachers offered suggestions for transforming the implementation proficiency of this curriculum, which formed part of the conceptual strategy I developed for improving practice. Thus the resultant achievement of the study was a conceptual strategy that was constructed from the key findings of the study to provide educational change leaders with nuanced ideas and insights for improving practice.

Key Words

AIDS

Curriculum

Teacher implementation

Cognitive sense-making

Curriculum adaptation

ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral Therapy
ARV	Antiretroviral
BEAM	Basic Education Assistance Module
CDU	Curriculum Development Unit
COP	Community of Practice
CPTD	Continuing Professional Teacher Development
EFA	Education for All
HEAIDS	Higher Education HIV and AIDS Programme
HIV	Human Immunodeficiency Virus
ID	Implementation Dominant
MDG	Millennium Development Goals
MoE	Ministry of Education
MoESC	Ministry of Education, Sport and Culture
PLWHA	People living with HIV/AIDS
SADC	Southern African Development Community
TE	Technical Empirical
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNESCO	United Nations Educational, Cultural and Scientific Organisation
UNICEF	United Nations International Children's Education Fund
ZIMSEC	Zimbabwe Schools Examination Council
ZNASFP	Zimbabwe National HIV-AIDS Strategic Framework Plan

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CHAPTER 1

ORIENTATION TO THE STUDY

1.1 INTRODUCTION

In the domain of education, the phenomenon of change has always been, and still remains, the hallmark of curricular practice. According to Fullan (2001:31), educational reforms are driven by several factors ranging from natural disasters to deliberate reform to initiation of change as a result of dissatisfaction with current practices. Zimbabwe's primary school AIDS curriculum was adopted in response to the AIDS pandemic perceived by the government as a national epidemiological 'disaster' and dissatisfaction with a school curriculum that lacked HIV/AIDS preventive education interventions.

It appears that whenever societies are confronted with social ills such as the AIDS pandemic, policymakers are quick to defer the responsibility of ameliorating the problem to schools. Consequently, most countries worldwide (including Zimbabwe) have introduced school-based educational interventions as perceivedly the most promising leverage for alleviating the gravity of the pandemic's adverse effects on humankind. The exponentially high HIV-related death rate and the high prevalence of persons living with AIDS (PLWHAs) have forced governments to introduce HIV/AIDS school curricula in order to arrest the spread of HIV. A 2011 HIV/AIDS report states that globally, as of 2009, 1.8 million people died from illnesses related to the pandemic while another 2.6 million were infected with the HIV virus (ONE/HIV/AIDS, 2011:1). The 2000 World Education Conference held in Senegal acknowledged the debilitating effects of HIV/AIDS on the Third World development imperatives of Education for All (EFA), citing HIV/AIDS-related teacher and learner morbidity and mortality (UNAIDS, 2009:3). Deliberations emphasised the role of HIV/AIDS preventive education in meeting the Millennium Development Goal (MDG) of halting the spread of HIV/AIDS by 2015 (UNESCO, 2004:6).

General curricular features commonly present in HIV/AIDS school curricula originating from global discourses illustrate a reflection of their international character

which importantly provides the bigger picture of their conceptual origin. The 2005 International Symposium on HIV/AIDS held in Limerick, Ireland, re-emphasised the importance of teaching the youth life skills, sexuality education and reproductive health using participatory methodology. Importantly, the 1995 Jomtien, Thailand and the 2000 Dakar, Senegal World Education Conferences had also highlighted the inclusion of these curricular features in HIV/AIDS school curricula (UNAIDS, 2009:3). Consequently, the common position that world governments re-affirmed was to use schools as strategic nerve-centres for providing formal HIV/AIDS preventive education to youth through participatory methods. While participatory methods were seen as the best tool to halt the spread of HIV/AIDS among the presumably sexually active youth (Rumano, 2009:5), how teachers understand, respond to and are faring with and experiencing the implementation of the HIV/AIDS curricula in specific work conditions has seldom been questioned.

1.2 BACKGROUND TO THE STUDY

Zimbabwe's primary school AIDS curriculum was introduced in 1993 after the first AIDS case was reported in 1985, in the context of a social landscape characterised by the rapid spread of HIV and AIDS. Government's intervention strategies found expression in an AIDS policy that celebrates a multi-sectoral approach to combating HIV/AIDS, by involving the country's various sectors, namely government ministries, non-governmental organisations, civic groups and churches (National AIDS Council, 2008:3). Policy mandates the Ministry of Health and Child Welfare to take a leading role in the fight against the pandemic, while other sectors play their part within their various capacities. Within the HIV/AIDS policy framework, the Ministry of Education, Sport and Culture (MoESC) has contributed to the fight against the pandemic through designing, developing and implementing school AIDS curricula.

The formal teaching of HIV/ AIDS in primary schools came about through the release of the Chief Education Officer's Circular Minute No. 16 of 1993 which stipulated that HIV/AIDS education was to be taught once a week in 30-minute lessons from grades 4 to 7 (MoESC, 2009:9). However, Zimbabwe's AIDS curriculum implementation efforts have had their fair share of challenges.

The ineffective implementation of the country's primary school AIDS curriculum has been widely acknowledged together with several primary and secondary school AIDS curricula in sub-Saharan Africa (Mugimu and Nabadda, 2010:2; Panchaud and Poncet, 2004:20; Van Rooyen and Van den Berg, 2009:81- 82). Mugimu and Nabadda (2010:9) and Panchaud and Poncet (2004:21) assert that in most African countries, inadequate teacher preparation and a consequent lack of knowledge and understanding of the HIV/AIDS school curricula among teachers have caused superficial, ineffective classroom mediations of HIV/AIDS education interventions. Teachers rarely use interactive, participatory approaches that enhance learners' development of critical thinking life skills such as brainstorming, group discussions, role play etc. (De Lange and Stuart, 2008:130; Okore, 2009: xi).

The foregoing evidence indicates that ineffective teaching of the AIDS curriculum is prevalent in most African countries, including Zimbabwe. Thus, how teachers currently understand and enact this curriculum should be investigated.

Teachers are the key agents of any educational change and they determine the successful implementation of a curriculum through classroom teaching. However, much more focus has often been placed on funding, resources and materials and the nature of the learner, than on teachers' place in the educational change process (Mawere, Shava, Matsinde and Zivanai, 2006:38). Regarding the HIV/AIDS pandemic, the notion of education as a 'social vaccine' for arresting the spread of the virus (Wood and Hillman, 2008:39) underlines the central role that teachers have to play as the most strategically positioned people to mediate school HIV/AIDS interventions (Bhana, 2009:167). Yet, as the pandemic has increasingly translated preventive policies into an educational curricular edge, not much nuanced research evidence is available on how teachers are responding to these interventions and the conditions under which they mediate them (UNAIDS, 2009:6). In this doctoral study, three notions are considered as guidelines for understanding the implementation of Zimbabwe's primary school AIDS curriculum.

First, together with a myriad of broad contextual factors that may explain how teachers are implementing this curriculum, the selected key variables endogenous and exogenous to the teacher account for the enactment of education policy in classroom practice, either positively or negatively.

As teachers make sense of and enact the AIDS curriculum, key variables endogenous to them, namely pedagogical knowledge and skills obtained from teacher preparation at pre-service and in-service levels as well as commitment and teacher self-confidence to teach about HIV/AIDS are important factors for consideration. Some variables external to teachers constitute implementation opportunities or constraints and they are therefore critical considerations in this thesis. These variables include the characteristics of the innovation itself, facilitative implementation support in the form of professional development or lack thereof and the availability or non-availability of resources and materials.

Secondly, other important factors that may emerge in this exploratory study could revolve around and even be associated with the identified key factors, in some cases influencing them in the educational change process.

Thirdly, a conceptual analysis strategy for understanding curriculum implementation that takes into account the myriad of factors explaining the teaching of a curriculum seems to be useful as it may provide a meaningful, holistic understanding of the problem at hand. It recognises the fact that treating the teacher as the main source of educational change does not of necessity relegate to the periphery other important implementation factors in the curriculum change equation. It simply re-emphasises the central, overriding role that teachers play in translating a written curriculum into practical classroom action.

1.3 THE RATIONALE FOR THE STUDY

The detection of symptoms of superficial and ineffective teaching of Zimbabwe's primary school AIDS curriculum in Musingarabwi's (2004:1, 38, 54) survey evaluation is the motivation of this study. In the survey, a good number of the closed questionnaire responses of teachers pointed to problems related to knowledge and skills to teach the curriculum as expected by its specifications (Musingarabwi, 2004:54). Since this was a general survey its findings could reflect the tip of the iceberg of a deep and complex problem. No emboldened investigation to discover possible aetiological issues that could explain teachers' apparent problems in

implementing it was made. This research seeks to fill this knowledge gap. While some studies have highlighted ineffective teaching about HIV/AIDS, there is a paucity of research-based knowledge obtained from inquiry in classrooms to discern the opportunities and constraints, motivations and frustrations that HIV/AIDS teacher-educators experience as they implement this characteristically emotion-laden, sensitive curriculum.

This study is further motivated by the concern that the teaching of this subject has been as minimal as to be reducible to almost non-implementation (Musingarabwi, 2004:1). Such a scenario compromises what Berman (1981:260) refers to as technical validity of the curriculum – the maximum benefits students derive from learning a curriculum. In the face of potential deterioration confronting this curriculum due to ineffective teaching, it is prudent in this study to investigate how current teachers are implementing it, and the factors that they perceive as opportunities for or barriers to their enactment of this curriculum.

Blignaut (2007:4) attributes the perennial policy-practice dichotomy that has haunted the education fraternity for decades to curriculum managers' neglect of an understanding of the complex cognitive and affective as well as contextual factors that influence teachers' day-to-day operations in their schools. Teachers engage in a deliberate process of cognitive sense-making of a curriculum, trying to interpret and teach it. We therefore cannot afford to ignore how teachers display their understanding of the policy messages of the curriculum and the concomitant possibilities and constraints that they ascribe to the mediation of this sensitive, complex curriculum, and more so, when problem indicators associated with its pedagogical and didactical dynamics have been detected (Panchaud and Poncet, 2004:21; Van Rooyen and Van den Berg, 2009:81).

It is thus argued in this study that unless the opportunities and obstacles that teachers encounter in their implementation efforts are explored, it is doubtful that the policy intents of this curriculum will ever find expression in the classroom.

1.4 PROBLEM STATEMENT

About seven years ago at a primary school in the Gweru Urban school district, I detected symptoms of potential deterioration of the AIDS curriculum, where teachers accorded it minimal or no attention. Only recently, the Midlands Regional Director of Education decried the general neglect of this subject (MoESC, 2009:7). These indicators seem to link with primary school teachers' resentment of the AIDS curriculum and their uncertainty as to the meaning and purpose of the programme that were revealed in Musingarabwi's (2004:2) evaluation survey, suggesting difficulties in adapting it.

The possibility of the persistence of little or no teaching of this curriculum, as well as superficial teaching of the curriculum, necessitates exploration and discovery of aetiological dynamics that could explain the complexity underlying the implementation of this crucial subject curriculum from the perspective of the teacher as the central focus.

The thesis of this study is that since teachers are the engines of educational change and most profoundly impact on the teaching of a curriculum, it is necessary to discover and extract from them those key factors endogenous and exogenous to them which they view as promoting or hindering their understanding and enactment of the curriculum. The question that thus arises is, "How can we obtain a comprehensive understanding of the implementation of the AIDS curriculum when we do not know much about the common experiences of individual teachers with regard to the curriculum and how they enact it, particularly when glaring flaws have been detected in its implementation by different users?" (Katsinde and Katsinde, 2002:104; Musingarabwi, 2004:1; 54).

1.5 THE RESEARCH QUESTION

How do Grade 6 teachers currently teaching the AIDS curriculum display their understanding of its implementation, implement it and experience its implementation?

1.6 RESEARCH SUB-QUESTIONS

1.6.1 How do Grade 6 teachers understand and implement the AIDS curriculum?

1.6.2 What and how are the personal and contextual factors playing out on individual teachers as they implement this curriculum?

1.6.3 What are teachers' practical experiences with the implementation of this curriculum, and how are they coping with the experiences?

1.6.4 What do teachers suggest as the best ways of enhancing the implementation of this curriculum?

1.7 OBJECTIVES OF THE STUDY

1.7.1 To establish and describe how teachers understand and implement the AIDS curriculum.

1.7.2 To identify personal and contextual factors and describe how these play out on teachers as they implement this curriculum.

1.7.3 To establish and describe teachers' practical experiences with the implementation of this curriculum, and how they are coping with the experiences.

1.7.4 To establish teachers' personal suggestions for improving the implementation of this curriculum.

1.7.5 To suggest a conceptual strategy for improving the implementation of Zimbabwe's primary school AIDS curriculum.

1.8 PURPOSE AND SIGNIFICANCE OF THE STUDY

The purpose of this phenomenological qualitative study is to understand current teacher implementation of Zimbabwe's primary school AIDS curriculum. It focuses

on investigating teachers' adaptation of this curriculum, the personal and contextual factors playing out on their implementation and their experiences with the curriculum regarding major opportunities as well as challenges and barriers to their understanding and implementation of this curriculum. Three primary school teachers who were implementing the curriculum in Grade 6 classes in 3 sampled schools in the Gweru Urban and Lower Gweru Rural school districts participated in the study.

It is hoped that the findings of this study can provide us with increased understanding of and insights into the implementation of this innovation from the perspective of the teacher as the focus of analysis. The study can identify problem areas regarding teachers' comprehension of the curriculum and their adaptation experiences in teaching the curriculum so that appropriate technical assistance can be provided. Policymakers and education planners in the Ministry of Higher and Tertiary Education and the Ministry of Education Sport and Culture can use theoretical insights from the findings of this study to formulate strategies for strengthening the teaching of this curriculum.

This study is thus an essential academic undertaking in the curriculum micro-implementation area of curriculum studies, which seeks to contribute to an understanding of the teacher as a pivotal factor in educational change.

1.9 KEY CONCEPTS

For uniformity of interpretation, the following key concepts are defined in the context of this study:

1.9.1 A double-session primary school – a primary school where two teaching-learning programmes are offered to learners, one which begins at 8.00a.m. and ends at 12.00 noon, and the other one which begins at 12.00 noon and ends at 4.00 p.m.

1.9.2 A single-session primary school – a primary school which offers one teaching-learning programme to all its learners, which begins at 8.00 a.m. and ends at 4.00 p.m.

1.9.3 Curriculum adaptation/mutation – a teacher’s modification of an innovation’s descriptions to a certain extent as he or she teaches it, in the manner that he or she interprets it.

1.9.4 Curriculum implementation – the process where teachers put a written curriculum (which is an expression of education policy) into practice through actual teaching in the classroom.

1.9.5 Curriculum implementation factors endogenous to the teacher – implementation factors internal to and directly involving the teacher as implementing agent.

1.9.6 Curriculum implementation factors exogenous to the teacher – implementation factors external to the teacher, influencing his or her implementation efforts as implementing agent.

1.9.7 Deterioration of the curriculum – the progressive, cumulative loss of the learnings and understandings that students were supposed to gain, due to ineffective teaching of the curriculum.

1.9.8 Implementation fidelity – a teacher’s almost absolute faithful application of an innovation’s specifications in his or her teaching.

1.9.9 Pre-service teacher preparation – the training of teachers to equip them with the knowledge and skills to teach a curriculum while they are still in college.

1.9.10 Teacher preparation – the process of equipping teachers with pedagogical knowledge and skills, subject content knowledge and appropriate dispositions to enact a curriculum at pre-service and in-service levels.

1.9.11 The written AIDS curriculum – a combination of the written curriculum materials namely, the syllabus, teachers’ guides, text books and related materials teachers use to plan for, and implement the curriculum in their classrooms.

1.9.12 Use-setting realities – the practical implementation experiences teachers experience with a curriculum they are using in particular school contexts

1.10 CONCEPTUAL/THEORETICAL FRAMEWORK OF THE STUDY

Teachers' adaptation of a curriculum is in itself a theoretical issue that can be understood in the context of a combination of curriculum implementation factors. It is impossible in this limited study to review for analytical purposes all the many implementation factors. Rather it is more practical to examine a few select core implementation factors. Altrichter (2009:7) draws our attention to convergence of various research findings in various localities on what are considered key curriculum implementation factors. Endogenous factors, namely teachers' pedagogical skills and knowledge, subject content knowledge, and commitment and confidence to teach a curriculum are considered. Factors exogenous to the teacher such as characteristics of the curriculum itself, local characteristics and organisational (school) factors are central to this thesis.

Consistent with the theoretical stance I take that teachers do not faithfully adopt a new curriculum in its original model but rather adapt or mutate it, I tease out the mutually interactive connection between the factors and their impact on teachers' implementation choices and actions as they engage in cognitive sense-making of the curriculum. I attempt this task guided by Honig's (2006:14) model, while at the same time using the conceptual lens of the phenomenological-adaptive approach to educational change and the related cognitive sense-making frame. The above-mentioned factors structure and guide the exploration into, and discovery and extraction of those variables from teachers themselves, which they perceive as opportunities for or barriers to their understanding and implementation of the AIDS curriculum. The factors are examined in the context of the broad theoretical framework I develop and offer in Chapter 2, drawing from ideas in Honig's (2006:14) triadic representation of three key elements, namely people, policy and places and the mutual interaction of dimensions inherent in them and how they explain policy implementation in the classroom. By implication, I locate the conceptual framework within a systemic characterisation of teacher implementation of a curriculum.

For orientation purposes, in this chapter I briefly outline the fidelity and adaptation perspectives of curriculum change, which I shall compare and contrast in Chapter 2, illustrating their potential to enhance or frustrate educational change. I also provide a synopsis of Zimbabwe's primary school AIDS curriculum which highlights in broad

strokes the essential curriculum specifications to which teachers respond as they enact the curriculum, to make sense of teacher implementation. Finally, I briefly outline the implementation factors which I will apply to the area of teaching about HIV/AIDS and will explain in greater detail in Chapter 2.

1.10.1 Teacher's adaptation of the curriculum: a theoretical explication.

Planning and lesson delivery are seldom used as yardsticks to determine a teacher's ability to enact and teach a curriculum, yet these processes are a means to student achievement. This study considers the teacher's way of planning and delivering lessons of the AIDS curriculum in relation to the developer's intentions as his or her display of a unique and personal understanding of how the curriculum is implemented. Gauging the extent to which teachers' adaptation of the AIDS curriculum is congruous with policy prescriptions falls outside the scope of this study which simply seeks to describe how teachers make sense of and enact this curriculum.

In this study, teachers' adaptation of the AIDS curriculum is generally analysed in terms of the theoretical tensions between the technological experimental (TE) and the implementation-dominant (ID) perspectives of educational change.

Broadly speaking, proponents of the TE paradigm position teachers as implementers of a new curriculum who faithfully adopt it in almost its exact configuration of a perfectly workable prototype during field trials (Berman, 1981:259). This approach is therefore more amenable to implementation fidelity. By contrast, proponents of the ID paradigm take issue with the TE paradigm's mechanical conception of educational change, recognising the fact that as conscious, rational beings, teachers do not just adopt a new curriculum like incidental instruments. Rather, they adapt or mutate it as they understand it to suit their local use-setting realities and their learners' needs (Berman, 1981:260; Huntley, 2005:40). Consistent with the phenomenological perspective of educational change which accentuates individual teachers' personal and intersubjective interpretation (meaning-making) and responding to its conceptual demands in specific contexts, Huntley's conception of the fidelity-adaptation continuum can deepen our understanding of teacher implementation. Huntley (2005:41) argues that on the continuum, teachers can

faithfully mutate the curriculum and, within a 'recognisable zone of configuration' enjoy the latitude for critical and reflexive enactment while guarding against radically deviating to an unrecognisable degree from the essential specifications.

1.10.2 A synopsis of Zimbabwe's primary school AIDS curriculum and guidelines for its teaching.

In this study the description of teachers' adaptation of the AIDS curriculum cannot occur in a vacuum but should occur in terms of the guidelines and specifications of the written curriculum, which simply serve as a broad benchmark or criteria to make sense of teachers' implementation.

However, given the fact that education is a political matter involving some people passing critical policy decisions on what other people should learn (Mitra, 2008:18), the usefulness, legitimacy and pedagogical defensibility of any educational programme are contestable issues. Research indicates that the typically sensitive AIDS curriculum has often been fraught with controversy among stakeholders over the content taught to young school children (Baxen and Breidlid, 2009:18; Lesko, 2010:826). Consequently resistance and 'tissue rejection' by both teachers and parents have characterised the implementation of this curriculum. The contention surrounding the usefulness, legitimacy and pedagogical defensibility of Zimbabwe's primary school AIDS curriculum can be mitigated by the involvement of the country's curriculum administrative agency, the Curriculum Development Unit (CDU), of various stakeholder constituencies in collaborative deliberation of the revised curriculum (MoESC, 2003:2). According to Mitra (2008:18) the engagement of collaborative educational agenda setting promotes a sense of ownership of the educational programme for stakeholders thereby minimizing resistance. Thus in this study the determination of teachers' adaptation of this curriculum seems to be based on a reasonably sound curriculum with judicious curriculum prescriptions.

1.10.2.1 The AIDS curriculum described

Broadly based on a learner-centred approach, the AIDS curriculum seems to have been crafted according to the problem-centred design. According to Ornstein and Hunkin's (1998:206) problem-centred designs focus the curriculum on the problems

of living, and persistent life situations and contemporary social problems confronting individuals and society such as the AIDS pandemic. The major goals of this curriculum are: a) to facilitate the development of relevant attitudes and behaviours in young people and to disseminate information about HIV/AIDS infection to them; and b) to promote healthy lifestyles, positive values and attitudes and responsible behaviours among the learners while they are still in their formative years (MoESC, 2003:7).

In terms of organisation, the curriculum is presented in a spiral thematic approach where there are the same themes appearing in each grade but with different content. As the super-ordinate subject matter features, the themes carry specific topics/content for each grade, which increase in complexity as the learner progresses to the next grade (MoESC, 2003:8). The themes are: (a) relationships (b) human growth and development (c) health (d) values and beliefs (e) care and (f) management and mitigation.

In order to realise the goals of the curriculum and to convey the themes the participatory methodology is emphasised. It involves the learners in dialogical educative encounters (which they lack in the home) where they freely and openly share HIV/AIDS issues among themselves in a classroom setting (MoESC, 2009:8). UNESCO (2005:228) observes that participatory methods of teaching such as role play, poetry, drama, song, picture codes, case studies, letters to the editor, group discussions, debates, surveys, etc. allow collective identification and solutions of problems, involving the learner in self-exploration, discovery, and individual internalisation and personalisation of AIDS-related issues experientially.

By implication the curriculum is not concerned with intellectual actualisation of the learner but emphasises a holistic approach that equips the growing learner with life skills to cope in a world that is bedevilled with the AIDS pandemic. The life skills include (a) communication (b) negotiation (c) refusal (d) cooperation (e) self-discipline (f) self-awareness (g) decision-making (h) problem-solving (i) sympathy (j) empathy and (k) peer pressure resistance and creative thinking. Therefore the teacher-centred pedagogy in which teachers simply tell learners about the dangers of HIV/AIDS without involving them in discursive encounters with the curriculum is not sufficiently appropriate.

1.10.2.2 Recommended ways of teaching the AIDS curriculum

When scheming and planning, teachers must first explicitly state the overarching theme for a particular week and the topic and content that the theme carries, followed by the lesson objectives and the selected relevant participatory methods. Activities that involve learners in group processing of the tasks in dialogue and action for the internalisation and personalisation of issues and the life skills emphasised in the lesson must be stated (MoESC,2009: 21; UNESCO, 2005:228).

In accordance with the lesson schemes/plans formulated from the AIDS syllabus and its related curriculum materials, such as teachers' guides and supplementary materials, lessons should thus be characterised by active, hands-on-minds-on involvement of pupils learning in groups with the teacher taking the role of facilitator (MoESC, 2003:14).

1.10.3 Curriculum implementation factors

1.10.3.1 Factors endogenous to the teacher

The quality of teachers' engagement in cognitive sense-making of a curriculum is contingent upon some of the critical factors endogenous to them, namely pedagogical skills, subject content knowledge, and associated affective dispositions to enact the curriculum. The wealth of knowledge and skills a teacher acquired in college and continues to acquire during full-time service has a bearing on the characteristics he or she exhibits when implementing a school HIV/AIDS curriculum, such as instructional competence, commitment, self-efficacy and attitudes, etc. (Kelly, 2007:68; Mugimu and Nabbada, 2010:9; UNESCO, 2011:18). Evidence from the literature indicates that poor skills and knowledge among teachers in relation to a curriculum has often presented obstacles to the change efforts these teachers have tried to make (Kirgoz, 2008:321; Steyn, 2011:157). Besides enhancing teachers' competence in cognitive sense-making of HIV/AIDS policy messages that they mediate into practice, teachers' knowledge and skills have been found to mutually link with their self confidence to enact a new curriculum (Helleve *et al.*, 2009:62). The findings of a study of the HIV/AIDS education programme in some South African schools in which initially diffident teachers later gained implementation

confidence and increased participation enthusiasm after being intellectually capacitated (Deutschlander, 2010:444) show the promise that teacher capacitation has on narrowing the policy-practice disjuncture.

1.10.3.2 Factors exogenous to the teacher

How a curriculum is described that is its characteristics, has been found to influence a teacher's cognitive sense-making of the demands of the curriculum. Altrichter (2009:7) observes that the chances for individual teachers to implement an educational change increase when teachers (and all other implementation stakeholders) perceive or feel that the solutions that a curriculum proposes are really worth the effort. He further identifies lack of clarity of the exact needs, goals and solutions that a curriculum seeks to address as a serious obstacle to teachers' appreciation of the need for the curriculum. Research has revealed instances where teachers lacked clarity about the goals of a curriculum and precisely what it was that its specifications demanded them to do differently in practice. The findings of a study of HIV/AIDS curricula as part of life skills orientation programmes in some South African schools show the serious cognitive sense-making problems that teachers grappled with due to lack of clarity concerning the curriculum specifications, as well as the complexity of the change (Van Laren, 2010:63). By contrast, a separate study conducted by Deutschlander (2010:444) in some US schools revealed positive feelings towards the curriculum among teachers because they perceived the educational change as being clear. New skills acquired, altered beliefs and attitudes and use of new curriculum materials and pedagogical strategies as features constituting the complexity of a curriculum suggest reculturing – a phenomenon that is rarely found (Fullan, 2001:37). Blignaut (2007:39) underscores how an impracticable curriculum can be a barrier to teachers' implementation efforts when he asserts that policies that are conceptualised far away from the hard world of practice run the risk of being abandoned by implementers. Consistent with Altrichter's (2009:8) assertions, Onyango (2009:39) contends that teachers are likely to change and become more capable of effecting school improvement when the proposals put forward by a change initiative practically fit with the situation of the teachers, and the initiative provides concrete, how-to-do possibilities and steps.

Teacher support in the form of skills and knowledge to teach the curriculum is a key variable exogenous to the teachers, influencing how they make sense of and translate education policy ideas into practice. At local education administration level, regional education administrators, school inspectors and education managers who actively provide teachers with professional development programmes such as demonstration, process coaching, expert consultation and technical assistance coupled with follow-through (Altrichter, 2009:9) create opportunities for teachers to enact the curriculum successfully.

At school level, continuing professional development of teachers in relation to teaching particular subject curricula through collaborative learning is an education policy issue that has gained unprecedented attention in education literature in the postmodern world. Spillane, Reiser and Gomez (2006:48) emphasise the value of establishing communities of practice among teachers so that they engage in sharing their tacit knowledge about teaching. Bemoaning policymakers' neglect of cognition as a distributed practice among teachers grappling with policy implementation, Spillane *et al.* (2006:48) argue that teachers should not be allowed to teach in isolation and that social infrastructure should be established for collegial teacher learning in schools.

1.11 THE RESEARCH DESIGN AND METHODOLOGY

1.11.1 The research methods used

Essentially set in the hermeneutic interpretivist paradigm, this qualitative case study does incorporate quantitative techniques to a limited extent. The interpretivist or phenomenological approach is appropriate in this case study as it seeks to understand how people behave and experience reality in their natural settings (see Creswell, 2007:37; Drew, Hardman and Hosp, 2008:185), more specifically how teachers interpret and make sense of their actions and experiences as they teach the AIDS curriculum in their natural settings – namely the schools. The choice of the case study is justified by the fact that it is a methodology that captures the unique and dynamic aspects of contexts by investigating the unfolding interactions of events

and other factors in a unique instance (Cohen, Minion and Morrison, 2007:251). The multiple realities being investigated in this study are so complex that a single methodology is inappropriate. I consider as critical to this study, Drew *et al's*. (2008:188) observation that methodological triangulation is necessary for corroboration of the data and enhancement of the reliability and validity or trustworthiness of the findings. For triangulation purposes therefore I will undertake small-scale quantitative analysis of data in addition to the qualitative methodology employed.

As the key research instrument, I will enter the field to collect evidence personally and directly.

1.11.1.1 Methods of data collection

Insights into the practical, real lived experiences of participants (teachers in this case study) operating in their practical situations are best obtained by means of qualitative techniques (Taylor and Wallace, 2007:85). This justifies the use of documentary analysis, lesson observations and post-lesson discussions to collect data on teachers' adaptation of the curriculum and semi-structured interviews to collect data on factors that teachers perceive as opportunities or obstacles to their implementation efforts concerning the AIDS curriculum. The data collection instrument of document analysis was preferred because of its promise of minimal reactivity since ideas about the curriculum were documented in the absence of the researcher. Lesson schemes/plans are potentially original, truthful interpretations of individual teachers' ways of implementing the curriculum. Documents are tangible manifestations that describe participants' experiences, knowledge actions and values (McMillan and Schumacher, 2010:321). Lesson observation, despite senilities from participants being observed, allows the researcher to directly see and record participants' behaviours and enable the researcher to generate ideas about how and why behaviours occur (Baker and Lee, 2011:1437). Interviews are effective for accessing participants' perceptions, meanings, and construction of reality in their own terms (Punch, 2009:144). According to Hobson and Townsend (2010:228) interviews create a conversational relationship between the researcher and the participant, providing a richer, deeper understanding of the phenomenon under

investigation. Details of the data collection procedures followed for each of the research questions are provided in Chapter 3.

1.11.1.2 Sampling

Purposive sampling will be used, in heeding Creswell, (2007:118) and McMillan and Schumacher's (2010:325) assertion that this sampling method allows for the selection of information-rich cases from which the researcher will discover, understand and gain insight into the phenomenon under investigation. For uniformity of interpretation and facilitation of post-lesson discussions (see Punch, 2009:162) the study will employ purposeful homogeneous sampling where participants with similar traits will be involved (Creswell, 2005:206; Punch, 2009:162). Thus 3 (n= 3) Grade 6 class teachers who are known as the best AIDS teacher educators and are actively involved in teacher development on HIV/AIDS teaching will be chosen. These will be drawn from a total of three schools with maximal variance from the Gweru Urban and Lower Gweru Rural school districts.

1.11.1.3 Data analysis procedures

The inductive, along with the deductive content analysis techniques based on the grounded theory approach (see Hsieh and Shannon, 2005:1279; Zhang and Wildemuth, 2007:3) guide this interpretive study. This approach is relevant since the study seeks to establish a thick description that is, a substantive, accurate and vivid picture of the phenomenon under inquiry (Drew, *et al.*, 2008:348). The objective of this study, namely to generate concepts or categories to build a strategy (in this case a comprehensive strategy for implementation of the AIDS curriculum) (Elo and Kyngas, 2007:110), justifies the use of this approach. As it involves open coding and it creates categories and abstraction, inductive-cum-deductive content analysis is appropriate in the generation of a general explanation of teachers' implementation of an educational programme. In the process theoretical generalisations are drawn from data on particular aspects of the phenomenon being investigated. I view qualitative research as a participatory social action in which the researcher and the participants are on an equal footing regarding their views (see Guthrie, 2010:9). Therefore I combine emic, etic and negotiated perspectives of data collection and

analysis to derive a well-balanced, credible description of the phenomenon. Detailed data analysis for each of the research questions is provided in Chapter 3.

1.11.1.4 Ethical considerations

As is customary with qualitative research, I will seek and obtain permission to gain access to the research sites and the participants by consulting with the relevant gatekeepers (see Creswell, 2005:210) in this case school heads at the research sites. Following Creswell's (2007:138) advice, I will first build trust and confidence in the participants and reveal general information about the study. I will also explain to participants the benefits that they could derive from their participation in the study by defining the research, contributing their interpretations to the data analysis and knowing the results (see Guthrie, 2010:11). The costs in terms of time and effort that will be incurred will also be explained.

In compliance with Creswell's (2008:33) advice I will seek permission to conduct this study by obtaining ethical clearance from the Nelson Mandela Metropolitan University Human Research Ethics Committee. I will then seek informed consent to conduct the study in schools from the relevant education management authorities, namely provincial education directors, school district education managers, and school heads. I will assure these authorities of anonymity and confidentiality in the treatment of information and inform them of the purpose of the study. Informed consent will be sought from the participants (the teachers) who will, in compliance with Drew *et al.*'s recommendations (2008:72) be informed about the purpose and methods of the study, its demands and the risks involved. I will also emphasise to participants that participation in the study is purely voluntary, and that they have the right to withdraw from the study at any time. To ensure confidentiality of information the researcher undertakes not to disclose information provided by the participants (Guthrie, 2010:11). To prevent violation of the participants' right to privacy anonymity will be assured and observed. This will be achieved by using fictitious names or pseudonyms and interview codes to disguise the participants' identity (Drew *et al.*, 2008:72; Guthrie, 2010:11).

1.11.2 A summary of chapter 1

This chapter explained the background of the study and the rationale for the study and provided a statement of the problem. It formulated the central research question, which guided the derivation of the specific sub-problems and research objectives of the study. The purpose and significance of the study were also clarified. For purposes of this study, key concepts were defined for uniformity of interpretation. A brief explanation of the conceptual/theoretical framework was given, as well as the research design that was employed.

1.11.3 Outline of the study

In this chapter I have presented a broad overview of the issues involved in this study, and I have introduced the research problem. In Chapter 2 a critical argument will be presented for a perspective of understanding the implementation of a curriculum by examining implementation factors that impact on teachers' change efforts. This argument will be made through employing the conceptual lenses of the phenomenological approach to educational change and cognitive sense-making as proposed by Honig's (2006:16) model and the related curriculum adaptation/mutation theoretical position that I have adopted. Chapter 2 therefore lays the theoretical foundation for the study, by articulating theoretical curricular issues pertaining to adaptation of the AIDS curriculum. In Chapter 3 I present an extension of the literature review by providing a description of various HIV/AIDS curricula. In Chapter 4 I present a detailed description of the methodology that structures and guides this research. Chapters 5, 6 and 7 which present the data involve a description of the configurations that the three teachers in the sample portray as they implement the curriculum. I also describe the meanings that the three teachers ascribe to their lived experiences regarding those factors that they perceive as presenting opportunities and obstacles in their policy mediation. In Chapter 8 I analyse and discuss the findings. In Chapter 9 I present the implications of the study for policy and practice, and present a proposed comprehensive strategy for improving the implementation of Zimbabwe's primary school AIDS curriculum.

CHAPTER 2

LITERATURE REVIEW

2.1 INTRODUCTION

The focus of this study is situated in my broader research interest of how teachers that are currently implementing Zimbabwe's primary school AIDS curriculum display their understanding of the implementation of this curriculum. Research evidence attests to a multiplicity of factors which influence how teachers understand and enact a curriculum.

This study is concerned with teachers as the focal unit of analysis and how some key implementation factors both endogenous and exogenous to teachers interact to frame and shape their individual cognitive sense-making and mediation of the AIDS curriculum interventions. This chapter will first address the broader research question by discussing and comparing the three major curriculum implementation perspectives that predominantly guide and inform theoretical thinking and provide explanations of curriculum implementation processes. These are the Technical Empirical (TE) or the Fidelity approach, the Implementation Dominant (ID) or the Adaptation approach and the Enactment approach. In the process, I constantly refer to and analyse how attendant variables nested in context spaces both inside and outside the school account for, or do not account for, teachers' implementation choices and actions in mediating education policy.

My attempt at analysing the interaction of implementation factors is guided by the theoretical framework I develop from the Phenomenological-Adaptive approach to educational change and Honig's (2006:14) "people, policy and places model" and cognitive sense-making. In order to address the question on how teachers experience the curriculum, I will, against the framework of the theoretical position that I adopt, argue that teacher curriculum implementation is a complex undertaking. To this end, I will illustrate that central to individual teachers' sense-making of a curriculum is the mutually linking interactions of a myriad of factors that influence teaching about HIV/AIDS.

2.2 THE FIDELITY APPROACH TO EDUCATIONAL CHANGE

An exposition of the adaptation approach to educational change warrants a description of the Fidelity approach or Technical Empirical (TE) approach first, since it is from this paradigm that the former perspective developed.

During the greater part of the twentieth century, the TE paradigm of educational change directed thought regarding classroom practice of education policy. During this era, education policy interventions took on a more or less linear progression of change (Blignaut, 2007:25; Marsh, 2009:103).

The TE approach follows a top-down *modus operandi* whereby change is seen as a linear process imposed by experts who develop the curriculum for teachers who then implement it. By this approach, a field-trialled curriculum prototype that has been proven by curriculum developers to be a workable education idea must simply be adopted and applied by teachers in their classrooms in as faithful a manner possible. The assumption is that since teachers lack the required 'curriculum literacy', they must adhere to the prescriptions of the more knowledgeable curriculum specialists, trusting the wisdom of their innovative ideas (Marsh, 2009:103; Tarr, McNaught and Grouws, 2010:5). Since the highly specified education policy is produced by experts and the materials and methodology are designed and used by local implementers, the assumption is that if followed with the utmost fidelity, it should produce the desired new practice in a predictable manner (Marsh, 2009:104; Tarr *et al.*, 2010:6). This approach demands that the curriculum be highly structured and that it should contain explicit instructions on how to teach it. Similarly, teachers are expected to adhere to the guidelines of the curriculum faithfully. The assumption is that if teachers use the curriculum in partial or modified form, there is a possibility that the effectiveness of the curriculum may suffer from dilution. Theorists who subscribe to the Fidelity approach thus ascribe the perennial implementation problem of so many education policies failing to find their expression in classrooms mainly to teacher infidelity. This problem persists despite heavy investments of financial, human and material resources put in the education policies. In addressing the policy-practice disjuncture then, researchers that assess curricula according to the Fidelity approach are mainly concerned with determining the degree to which a planned curriculum is being implemented by teachers as intended by the policy designers. Disregarding

teachers' prior experiences and pre-existing knowledge about teaching, proponents of the Fidelity perspective are particularly interested in the following teacher implementation issues:

- (i) Gaps between the existing specifications of innovation practices and teachers' actual use of curriculum materials and methodology, and
- (ii) Theoretical inadequacies with respect to the identified means for achieving the intended outcomes of the intervention in terms of teachers' understanding of the underlying philosophies informing implementation of the new practices (Altrichter, 2009:3).

Thus, proponents of the Fidelity approach would attribute teachers' failure to implement a curriculum with a high level of technical proficiency to theoretical incompetence that they may have in understanding the philosophical underpinnings and pedagogy of the curriculum and the associated teacher behaviours that are required. Blame could also equally be attributed to vague and/or ambiguous descriptions of the curriculum messages on the part of the designers or to trainers' failure to train teachers adequately to teach the curriculum.

The TE paradigm has been widely criticised for making the assumption that once thoroughly trained, teachers will automatically be able to implement any curriculum well. In addition, those who see the above assumption as invalid take issue with Fidelity proponents' neglect of how teachers' previous experiences shape their identities as teachers and help them to interpret the enactment of a curriculum. Furthermore, authors whose current writings tend to discredit the hard line approach to fidelity of use, have criticised the Fidelity approach for treating teachers as passive receptacles of the supposed wisdom of curriculum developers (Behm, 2009:6; Marsh, 2009:101; Tarr *et al.*, 2010:7). Such an approach tends to stunt teachers' instructional innovativeness.

Despite its shortcomings, the Fidelity approach is still useful, if not indispensable. Research evidence confirms this observation. Some theorists argue that although completely faithful implementation is not possible, there is substantial agreement among researchers that fidelity is an important variable to consider in analysing curriculum studies (Tarr *et al.*, 2010: 11). A study conducted in some US elementary

schools to examine the extent to which implementation fidelity enhanced or constrained students' reading performance revealed a significant rise in performance scores through teachers' strict adherence to the curriculum prescriptions (Benner, Nelson, Stage and Ralston, 2011:86). Coburn and Stein (2006:40) cite the justification for fidelity on the grounds of need in which teachers in some US elementary schools strictly adhered to the Balanced Literacy Programme framework for purposes of gaining experience, after which flexibility of enactment would follow. This finding is similar to Marsh's (2009:101) claim of the inevitability of fidelity when he succinctly states:

Fidelity of curriculum implementation seems to lend itself more readily to some situations where the content of the curriculum is unusually complex and difficult to master, where it requires definite sequencing or where students' understanding of it depends on their being appropriately matched with specific curricula strands.

Taking cognisance of need as a crucial driving force for implementation fidelity, I disagree with Blignaut's (2007:26) assertion that the Fidelity approach to educational change should be completely abandoned in favour of the Adaptation approach. Rather, I settle for a middle-of-the road conception of implementation. I adopt the Adaptive approach in agreement with Huntley's (2005:40) contention that absolute fidelity tends towards a mechanical, parochial configuration of the curriculum lacking innovativeness. At the same time, I also contend that mutation of a curriculum that departs from developers' specifications to the extent that the configuration of the curriculum demonstrates unrecognisable practice is equally problematic.

However, much as there is considerable research evidence of the usefulness and indispensability of implementation fidelity, a compelling body of literature highlights the problem of adopting an absolutist technical empirical (TE) paradigm with regard to curriculum change. It has been observed that education policies that have followed a step-by-step, linear fashion of curriculum change have often failed to bring about changes that they have purported to effect. In part, this is caused by the little room that the hard-line approach to fidelity of use leaves for teachers to adapt their practice to any particular or changing circumstances in given implementation contexts. Together with scholars such as Altrichter (2009: 4), Blignaut (2007:26) and

Huntley (2005:40), I disagree with a linear, mechanical approach to curriculum implementation. I take issue with the key assumption of such an approach that once an innovation has been field-tested it will predictably and undoubtedly work well when transplanted to schools and classrooms for large-scale use. This line of thinking reduces teachers to responsive purveyors of knowledge which has been designed and developed by people with unchallenged intellectual prowess superior to theirs. Yet the literature refutes the claim that such an approach yields any meaningful alteration of teaching practices that promotes quality student learning. Marsh's (2009:104) observation of the flaw in the Fidelity approach reveals that the State mandate on teachers to strictly adhere to teaching that is centrally oriented towards enabling learners to attain high test scores in the No Child Left Behind programme in US schools provided teachers with little incentive to engage students in relevant, authentic and challenging learning experiences. Altrichter's (2009:4) position on the dangers of absolute implementation fidelity resonates with the positions of Blignaut (2007:27) and Marsh (2009:104). He states that:

scores of examples of curriculum reforms which concentrated on the material side and the theoretical justification of their approach and assumed that changes in teaching practice and in the beliefs and understandings of practitioners would follow from their material inputs turned out to be incorrect (Altrichter, 2009:4).

The contentions of the above authors seem to coincide with the theoretical position that I take, namely that of implementation-as-adaptation which takes into account how the complex interplay of a myriad of factors influences individual teachers' interpretation and enactment of education policy. In agreement with Blignaut (2007:27) who adopts the Adaptation approach to educational change, I contend that a linear, step-by-step, one-size-fits-all approach to curriculum change is fast running out of sync with post-modern thinking. Many challenges, ambiguities, uncertainties and paradoxes associated with successfully implementing educational change exist. Consequently, the manner in which, a curriculum subjectively influences individual teachers' conceptions of how it should be mediated, on a personal level, cannot be ignored.

2.3 THE THEORETICAL FRAMEWORK OF THE STUDY: THE PHENOMENOLOGICAL-ADAPTATION APPROACH AND HONIG'S MODEL AND COGNITIVE SENSE-MAKING

The broad phenomenological approach which constitutes the philosophical grounding of this study entails viewing and appraising theoretical issues through the double lens of the Adaptation approach to educational change and Honig's model and cognitive sense-making.

2.3.1 The Adaptation approach to educational change

A contrasting conceptualisation of the classroom curriculum implementation problem is provided by what Altrichter (2009:3) terms the "Adaptation-Evolutionary" approach which advocates modification of a curriculum in the course of its implementation. This approach to curriculum change is consistent with the phenomenological notion which acknowledges tendency of teachers to respond to a curriculum as an initially external phenomenon which they ultimately internalise in their minds and enact in accordance with their own personal interpretations of the curriculum as they experience it over time.

Researchers that subscribe to the Adaptation or the Implementation Dominant (ID) approach to educational change take issue with a top-down, linear conception of change where the passive, pragmatic implementers faithfully adopt the innovative ideas of designers. These researchers draw attention to the lack of success of educational reforms that are technically driven. Some reforms in the USA's Rand Agent Study failed to find their expression in the classroom as envisioned by policymakers (Altrichter, 2009:3; Marsh, 2009:103).

Hence, for those advocating for curriculum adaptation, one of the main explanations for policy implementation failure is the insensitivity of policymakers to the practical context in which curriculum implementers operate. Premised on the general assumption that it is impossible to solve the implementation problem by programming the implementers through detailed elaborations of desired practices, and step-by-step specifications, (Altrichter, 2009:4; Blignaut, 2007:27), the Adaptation approach subscribes to tenets that are in vogue with postmodern thinking.

Drawing on the work of Stenhouse (1975), Altrichter (2009:4) maintains that since it is teachers who must bring into life a curriculum idea in their concrete interaction with learners, under local circumstances, a written curriculum is therefore a hypothetical educational proposal that is open to critical scrutiny and modification. The curriculum is therefore seen as incomplete, more or less decontextualised and open to interpretation by teachers to suit their local use-setting realities and the learners' needs. In the literature the concept of curriculum adaptation has received considerable attention in terms of its application to educational change. According to Mapolisa, Matsinde, Mawere and Zivanayi (2006:47), although Zimbabwe's centralised, top-down approach to curriculum change adopts an implementation-as-directed-strategy it leaves some room for teachers to autonomously interpret the curriculum according to their own personal understanding and use-setting circumstances. In the same vein, Helleve, Flisher, Onya, Mukoma and Klepp (2009:191) have characterised curriculum adaptation by portraying the teacher as a receiver of curriculum developers' innovative ideas about teaching about HIV/AIDS and as the ultimate creator of meaning (of the idea/written curriculum) of the practice of teaching the curriculum. These authors have also documented a study conducted in some South African schools, in which teachers exercised their prerogative and flexibly adapted their teaching of the HIV/AIDS programme to the use-setting realities, namely the local culture and religion of the communities they served. The point being illustrated above is that, as cognitive sense-makers of an innovative educational idea, teachers have the voluntary capacity to create their own personal meanings of the idea and translate these meanings into the practice of actual teaching as local and classroom circumstances dictate.

Since decisions about curriculum implementation and control over the unpredictable direction that this takes are the prerogative of teachers' professional judgement (Altrichter, 2009:5), it is the teachers themselves who make concrete the curriculum goals and methods as they deal with the curriculum over time. As such, curriculum implementation is conceived of as a continuous learning process of actualising the specifications of an educational proposal.

Proponents of the Adaptation approach further maintain that successful educational change requires mutual adaptation between the developers of the curriculum and the users. Negotiation of meanings and trade-offs between developers and users

prevail so that what first appears to be a blueprint (Marsh, 2009:105), is increasingly perceived by teachers as something that is malleable over time.

Thus having a view that a curriculum is a given, to which users respond rigidly is rather inimical to creative application of education policy messages. Datnow (2006:106) shares the same sentiments as Altrichter (2009:7) and Marsh (2009:105) on the inevitability of negotiation, flexibility and adjustment by different policy actors responding to a policy proposal. However, what none of these authors clarify is at what stage of implementation the modifications that the developers and the users have agreed upon should be instituted. Should it be during orientation sessions at the initiation stage of the newly introduced curriculum when the curriculum developers interface with users to mutate it or should it be throughout the lifetime of the curriculum?

What makes this question pertinent is the notion of implementation as a social learning process and not an event, where a clear difference between the two dominant educational change paradigms becomes evident. Leading proponents of the Mutual Adaptation approach such as Spillane *et al.* (2006:48) place a high premium on the social context in which teachers, through intersubjective negotiation of meanings learn about teaching in collaborative groupings. These authors duly respect diversity as opposed to uniformity of curriculum mutation by teachers, resulting in individual enactment zones around practice. In rejecting the one-size-fits-all, linear conception of educational change, proponents of the Adaptation approach such as Berman (1981:260) highlight the need to navigate organisational and contextual explanations of change through an exposition of three meta-propositions regarding educational change as follows:

- 1) Educational change involves an implementation dominant process.
- 2) The educational change process consists of three complex organisational change sub-processes namely, mobilisation, implementation and institutionalisation, which are loosely, not linearly coupled.
- 3) Outcomes of educational change efforts tend to be context-dependent and time-dependent.

When compared with each other, the Fidelity approach and the Adaptation approach (whose extended variation is the Enactment approach both) accept a structured educational proposal by way of a written curriculum, but they differ in their conception of the teacher's role in relation to curriculum policy. The Fidelity approach tends to view the teacher as a passive receptacle of policy who is ready to use faithfully the highly specified or pre-packaged proposal. By contrast, the Adaptive approach casts the teacher as an active practitioner capable of using his or her practical situational knowledge to modify the original design according to students' learning needs and the unique demands of a particular locality. I see the notion of a teacher as an active cognitive sense-maker as being relevant to the theoretical position the Adaptive approach takes. This notion is central to the phenomenological thrust of this study.

At this juncture it is important to reiterate the fact that, in vogue with post-positivistic thinking, the Adaptation approach takes issue with a wholesale, rational, linear application by users, of innovative ideas that have been conceived by designers. In contrast to the Fidelity approach, the Adaptation approach makes serious recognition of the unstable and often turbulent environment in which educational change is situated. It therefore subscribes to the idea of teacher-user as an innovative and situation-dependent interpreter of a curriculum proposal, whose implementation efforts are influenced by a myriad of systemic as well as personal factors. Through the phenomenological lens I sketch the trajectory of teacher implementation of the AIDS curriculum. I conceptualise the broader systemic framework that Honig (2006:14) offers, as a critical context in which various policy actors and their change efforts are nested as they negotiate meanings in the enactment of the curriculum. I contend that the choices, actions and mutations teachers make relating to this curriculum (policy) at a given school and in a particular classroom (place) may or may not be influenced by choices, actions and mutations of other policy actors (people) elsewhere. These issues can be uncovered at the various levels of the broader social system and the entire education system to enhance a nuanced understanding of teacher implementation of this curriculum.

2.3.1.1 The Enactment approach to educational change: an extended variation of the Adaptation approach

A post-modern conception of educational change has evolved as an extended variation of the Adaptation approach through the Enactment approach. In adherence to McCowan's (2008:85) advice to view the Fidelity, Adaptation and Enactment approaches not as discrete units, but as entities occurring on a continuum, I maintain the middle-of-the-road approach that I have declared, by choosing the Adaptation approach. This is because some adaptation approaches approximate the Fidelity while others are representations of the Enactment approach (McCowan, 2008:85).

Behm (2009:6) asserts that researchers that view curriculum implementation according to the Enactment approach are interested in how a curriculum is shaped and experienced by teachers and learners in specific teaching and learning processes. McCowan (2008:86) and Behm (2009:6) regard the Enactment approach as a participatory approach to curriculum implementation which focuses on the way a curriculum is shaped through the evolving constructs of teachers and students. The conceptualisation of the Enactment approach thus finds its corollary in the mutual involvement of both teachers and learners in the development of the original educational initiative into a version that they perceive to be appropriate for their purposes in the classroom. In this way, curriculum knowledge is viewed as an ongoing process which is not necessarily dependent on an externally created curriculum.

Afdal (2006:335) and McCowan (2008:87) contend that the Enactment approach regards the externally developed curriculum as a tool that teachers and their learners manipulate to organise and construct learners' experiences. By this approach the materials and strategies need not be followed faithfully, and importantly, the process of reconstructing the curriculum is a continuous learning activity which teachers and learners undertake. It seems that Altrichter (2009:6) may not be aware that his explanation of the Adaptation approach is in fact also an explanation of the Enactment approach. He demonstrates this by essentially regarding the curriculum as a provisional, hypothetical innovative idea that is open to manipulation and de-contextualisation by both teachers and learners to suit their local circumstances.

Kennedy, Chan and Fok (2011:43) extend our understanding of the Enactment approach quite incisively when they state:

This perspective of educational change regards curriculum policy not as a rational but a social construction phenomenon which is subject to personal interpretation and meanings by its targeted users.

Thus for these authors, the Enactment approach promotes the notion of classrooms as venues where teachers and learners interact with educational policy in a social constructivist discourse.

When contrasted with the Fidelity approach, the Enactment approach is an antidote to the primacy of formality and linearity that characterise the former approach. The Enactment approach transcends the mutual negotiation between teachers and policy designers in the Adaptation approach, to embrace the primacy of equality between teachers and learners in the designing of a curriculum and its implementation. It is different from the Fidelity approach and Adaptation approach in that it involves the learners in determining the reconstruction and implementation of the curriculum. The Enactment approach is lauded for promoting flexible curriculum reconfigurations that are tailored to the local circumstances of schools. Although it is also popular for allowing learners discretion to determine their own learning, research has revealed that this approach does have some shortcomings.

According to Bjork (2009:24), Asian countries such as Japan, Korea and China seem to have embarked on the post-modern paradigm to education reform in that they have followed the Enactment approach. Despite scoring considerable success, the countries have experienced some challenges. In Japan's Integrated Studies (IS) curriculum, the approach was criticised by many for its perceived danger of diluting academic intensity and excellence once learners were left to design their education programmes. Bjork (2009:30) further notes that some teachers that implemented Japan's IS curriculum felt 'rudderless' in the complete absence of expert curricular control to guide their practices.

Above all, the refusal of the Enactment approach to view teacher implementation of a curriculum as a technical matter means that the Adaptation approach's notion of, implementation is firmly established as a gradual, ongoing, meaning-making,

negotiation process. The Enactment approach further enriches our understanding of how curriculum implementation processes impact on teachers' decisions and actions at classroom level. Thus when theorising educational change from this approach, we cannot ignore the important role played by teachers' and learners' values and understandings in response to education policy.

Hence, the Enactment approach recognises the value of the interactions between individuals and education policies, which are based on complex teacher epistemologies and meaning-making processes as consequential to how teachers ultimately deliver a curriculum with their learners. The observation I make above is consistent with the broad phenomenological scheme within which some implementation factors are explored.

2.3.2 Honig's model of policy implementation: laying the platform

I situate the problem of understanding teacher implementation of Zimbabwe's primary school AIDS curriculum within the theoretical framework I develop, drawing on ideas from Honig's triadic representation of contemporary educational policy implementation elements, namely "people", "policy" and "places" and human cognition. Adopting a systemic approach to teacher implementation of a curriculum, I attempt to come up with a comprehensive theoretical description and analysis model. The model recognises the idea that a myriad of implementation factors both endogenous and exogenous to teachers nested in a broader social system frames and shapes the responses of individual teachers to education policy. It draws attention to the way the complex, dynamic interaction of implementation dimensions in conjunction with teachers' cognitions and the actions and decisions of other people in other places in the entire educational system can be used as an analytical tool to explain teacher implementation of education policy in the classrooms. Within the broader context of the Adaptation approach to educational change adopted in this study, I sketch this theoretical framework incorporating the phenomenological approach of educational change as the conceptual lens through which I tease out the dynamic interaction of the core implementation elements. A brief history is now given of Honig's model.

2.3.2.1 The history of Honig's Model

According to education policy implementation scholarship, the implementation factors of “people”, “policy”, “places” as theoretical tools for understanding education policy have been in existence in the US, since the 1960s. Honig (2006:5) seems to suggest that the policy designs of the USA's Great Society Period were curriculum-wise rather narrow in scope. They contained education policy goals which aimed to achieve broad societal goals such as eradicating poverty and whose success was judged by the abilities of implementers to deliver supplementary education services efficiently to low-income students.

Largely regulatory and distributive as they were, the policy goals aimed to help spread particular resources such as finance, books and teachers to certain groups of students who were eligible to receive such resources. Policy designers rated implementers' work by how effective they were in using resources as stipulated by education policy (Honig, 2006:7). In terms of the people factor, policy implementers or policy targets were mainly school actors, namely school staff, who carried out implementation directives from their superiors, that is federal policymakers working in central offices.

The policy tools used were limited to federal mandates, incentives and other instruments that asserted top-down, command-and-control relationships between policy designers and policy implementers operating in the hierarchies of the education system (Honig, 2009:11). In effect, a sharp dichotomy existed between the functions of the policy designers and those of local implementers. Given the lack of interaction between policy designers and implementers, implementation failure was attributed to the inability of schools and districts to enact policy in ways that faithfully resembled designers' intentions. Conflicts of interest between policy designers and implementers arose from the latter's lack of capacity and will to carry out policy instructions (Honig, 2006:5; Spillane *et al.*, 2006: 47). It can be discerned that the Great Society Period of the 1960s Honig describes coincides with the Technical Empirical (TE) paradigm of educational change which dominated education thought and implementation research. While policy designers demanded fidelity of implementation from the implementers, they cared little about the complexities involved in the processes that made policy outcomes a reality. They

thus made the mistake of expecting desired outputs to automatically follow once instructions and mandates or incentives were in place. Implementation researchers alike seemed to be less concerned with what transpired during implementation by the people involved, the factors that impacted their implementation efforts, and in what contexts this occurred. Thus, researchers had not yet become aware of the dislocation between the many taken-for-granted assumptions that they held when looking at curriculum implementation from outside the school and the actual theories of action that were followed by individual implementers working within school systems and classrooms.

However, with the passage of time, a significant evolution in implementation scholarship ushered in a more intriguing landscape of education research. By the 1990s, the Implementation-Dominant (ID) approach to change had already taken root. Honig (2006:4) writes that from the 1990s to the early 2000s, implementation research evolved from viewing the “people”, “policy”, and “places” elements of educational change in plain linear-relationship terms to perceiving them as substantive elements whose mutual interactions explain policy processes and outcomes in a complex manner. Viewing education policy implementation as a complex, messy enterprise explicable not in a monolithic but a multidimensional fashion, scholars such as Honig (2006:14) came to realise the complexity of educational change in post-modern times.

By implication, policy actors had to be much more intellectually competent to deal with complexity. Yet, another significant development that occurred at the same time as the above-mentioned changes was the interaction between the occupational functions of policy designers and local policy implementers which overlapped in the implementation process (Honig, 2006:11). Consequently, the top-down, and boss-subordinate professional relationships have become outmoded in the new educational change era, which advocates a more open, bottom-up, constructivist approach to curriculum mutation.

On this note, the implications of the occupational distance between those people who have designed an innovation and the implementers who are expected to enact the policy in particular local settings cannot be overemphasised. It can be seen as partly explaining the extent to which teachers working in conjunction with curriculum

developers in certain curriculum interpretation forums deviate from or appropriate the innovation, in compliance with policy specifications, as compared to teachers that completely lack such an interface. The above assertion I make speaks to the additional policy instruments of capacity-building, systems change, learning, and professional development communities (Honig, 2006:11), which researchers have found to be decisive in the mutation of a curriculum in this post-modern mutual-adaptation era.

Over and above the foregoing policy implementation issues, the above brief history of Honig's contemporary policy implementation model brings to our attention a key analytical issue in this study. In this era where education thinking is dominated by the Adaptation approach and cognitive sense-making frameworks, the need to conceptualise teacher implementation of education policy, such as that of the AIDS curriculum, within a broader systemic context where teachers are embedded must not be underestimated. The complex nature of educational change also calls on researchers to continue to determine the factors which potentially influence variations and commonalities among teachers and their theoretical preferences regarding the enactment of a curriculum, and how these choices can be understood within the systemic "people, policy, places" characterisation that Honig offers.

2.3.2.2 Honig's model and cognition: mutual interaction of implementation elements

For the purposes of this study, I attempt to describe the mutual interaction of the dimensions entailed in the three policy implementation elements, namely people, policy, and places. I adopt the phenomenological-adaptation approach to educational change and Honig's "people, policy, places" model and cognition as conceptual lenses to analyse how the relationships among the elements frame and shape individual teachers' understanding, interpretation, and enactment of the AIDS curriculum.

To enable understanding of the central question "How do teachers display their understanding of this curriculum?" I analyse the elements. The questions of which personal and contextual factors play out on teachers, and how these impact on their teaching, as well as teachers' experiences with the curriculum are addressed by teasing out the relationships among the factors.

It is my contention that in sketching the trajectory of classroom policy mediation of the AIDS curriculum, it is useful to discover and analyse how the choices and actions of certain people at certain places in the education system and broader social systems frame and shape individual teachers' sense-making and enactment of this curriculum. It is possible to use the above-stated conceptual lenses to discern and explain how implementation of the AIDS curriculum unfolds and to provide grounded explanations of the mutual interaction among the elements that Honig identifies. For the purposes of this study, I present my own sketch using ideas from Honig's model.

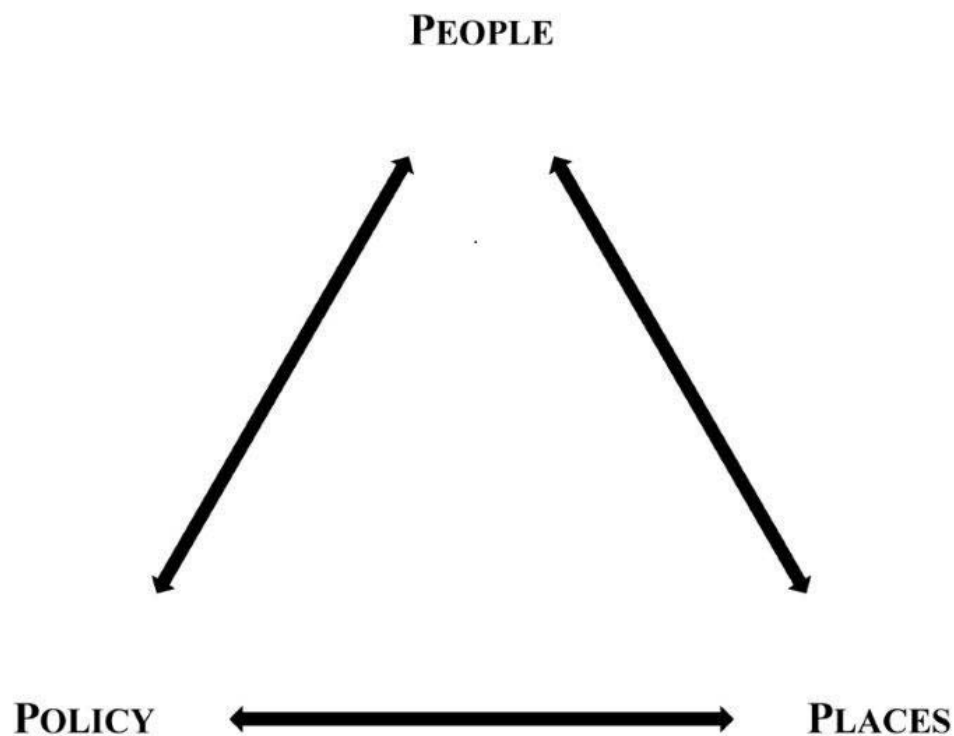


Figure 2.1: A sketch from Honig

The notion that the three elements of implementation (namely people, policy, and places) come together to form a conception of implementation as a highly contingent

and situated process (Honig, 2006:19) is a conceptualisation that is central to this study.

Since the study regards teachers as the focus of analysis, I consider them to be the key people on whom the various choices, decisions, and actions of people in other places who have an interest in education constellate to determine individual teachers' responses to curriculum policy.

Honig's model regards as one of contemporary researchers' concerns the way implementers respond to fundamentally different implementation goals in terms of their scope and the depth of comprehension in pursuing them. This concern is consistent with my broader interest in investigating how teachers display their understanding of the AIDS curriculum. There is the possibility of discovering in this study whether or not teachers perceive and enact the curriculum goals of the AIDS curriculum as those that, in Spillane *et al.*'s (2006:55) terms, demand core, or central, pedagogical attention or address peripheral, superficial educational changes. Research evidence attests to instances where teachers in sub-Saharan Africa have failed to see the HIV/AIDS curriculum with the depth of understanding with which it was seen by policy designers, due to lack of clarity with regard to the specifications of the curriculum (Katsinde and Katsinde, 2002:101; Mugimu and Nabbada, 2010:3). This has resulted in the curriculum being enacted in a superficial manner.

Within the framework of Honig's model, from which I sketch my own model, the mutual interaction of the three elements of "people", "policy", and "places" can be exemplified by a hypothetical case where policy designers (people) have crafted policy messages (policy) in "ambiguous" and "vague" terms at their level of operation at a central curriculum agency office (places). Consequently, at the local site, teachers may enact the policy in the way they understand it, as they engage in cognitive sense-making.

Honig's model also puts a premium on how a host of various individuals, both inside and outside the school and the formal education system, including those people not formally named as policy actors, influences teachers' sense-making and enactment of policy. In Zimbabwe's education system, the decisions and actions of regional and district education and school administrators have always influenced teachers' policy mediation. Regarding the implementation of HIV/AIDS curricula, these actors

drive classroom teachers to implement policy, through mandates such as the 2006-2010 Zimbabwe National HIV-AIDS Strategic Framework Plan (ZNASFP) and incentives in the form of financial and material resources, as well as technical assistance to teachers (Chamba, 2011:18).

Contemporary implementation theory regards the professional development of teachers in communities of practice as important teacher curriculum implementation leverage. Pressure and support both drive teachers to implement policy. Smith (2008:191) observes that educational change instruments imposed on a school, such as mandates, combined with incentives in the form of resources have often served as opportunities for and/or barriers to curriculum enactment by teachers.

Also important to note is that Honig's model recognises the role that those policy agents that are not formally named as formal policy implementers play in making curriculum policy implementation happen the way it does in classrooms. Business leaders, parents, and the broader community have had an impact on teachers' responses to education policy in various ways. Regarding teaching of HIV/AIDS, people such as parents, health workers, and the broader community have positively or negatively influenced teachers' implementation efforts at classroom level, causing motivation or frustration. In most sub-Saharan countries, health workers have served as a supportive asset to teachers as HIV/AIDS knowledge resource persons (UNESCO, 2011:16). Similarly, some parents have emerged as barriers to teachers' mediation efforts, through censoring the content that teachers impart to children about sexuality and reproductive health (Webb and Gripper, 2010:29). The resulting despondency among teachers regarding the teaching of HIV/AIDS in such communities is partly attributable to this scenario.

It is important to highlight the extent to which the interactions among the implementation elements central to this study can evoke the emotional dimension of change. This is an aspect that will be considered through the phenomenological lens of this thesis.

Essentially, the above-mentioned issues thus highlight the impact of certain people's decisions, choices, and actions as policy actors at certain places on teachers' classroom applications of policy representations. These people at their various venues constitute the unique context spaces and conditions that ultimately govern

teachers' cognitive sense-making of policy in classrooms. With respect to the school as one such venue, the conditions that a school leadership sets have often been associated with teachers' particular responses to policy. The literature highlights the fact that school principals who capitalise on policy tools such as professional learning communities create context spaces for teachers to interact collegially. Such a scenario potentially engenders radically different teacher learning opportunities from a scenario where such conditions are lacking or absent in schools (Coburn and Stein, 2006:35; Smith, 2008:19).

In my conceptualisation of Honig's model to sketch the trajectory of the implementation of the AIDS curriculum, I am wary of Honig's (2006:13) warning against a linear, monolithic conception of the interaction among the people, policy and places elements. Since curriculum implementation is always a complex and dynamic undertaking, such an analytical approach seems to be rather myopic. Rather, the analytical strategy used to understand policy implementation should be one which is wary of how the dictates of unpredictable implementation conditions account for teachers' change efforts at particular places at given times. Such a strategy can assist us to navigate possibilities and limitations that confront teachers, with greater openness. It also has the potential to make us appreciate the inevitability of the often elusive character of educational change despite numerous efforts at improving theorisation about education. Honig (2006:13) succinctly illustrates this point when she states that:

[t]he diversity of policy tools simultaneously at play in contemporary public educational systems means that implementers now juggle an arguably unprecedented variety of logics and underlying assumptions about how to improve school performance in ways that significantly complicate implementation.

Honig's view is consistent with Spillane *et al.*'s (2006:57) assertion that how teachers and other people with professional education credentials make sense of curriculum reform depends on policy tools that are appropriate for a curriculum. Their prior knowledge and experiences and a myriad of other unforeseeable variables in the broader institutional setting in which implementers operate are therefore important (Spillane *et al.*, 2006:57).

Finally, it is suggested in this study that the implementation process is contingent upon context, where particular elements of the people, policy and places factors interact to produce policy processes and policy outcomes that are unique to given context spaces such as schools. This means that it is not possible to establish universal truths concerning classroom policy implementation. Neither is it possible to make generalisations about the implementation processes of a given curriculum as they occur in unique school settings. I contend that the above arguments reaffirm the spirit of the phenomenological-adaptation conceptual lens that informs this study.

2.3.3 Teacher cognitive sense-making: an ingredient for curriculum adaptation

The issue of cognitive sense-making of a curriculum is relevant to the question I seek to address regarding how teachers understand and implement the AIDS curriculum. Although it lacks empirical validation, the claim I make, that whether or not they are engaged in a community of practice (COP), individual teachers uniquely experience cognitive processes as they respond to curriculum policy messages and enact them, seems to be conceptually plausible. I believe that when Spillane *et al.* (2006:61) assert that cognitive sense-making is not purely a solo effort, they imply this in the context of a collective sense-making discourse. They do not focus much on the process as it occurs to a professionally isolated teacher who is not in any way affiliated to a learning community. I contend that an isolated teacher also reconfigures a given curriculum into a version that he or she thinks is the best way of implementing it.

Since this study adopts the phenomenological approach, which accentuates teachers' cognitive sense-making in the context of social affiliations, I adopt the notion of teacher cognition within COPs in describing how this occurs with individual teachers. In terms of Honig's model, I find it relevant to analyse how, in the context of social infrastructures located inside and outside schools, negotiation and co-construction of meanings among teachers as people responding to policy ultimately shape individual teachers' implementation practices in their respective classrooms.

The first point to be mentioned is that as individual implementation agents, teachers have recourse to their prior knowledge and historical experiences, as well as teaching epistemologies (Blignaut, 2007:174; Spillane *et al.*, 2006:49), to notice, interpret, and mentally construct practices to implement a curriculum. When

presented with a new curriculum, teachers tend to assimilate new information on the basis of what they already know in their cognitive structures about teaching. Subsequently, this influences the way they translate the ideas into teaching practice. Spillane *et al.* (2006:49) elaborate the point by stating that:

[n]ew information is always interpreted in light of what is already understood.

In effect, teachers' already anchored conception of pedagogy may make it difficult for them to encode and master incoming policy messages, thereby upsetting their appropriation of the curriculum as instructed by policy specifications. In this way, the curriculum runs the risk of being enacted in a different way to what was intended.

Another important point is that cognition occurs through the application of mental schemas. Schemas are specific knowledge structures that link related concepts for making sense of the world with predictions about events (Spillane *et al.*, 2006:51). They involve mental representations of dynamic processes called mental or intuitive models, by means of which a sense-maker (a teacher, in this case) interprets incoming information (policy stimuli, in this case) on the basis of a familiar knowledge repertoire (Spillane *et al.*, 2006:50). As an example, teachers may use mental models to envision how children should do a role play in an HIV/AIDS lesson, based on their tacitly held beliefs and expectations about how participatory methods work. Whether or not the configurations are concordant with the policy messages is another matter.

The point that human beings tend to pay more attention to information that confirms, rather than refutes or challenges, their expectations (Spillane *et al.*, 2006:51) is also important. This assertion seems to be confirmed in the case where teachers select those subject contents or pedagogies that they believe conform to their mental frames of reference. Some HIV/AIDS teachers in some African schools have left out of their lesson discussions about sexuality and HIV/AIDS issues, which they felt ran counter to their personal convictions regarding the pandemic (Lesko, Brotman, Argawal and Quackenbush, 2010:830; UNESCO, 2011:17).

The other critical point to note is that, what further complicates matters at the policy-practice confluence of educational change is, according to Spillane *et al.* (2006:50), the major restructuring of already existing schemas as part of learning. As teachers

confront new policy messages and encode them into their mental structures through assimilation, they tend to render the unfamiliar information as something with which they are familiar. Their failure to restructure or accommodate new information by modifying existing schemas makes teachers always perceive old practices as permanent givens. This has the danger of new ideas being seen as minor variations of what is already understood, rather than being seen as different in critically important ways (Blignaut, 2008:20; Spillane *et al.*, 2006:51).

Yet another point is that human beings display the propensity to regard new stimuli entering their cognition superficially. Usually, concrete aspects of an issue similar to an image that is already anchored in the pre-existing structures are seen as the salient essence, while the deeper connections and meanings are glossed over (Spillane *et al.*, 2006:51). For example, on the basis of analogical reasoning, that is reasoning based on similarities between objects, teachers can rely on superficial similarities when confronted with a new curriculum and then purport to have knowledge of the teaching strategies that they come across in other subject areas. They may rely on such superficial similarities when teaching HIV/AIDS lessons, glossing over the deeper connections and meanings that are relevant to the particular area of the curriculum.

Finally, a key reason for the failure of local agents to enact policy as envisaged by the curriculum designers is that different teachers interpret the same policy messages differently. Studies on mathematics and language arts and academic standards in California confirmed that even teachers who had encountered the same communities of learning interpreted the education programmes in different ways (Spillane *et al.*, 2006:53). According to Spillane *et al.* (2006:53), differences in teachers' interpretations of the curriculum frameworks were attributable to their prior knowledge and individual teaching epistemologies. This illustrates the fact that although cognitive sense-making is not a solo but a collaborative enterprise, curriculum mutation is largely subjective. It is a question of first establishing a common theoretical grounding in teaching in collegial intellectual communities, and ultimately adopting one's individual modalities of enacting the curriculum in one's own classroom.

Analytically, underlying assumptions about teacher cognitive sense-making underscore the value of teachers' intellectual engagement as they construct meanings of a curriculum, thereby providing us with a deeper understanding of how teachers understand and enact a curriculum.

However, Spillane *et al.* (2006:51) seem to suggest that the psychological dissonances that teachers experience during cognitive sense-making, such as always seeing new policy messages as familiar and superficially, are not resolvable. They seem to suggest that teachers' cognitive faculties remain closed to accommodation or modification of the already established knowledge structures. I contend that when working in collaborative settings over time, teachers should be able to transform old conceptions of teaching knowledge to new planes of abstraction, given that they possess the faculty of discrimination. Perhaps what complicates these authors' position is their failure to clarify how long these cognitive complexes last in sense-makers and at what stage of implementation (initiation or institutionalisation) they manifest. On this note, I find Smith's (2008:190) contention that:

[i]t is possible to suspend the assumptions about our world views of teaching housed in our mental models, so as to see things in a new way and do them differently, relevant to my view that epistemologies can be altered.

Finally, I recommend that more research on the foregoing issues be conducted to extend and deepen our understanding of the cognitive dynamics of teacher implementation of a curriculum as they are important in shaping teachers' mutation and enactment of curriculum policy.

2.4 SOME KEY FACTORS INFLUENCING TEACHER IMPLEMENTATION OF THE SCHOOL HIV/AIDS EDUCATION PROGRAMMES

There are several factors, endogenous and exogenous to teachers as cognitive sense-makers mediating an HIV/AIDS curriculum, which frame and shape teachers' classroom practices.

2.4.1 Teacher characteristics

2.4.1.1 Teacher knowledge and skills

Teachers' subjective interpretation of a curriculum involves serious intellectual and emotional engagement with the policy messages. In this regard, teachers are expected to possess the requisite knowledge and skills to handle the HIV/AIDS curriculum materials proficiently.

A considerable body of literature places a high premium on teachers' pedagogical knowledge and skills, as well as subject content knowledge requisite for effective teaching about HIV/AIDS (Kelly, 2007:68; UNESCO, 2011:18). The nature, quality, and relevance of intellectual knowledge and skills that HIV/AIDS teachers acquire at pre-service and in-service levels regarding HIV/AIDS education programmes in schools has emerged as a central endogenous teacher variable that fuels or frustrates teacher interventions. The intellectual competencies that teachers possess to engage in cognitive sense-making of HIV/AIDS school curricula in part explains their degree of ability and depth of understanding to handle the curricula. However, a disturbing concern is that inadequate and inappropriate teacher preparation has been found to be the case in most sub-Saharan and Southern African Development Community (SADC) countries (Kelly, 2007:70; Mugimu and Nabbada, 2010:9). Teachers' lack of capacity to deliver relevant HIV/AIDS prevention education (Theron, 2008:30) has led to superficial implementation of HIV/AIDS education programmes in most schools. De Lange and Stuart (2008:129) shed light on the enormity of this problem by pointing out how, despite their intentions to offer the best HIV/AIDS prevention education and to empower and care for learners that are infected or affected with HIV or AIDS, the mediation efforts of some South African teachers are hamstrung by lack of capacity.

In terms of Honig's model, HIV/AIDS curriculum policies for most countries, including Zimbabwe, focus on what Spillane *et al.* (2006:57) call the core of schooling. By this, implementation processes involve the fostering of teacher-learner relationships and the use of learner-centred, participatory approaches as the core for mediating interventions. With the policy targets being youth that are vulnerable to HIV/AIDS and who need life skills, the focus of curriculum goals is on effecting more

fundamental changes in teacher behaviour, where the teacher acts as facilitator, and learner behaviour, where the learner engages in active, minds-on, hands-on learning experiences (MoESC, 2009:17). It is indisputable that teachers' intellectual capacities are consequential to effective curriculum implementation. Therefore, when teachers' implementation performance in relation to complex policies comes to the fore, what matters most is the extent to which the knowledge and skills they possess or continue to acquire enable them to interpret and enact HIV/AIDS policy in a core or peripheral implementation sense. Yet, evidence attests to a lack of such necessary capacities among teachers (Theron, 2008:30; UNAIDS, 2009:11; UNESCO, 2005:228).

2.4.1.2 Teacher attitudes and confidence

In a study conducted in some US elementary schools, some teachers reported discomfort with teaching strategies such as role playing, problem-solving, and small group discussions. They also felt unprepared to teach HIV/AIDS topics that covered social, emotional and societal issues (Lesko *et al.*, 2010:826). In the same study, while some teachers experienced, discomfort, and a dislike for some topics, other teachers felt extremely comfortable to teach any topic (Lesko *et al.*, 2010:827). Helleve, Flisher, Onya, Kaaya, Mukoma, Swai and Klepp (2009:62) claim that a study conducted in some schools in the Netherlands found a positive relationship between teachers' attitudes towards the HIV/AIDS education programme and their commitment to teaching the programme. Negative attitudes tended to make teachers less committed to teaching the programme.

The possession of teachers' knowledge and skills to enact the HIV/AIDS curriculum affects the comfort and confidence with which teachers handle the curriculum. According to Helleve *et al.* (2009:62), teacher self-efficacy or teachers' belief in their ability to teach a particular subject, has been seen to correlate positively with how knowledgeable and skilled teachers are in handling the HIV/AIDS curriculum.

In studies undertaken in some primary schools in South Africa and Tanzania, teachers' perceptions of their ability to execute various activities that they were expected to had a significant effect on their response to HIV/AIDS curriculum policy messages. Those teachers who had received some training reported high levels of confidence in using some of the teaching methods (Helleve *et al.*, 2009:62).

According to Mathews, Boon, Flisher and Schaalma (2006:392), a study conducted in some schools in South Africa revealed that teachers that had been trained well to teach about HIV/AIDS reported high levels of teacher self-efficacy, as they felt confident to teach the subject.

While the personal attributes towards the HIV/AIDS curriculum discussed above are very important for effective implementation of the curriculum, when teachers exhibit commitment towards teaching it, the possibilities for fruitful student learning are increased. By the same token, when these personal attributes induce a sense of inadequacy in the teachers, this potentially impairs the mediation of HIV/AIDS interventions. In that vein, even in cases where teachers possess favourable implementation attributes, their efforts have often been frustrated by a lack of facilitative implementation support from various other stakeholders.

2.4.2 Learner attributes

As with learner attributes in relation to a curriculum taught to them, such as attitudes towards mathematics or computers, or maturation and readiness to learn the curricula, there are certain learner attributes that some writers have identified in relation to learning about HIV/AIDS. In a study undertaken in some South African schools, Helleves *et al.* (2009:198) found that learners' inability to use the English language proficiently caused teacher-learner communication problems, making it difficult for teachers to explain the HIV/AIDS instructional materials to learners. These authors recommended using the learners' native language in cases where teachers felt that the learners could not communicate.

The issues of learner maturation and learning readiness in relation to human learning are not new in the field of psychology of education. Regarding learners' learning of the HIV/AIDS curriculum, the study conducted by Helleve *et al.* (2009:62) established that learners' levels of maturity and mental readiness had a bearing on teachers' levels of confidence to discuss issues related to sexuality. The younger the learners, the more confident teachers were, and the older the learners, the less confident teachers were to openly discuss the issues with learners.

Finally, Mapolisa *et al.* (2006:49) identify learners' negative attitudes towards learning of a curriculum as a challenge to the curriculum implementer. They

maintain that if learners exhibit a negative attitude to a given subject curriculum, that negatively affects the teacher.

It can be argued that as actors for whom the curriculum is designed, learners may exhibit attributes which can also play out on how teachers react to the policy messages. This observation is consonant with the enactive thinking that informs this study, that it is unreasonable to ignore the fact that learners also react to a curriculum in their own ways, which in turn may affect their teachers' responses.

2.4.3 Teacher capacitation towards implementation of the curriculum

In the literature, empowerment of teachers with resources and materials needed to teach about HIV/AIDS has been acknowledged as a key factor that plays out on teachers. The fundamental resource of teachers' knowledge about the curriculum assumes primacy in its importance, along with material, psychosocial, moral and related forms of facilitative support that empower the HIV/AIDS teacher to functionally perform his or her responsibility. In this vein, UNAIDS (2009:8) and UNESCO (2011:17) have emphasised the need for providing HIV/AIDS educators with various forms of facilitative support to empower them. Buthelezi (2008:109) asserts that the paucity of teaching and learning resources in many Third World schools is an impediment to successful teaching of school HIV/AIDS preventive programmes. According to Van Rooyen and Van den Berg (2009:96), those teachers who have sound knowledge and skills to teach these educational programmes tend to make meaningful interventions and to exhibit more positive attitudes towards their teaching than teachers who are inadequately equipped with these assets. Studies have shown that teachers are not properly capacitated with the materials and resources to handle the complex HIV/AIDS curriculum. In a study conducted in some schools in South Africa, Van Rooyen and Van den Berg (2009:99) found that teachers who were not adequately trained and supported with resources, knowledge, collegial support, and support from parents in their teaching about HIV/AIDS showed weak commitment to the task.

The work of Buthelezi (2008:109) and the findings from a study conducted by Van Rooyen and Van den Berg (2009:99) in some schools in South Africa revealed that HIV/AIDS teachers were not being supported with materials and resources to teach the curriculum. This evidence is similar to the findings of a study that was conducted

by Ntaote (2011:112) in some primary schools in Lesotho, which found that HIV/AIDS teachers were not being empowered with adequate materials and related resources to teach about HIV/AIDS. Ntaote's (2011:112) study further identified the implementation challenge of a lack of psychological support for HIV/AIDS teachers towards handling HIV/AIDS vulnerable learners. Thus besides giving teachers physical resources, policymakers did not provide the more intricate psychological-emotional dimension of teacher support which Ntaote (2011:112) identified, which educational change leaders and researchers have often glossed over.

However, there is evidence that supports that, given the necessary support teachers can also commit themselves more seriously to implementing the preventive programmes. In the same study above Van Rooyen and Van den Berg (2009:96) found that the availability of physical resources for the teaching of this programme induced willingness in teachers to implement, provided they were capacitated with knowledge. A study conducted by Chabillal (2012:126) in some South African Muslim schools revealed some encouraging teachers' change efforts as a result of the parental support given to them. The school management team and HIV/AIDS teachers worked in collaboration with the parents towards the education of their children. A separate study Deutschlander (2010:444) conducted in some US schools underscored the value of professional training of HIV/AIDS teachers as an impetus to effective mediation of interventions. Hence, the need to support teachers from various fronts can never be overemphasised.

2.4.4 Some policy issues shaping and framing the work of HIV/AIDS teachers

At the broad macro-level of policy formulation and implementation, the decisions and actions of policymakers and educational change leaders impact on teachers' HIV/AIDS interventions. Some national governments have committed themselves to developing policy frameworks to address HIV/AIDS education in schools. According to Panchaud and Poncet (2004:8), Brazil and South Africa are some of the best examples of nations whose governments have developed more sustainable HIV/AIDS policies specific to the education sector. Consequently, within the scope of their policy frameworks, they embrace and attempt to actively provide support to HIV/AIDS educators in schools, in the way of professional development, resources,

and teacher participation in curriculum development (Panchaud and Poncet, 2004:8). In the US, in the New York City Department of Education's School Wellness Programs, policymakers have taken it upon themselves to provide professional development sessions for teachers on HIV/AIDS education by way of refresher courses (Walcott, 2012:xviii).

In South Africa, the Department of Education mandates teachers to teach the HIV/AIDS curriculum (Bhana, 2009:166). Contrary to the department's pledge to provide the necessary support, Buthelezi (2008:109) reports a persistent shortage of material resources in schools in South Africa, particularly in the rural areas. Similarly, Wood and Hillman (2008:40) assert that due to their lack of properly coordinated strategic plans that could provide teachers with support in the form of financial and physical resources, most government strategies have failed to respond effectively to the HIV/AIDS curriculum imperatives that the education sector should fulfil.

At the meso-level, local education authorities in most countries also fall short of providing facilitative implementation support to teachers (UNESCO, 2011:22). While UNESCO (2011:22) asserts that the success of school HIV/AIDS interventions hinges on the support of local education authorities, in the form of resources and continued professional development, such support has not reached schools in most Third World countries. Furthermore, at the school level, school heads have not been keen to provide the same kind of support mentioned above (UNESCO, 2011:22).

In the dearth of such necessary implementation support, teachers are often not involved in the development of the HIV/AIDS curriculum materials, with the effect that they often become overwhelmed with the need to interpret the curricula. However, Zambia's policymakers have positively enhanced teachers' cognitive sense-making by involving them in the curriculum-making process to produce school HIV/AIDS manuals (Mishra, 2009:54; UNESCO, 2011:42). Adding to the enormity of teachers' implementation challenges regarding support is policymakers' imposition of multiple demands on HIV/AIDS educators, resulting in unrealistic expectations (UNAIDS, 2009:11).

It is also evident that the relevant policies formulated by education ministries in most Third World countries fail to allocate sufficient teaching time to enact this curriculum.

According to UNESCO (2005:203), since existing school subjects are already oversubscribed, with their own content and activities, there is often not enough time for HIV/AIDS education in schools. In addition, overloaded school curricula in most Third World classrooms cause marginalisation of HIV/AIDS education interventions by teachers (HEAIDS, 2010:23; Kelly, 2007:70).

What the above literature seems to suggest is that in the current situation of a paucity of implementation support and associated implementation challenges, teachers have to make do with their own devices, while policymakers and change leaders sitting in their offices falsely think that the policies they have mandated teachers to enact are being implemented as intended. Teachers are thus left to “sink” or “swim”.

2.4.4.1 School-level policy issues that play out on the work of HIV/AIDS teachers

Within the broader context of the social, political, economic and cultural dimensions of the community in which curriculum implementation takes place, schools exist as autonomous and sovereign systems. They are venues that impose challenges and opportunities for teachers to enact policy by way of not only communities of practice, as alluded to in section 2.3.3, but also other catalytic elements that fuel educational change, such as the school culture and the school climate.

Smith (2008:166) argues that in respect of the culture of a school, when the principal leads his or her staff to develop and establish what people believe in, value, and prioritise, a school climate of collective and harmonious pursuit of the key policy goals that the school sets becomes a key educational change issue. Thus a school principal who fosters in his or her staff the notion of the school as a repository for learning to teach has the potential to involve various stakeholders in mapping out the best ways of mediating HIV/AIDS prevention education programmes. For example, Buthelezi (2008:112) argues that where the policy of a school involves parents in working with teachers collectively, the potential conflict of interests associated with the sensitive HIV/AIDS curriculum can be resolved. For Buthelezi, the value of sound leadership that initiates collaborative engagement by various parties for the exchange of information about the curriculum by way of forums is immeasurable.

Similarly, when the parents are not involved, they might be suspicious of the messages conveyed to learners by educators (Buthelezi, 2008:112). Studies show that where principals and other education administrators failed to give teachers technical, material and financial support, teachers tended to be despondent and indifferent in enacting the HIV/AIDS curriculum (UNAIDS, 2009:10).

Although teachers may face numerous and complex challenges, as mentioned above, some authors, such as Oluga, Kiragu, Mohamed and Walli (2010:377), believe that through their technical expertise as educators, teachers can countervail the pressures from teaching about HIV/AIDS by helping people to move towards assimilating and accommodating new knowledge, without necessarily threatening their cultural practices. Sharing similar sentiments, UNAIDS (2009:8) urges teachers and other stakeholders to discuss and understand the dynamism of culture and to appreciate that culture is not sacred, but owned, and therefore some cultural aspects have to be relinquished in the face of the HIV/AIDS pandemic.

The foregoing issues prompt me to re-emphasise the idea that, in terms of Honig's model and cognition, several people at certain places of the multilevel education system also respond to the complex emotions entailed in teaching about HIV/AIDS and sexuality as contested knowledge. For good or for bad, this impacts teachers' implementation decisions and actions in their individual classrooms.

In line with the broad Adaptation approach I adopt, I reiterate that despite the myriad of challenges teachers are confronted with in their intervention efforts, their decisions are ultimately encumbered by their own theoretical and professional frames of reference, which can differ from those frames offered by the designers. This is one of the reasons that it would be unrealistic for implementation researchers to expect to find teachers implementing a curriculum such as the HIV/AIDS curriculum with absolute implementation fidelity.

2.4.4.1.1 Implementation influences for the school

As sites for policy implementation, schools are inextricably linked to other places or institutions in the societies in which they are located. Embedded in a social context, as they are, schools present influences that shape individual teachers' cognitive sense-making and their enactment of curriculum policy. Smith (2009:163)

underscores the impact of the interaction between the school's external processes and its internal processes. One of the most influential context spaces within and outside the school which serves as an opportunity for teachers to learn about instructional improvement in relation to particular curricula is teacher collaborative groupings.

2.4.4.1.2 Communities of practice

In the postmodern world, which views curriculum implementation according to the Adaptation approach, policy implementation researchers have come to realise that the problem of education policy implementation is one of teacher learning.

In this context, there is a growing consensual theoretical position among contemporary implementation scholars that viewing teacher learning programmes through the narrowly-focused conception of staff development is now out of sync with postmodern thinking (Steyn, 2011:160). According to Steyn (2011:160), the new theoretical position celebrates the more comprehensive continuing professional teacher development (CPTD) paradigm of teacher learning.

Research on the implementation of HIV/AIDS curricula confirms the ineffectiveness of the often one-shot in-service staff development programmes, which have not yielded any meaningful teacher learning (UNESCO, 2011:28).

Following the more comprehensive professional teacher development paradigm that Steyn refers to, I prefer to use the term "communities of practice" (COPs) to terms used for other forms of teacher learning groups, which Edwards (2012:26) variously calls "networks", "professional learning communities", "networked learning communities", and "learning cycles". COPs represent most of the common characteristics of the more enduring, structured variations of teacher learning groupings (Edwards, 2012:26).

To put the reader in perspective regarding the relevance of COPs to the phenomenological lens I adopt, I point to an observation that McLaughlin (2005:65) makes:

The concept of communities of practice is foregrounded on the notion that the phenomenological perspective of change centres on implementation issues

and concerns in social affiliations and professional discourses rather than on organisational routines.

I agree with McLaughlin's view that in this implementation-dominant era, education leaders should concentrate their efforts more on capacity building of individuals and schools than on administrative issues such as adherence to timetables, student and staff discipline, etc. I contend that if schools are to be of any worth, teachers must continually grapple with the complex task of making sense of the best practices of teaching that optimise student learning. Hence, equipping teachers with technical skills through learning synergies should take precedence over the supposedly important but complementary administrative tasks assigned to them.

I therefore argue that teachers' access to a COP, to which they affiliate within the school or outside, serves as an opportunity to enhance their implementation of a curriculum. Conversely, lack of access to a COP could present a barrier to teachers' effective mediation of the implementation interventions.

Viewed as collective enterprises in which teachers who are held by a common goal or a shared vision engage in collaborative learning to change their teaching practices for the better (Coburn and Stein, 2006:29; Edwards, 2012:26), COPs serve as places for teachers to develop a common theoretical base to respond effectively to education policy.

According to Steyn (2011:162), it is in COPs that collaborating teachers utilise their strengths and complement each other's skills and knowledge to reflect on and broaden their pedagogical perspectives. Coburn and Stein (2006:30) and Spillane *et al.* (2006:57) argue that as teachers tease out the pedagogical views of a curriculum, cross-pollinating ideas in social infrastructures, they ultimately develop tangible artefacts that are an expression of a shared repertoire. This process is called reification. In other words, the process congeals into concrete modes of teaching practice, such as "ideal" lesson plans, student assessment practices, and methods which the community renders as a common theoretical perspective that guides individual practice in classrooms. Consequently, from learning in a social context so-called "outer learning" teachers individually make sense of and internalise their own teaching epistemologies in a way that is unique to them as in "inner learning."

To re-emphasise the value of COPs for schools as fertile venues for the social learning opportunities of individual teachers, I draw on Edwards' (2012:12) instructive acknowledgement of the notion of schools as being more than the sum of their parts. By implication, in COPs, teachers' individual capacities are tapped, as teachers share tacit knowledge for the ultimate benefit of the school, while the COPs' stock of reified expertise, in turn, capacitates the entire school.

However, COPs may not always provide straightforward solutions to curriculum implementation problems. Research has shown that diversity of opinions of community members is a potential threat to sustained coordination of activities and continued survival of the community (Coburn and Stein, 2006:30; Edwards, 2012:17). For example, Cowie, Hipkins *et al.*'s (2009:25) study of New Zealand's new Curriculum 2007 revealed that reaching a shared understanding about new teaching practices generated tension among teachers in the community.

Coburn and Stein (2006:27) also point to the danger of a community that has grown strong and has failed to undo a reified practice that it has confirmed as a shared repertoire, even if it deviates drastically from intended curriculum practice.

In addition, in section 2.3.2.1 I alluded to the issue of designer-implementer professional interface, now emphasised in the Implementation-Dominant paradigm of educational change. Whether teacher communities of practice involve or exclude some policy designers in the negotiation and co-construction of meanings has significant implications for the extent to which teachers' sense-making results in practices that are consonant with policy specifications.

In their study of New Zealand's Curriculum 2007, Cowie, Hipkins *et al.* (2009:31) found that being abandoned by a policy designer who had been offering technical assistance to a community led to teachers drastically deviating from policy intents. Conversely, Edwards (2012:35) observes that in COPs where policy designers as leaders have availed technical assistance with the curriculum, teachers' shared repertoires tended to gravitate towards policy prescriptions. This observation is consistent with Kennedy, Chan and Fok's (2011:51) "implementation reconciliation" perspective. These authors regard the professional interface between policy designers and policy implementers as an opportunity to reconcile the disjunctions between policy and practice, and therefore take issue with its absence.

The other point that should be made is that COPs outside schools have been widely criticised for importing into the mother schools theoretical ideas that are alien to the school and that run counter to the particular culture of teaching practice at the school (Steyn, 2011:166). Furthermore, the usually one-off “teachers-only day” gatherings seem to provide inadequate teacher learning time and scant opportunities for in-depth content coverage. In most Third World countries, it has been reported that teachers that have been sent by schools to participate in the gatherings on the school’s behalf have not provided any meaningful feedback to their colleagues (Steyn, 2011:166).

The last point to be made is that it appears that success stories about the viability of COPs have been told and documented in the well-resourced developed world (Coburn and Stein, 2006:28; Cowie, Hipkins *et al.*, 2009:31; Edwards, 2012:36). Empirical evidence needs to be obtained to confirm whether Third World countries have sufficient time, money, and associated resources for the gatherings, given the various constraints, such as large classes and an overloaded curriculum.

Despite the shortcomings and challenges of COPs, their value as a substantial pool of social capital to enhance the best opportunities for teachers to learn collaboratively and to formulate best teaching practices cannot be overemphasised.

2.4.5 Some challenges, opportunities, and joys in teaching about HIV/AIDS in schools

My interest in how teachers are experiencing implementation of the AIDS curriculum necessitates a review of some major challenges and opportunities that teachers experience in enacting it. I take issue with the failure of curriculum managers, policymakers, and researchers to probe the nuances of implementation challenges that teachers face during their practical contact with the HIV/AIDS curriculum in their classrooms, from a broader social, political and cultural perspective. These stakeholders effectively ignore the critical contextual situations that shape teachers’ implementation efforts.

Broad contextual factors embedded in the political, social and economic arenas account for the kind of conditions in which HIV/AIDS teachers mediate policy. Anthropologically speaking, teachers operate in a cultural community, with its own

norms, values, attitudes, beliefs, and practices (Katsinde and Katsinde, 2002:99). To illustrate this critical point, Kincheloe (2008:8) states that:

[a]ny attempt to understand the circumstances of the teacher should realise that a relationship exists between school programmes and the contours of the society and culture in which the schools are located.

2.4.5.1 Resistance to the content of the school HIV/AIDS curriculum

In underscoring the significant influence of the broad contextual factors on teachers' enactment of HIV/AIDS school programmes, the concern about the possibility of teaching content and activities that conflict with community, cultural or religious practices, norms and values (Wood and Hillman, 2008:30) is a practical example of Kincheloe's observation in the previous section. I explain in detail below how in this broad context the emotional dimension inevitably contributes to the way teachers filter their enactment of HIV/AIDS school curricula. It is pertinent to recognise the fact that a complex web of relations exists, which teachers experience with various policy actors also implementing the HIV/AIDS curriculum. Spillane *et al.* (2006:56) clearly emphasise this point when they intimate that the thinking and actions of social agents are situated in institutional settings that structure their work practices, innovation, and the implementation process.

To begin with, it should be recognised that the plethora of challenges that teachers and other policy actors face exists in conjunction with the emotional dimension that pervades implementation processes. This is consistent with the phenomenological-adaptation approach and Honig's model and the cognition lens that I utilise in this study.

Research evidence clearly illustrates how the HIV/AIDS subject as a widely contested knowledge area represents collisions of ideas on several issues among many people. Conflicting views regarding sources of authoritative knowledge about HIV/AIDS, sexuality, health, and illness, for example, exist among various people with interests in education, coupled with emotions that the collisions evoke (Baxen and Breidlid, 2009:18; Lesko *et al.*, 2010:826). Consequently, socio-culturally defined epistemic beliefs that various HIV/AIDS school education stakeholders hold concerning what is worthwhile education for young learners in this area have often

shaped teachers' cognitive sense-making and the "what" of teaching in this area (considerations pertaining to content) quite significantly.

One of the primary sources of controversy that promotes collisions of ideas that evoke emotions is the language in which the HIV/AIDS policy messages are explained. Bhana (2009:167) draws our attention to connotations conveyed in HIV/AIDS curriculum policy messages, considered as historical and cultural discourses. These are frames of reference that people use to govern what is "acceptable" and what is "not acceptable" to discuss with the young learners and what learners may and may not say during HIV/AIDS lessons. Research indicates that in some US schools, teachers have been castigated by parents and the community, and in some cases threatened with lawsuits, for using terms related to sexuality (Lesko *et al.*, 2010:826). In many African countries, such as South Africa, teachers have been threatened with censure by parents, and in some cases dismissal, for using terms considered to be cultural taboo, such as "penis", "vagina", and "condoms", with young children (Helleve *et al.*, 2009:198; Oluga *et al.*, 2010:376). In view of the above challenges, teachers have had to selectively teach those HIV/AIDS policy messages that they have interpreted as being pedagogically more permissible for parents and the community. They have responded ironically to the demands of parents and the community as key policy actors with a stake in their children's education and cultural conventions, by sanitising discourses which could help to cushion children from exposure to HIV/AIDS vulnerability.

The cases above demonstrate not only the emotion-laden responses that policy actors display in the face of contestation of pedagogical approaches regarding HIV/AIDS school education, but also speak to the political dimension of educational change. Malen (2006:84) clearly cites politics as an ever-present and pervasive force that can shape both the adoption and the implementation of education policies decisively.

She categorically states that:

[a]ctors seek to promote and protect their vested material and ideological interests [...] and to advance their diverse conceptions of the public good (Malen, 2006:84).

Indeed, the foregoing cases illustrate what politically parents and the other clusters of policy actors can do in order to protect parents' ideological interests and, their cultural and religious beliefs. They exemplify what different people can do in their bid to advance their conceptions of public good (for example, stopping the use of language that "corrupts the youth"), and how far their actions can go to influence teachers' responses to HIV/AIDS curricular matters. These cases represent the dilemmas that teachers can be caught up in. On the one hand, policy demands that they openly discuss HIV/AIDS and sexuality issues with children in classrooms, as supposed discursive spaces for acknowledging such issues, and, on the other hand, parents and the community impose political barriers.

However, in some schools in Africa where teachers have received some training, there has been little opposition to policy. Consequently, teachers have responded to policy messages with greater confidence and freedom to discuss issues related to HIV/AIDS with their learners (UNESCO, 2011:22). At the provincial level, education administrators have appreciated the value of the policy representations, they have perceived them as normal teaching points, and they have rendered positive support to teachers (UNESCO, 2011:11).

2.4.5.2 Experiencing difficulties with teaching the curriculum: the knowledge deficiency problem

Our understanding of the challenges and the opportunities that teachers face can be extended through an elaborate analysis of the cognitive and affective aspects of teachers, which serve as a lens through which they filter their implementation of an HIV/AIDS curriculum.

That possession of the requisite skills and knowledge by HIV/AIDS educators is a *sine qua non* for effective mediation of the HIV/AIDS curriculum interventions was acknowledged in section 2.4.1.1. Research evidence points to the major challenge of the lack of adequate and appropriate knowledge and skills to handle the complex HIV/AIDS curriculum (De Lange and Stuart, 2008:129; Helleve *et al.*, 2009:197; Lesko *et al.*, 2010:826; Mugimu and Nabbada, 2010:4). How effectively teachers are able to apply an HIV/AIDS education policy in classrooms has often been attributed to their intellectual proficiency as a result of the teacher preparation that they received or continue to receive towards the curriculum.

The lack of adequate and appropriate subject content knowledge and pedagogical skills to enact the programmes has led to a serious intellectual deficiency (Wood and Daniels, 2008:164). According to Wood and Daniels (2008:164), the start of the cognitive difficulties that teachers face is their failure to deconstruct the integrated nature of the HIV/AIDS curricula. Teachers tend to focus not so much on the social, political, economic and cultural forces acting on the HIV/AIDS crisis as on the biomedical aspects of the teaching about HIV/AIDS. Several researchers support Wood and Daniels's (2008:164) view that the approach of most HIV/AIDS teachers to the curriculum is reducible to a piecemeal, reductionist conception which emphasises the biomedical aspects at the expense of a holistic approach that encapsulates other essential features (Bhana, 2009:166; Lesko *et al.*, 2010:835; Wood and Theron, 2010:12).

Without question, for a teacher to be able to cope with the sensitivity, the complexity, and the tabooed nature of HIV/AIDS issues related to sexuality and entrenched socio-cultural practices, a reasonable depth of understanding of the subject matter and pedagogy is needed. The issue of language use and associated sensitivities in the teaching about HIV/AIDS cannot be ignored. In Chapter 3 I will discuss the language issue and its influence on how clear teachers may find policy messages to be. For now I allude to it in the context of the extent to which teachers respond to policy, taking cognisance of ethical considerations, which are so important in this emotive, sensitive curriculum.

2.4.5.3 The hard experience of grappling with language sensitivities

A body of knowledge about ethical use of language by teachers and learners as they interact in HIV/AIDS classrooms is gaining recognition in the literature. According to Stuart (2010:57), sometimes we speak without really thinking about the impact of our language use on the dignity of others. Sometimes, due to insufficient training, teachers may refer to people living with AIDS as "AIDS victims", or "the infected", without realising that much as these terms are meant well, they may promote the very stigmatisation and discriminatory behaviours that teachers intend to discourage. Stuart (2010:57) advocates thorough teacher preparation at pre-service and in-service levels if teachers are to acquire the insights and emotional intelligence which

will make them sensitive towards vulnerable persons and make them respect human rights and dignity.

2.4.5.4 Teachers' personal and professional identities: opportunities and challenges

I now review teachers' personal and professional identities, to further address my interest in teachers' experiences with the implementation of the AIDS curriculum. The experiences relate to opportunities for successful implementation, as well as major challenges that teachers face as they implement the HIV/AIDS curriculum. I briefly review teachers' personal and professional identities as critical cognitive and emotional dimensions that affect their engagement in the curriculum reform agenda. The emotional dimension of educational change that the phenomenological approach underlines has been documented as an important yet unexplored aspect in the teaching and learning of HIV/AIDS (Lesko *et al.*, 2010:823).

Scholarly accounts have detailed the emotional effects of the HIV/AIDS crisis on teachers, at both a personal level and a professional level, and they have highlighted how these aspects impact their functioning, both as ordinary persons and as professional HIV/AIDS teachers. The challenges, ambiguities, uncertainties, and paradoxes associated with successfully implementing an emotive educational change such as the HIV/AIDS curriculum require serious recognition of the fact that teachers do not objectively engage in interventions, devoid of feelings, emotions, values, beliefs, and sensitivities (Branson, 2010:14). Fullan's (2001:1) portrayal of a balanced perception of the emotional effects of educational change illustrates the inevitable subjective nature of educational change, which is consistent with the phenomenological lens which I utilise in this study.

Fullan (2001:1 states that:

[c]hange is a double-edged sword. On the one side, exhilaration, risk-taking, excitement, improvements, energising; on the other side, fear, anxiety, loss, danger, panic.

However, research indicates that the HIV/AIDS crisis, in general, and, in particular, HIV/AIDS education and sexuality domains, largely evoke in teachers negative experiences, which impact their personal and professional identities. For instance,

Wood and Theron (2010:27) decry the lack of mention in statistical studies of the psychological trauma that teachers and learners suffer from the pandemic. These studies also say little about the associated emotional, social and pedagogical challenges that teachers have to contend with in their teaching about HIV/AIDS in schools in South Africa. Ntaote (2011:90) and Theron (2008:89) also note that the HIV/AIDS crisis has made teachers less well-functioning as individuals. Theron (2008:89) further observes that many teachers have reported constant grief and mood disturbances from frequent AIDS-related deaths and illnesses among their learners, relatives, and colleagues. On a professional level, current theory and research on the effects of the pandemic indicates that teachers are rendered less well-functioning professionally. Some of them have reported weakened professional morale and occupational stress (UNESCO, 2011:17; Theron, 2008:89).

According to UNESCO (2011:17), in Lesotho some teachers have reported “identity ambivalence”, citing incongruence between their personal way of living and what the community expects of them as professional teachers. Consequently, some teachers who knew that they, themselves, were HIV-positive, or who suspected that they could be HIV-positive, demonstrated reluctance to teach youth about HIV/AIDS.

The above examples point to the emotional and psychological challenges that are brought to bear on teachers’ personal and professional identities in a world where the HIV/AIDS crisis has reached pandemic proportions. When these challenges are viewed through the phenomenological lens applied to Honig’s (2006:14) model and cognition, the need to move away from a purely cognitive account to consider how teachers’ motivation and affect (Branson, 2010:14) influence their mediation efforts becomes relevant.

Yet another point to learn from this review is the fact that teachers have to contend with a complex array of changed skills and beliefs, which, in turn, demand more effort. In Honig’s terms, these teachers have to grapple with policy and policy goals that demand of them deeper levels of cognitive competency, and even emotional intelligence.

Drawing from Fullan’s (2001:1) example cited earlier in this section, I pointed out the positive side of implementation challenges and the positive emotions teachers can experience. I find that this optimistic perception of change fits well with Wood and

Theron's (2010:14) concept of reflexivity, which holds promise for teachers' ability to countervail the host of challenges they are faced with and enact the HIV/AIDS curricula more effectively. Reflexivity, or self-reflection, is a teacher's quest for self-knowledge about who he or she is as an HIV/AIDS teacher in a world of HIV/AIDS crisis (Wood and Theron, 2010:16).

Emphasising the value of developing sound personal and professional identities of teachers in relation to HIV/AIDS through reflexivity, or self-reflection, Wood and Theron (2010:18) state that:

[t]eachers need to be clear about their personal (including sexual) and professional identities, since these determine the lens through which they filter what they teach and how they teach it, and how comfortable they are with what they teach.

What justifies HIV/AIDS teachers' possession of self-reflection is the fact that the quest for self-knowledge also appeals to cognition. As they engage in a process of exploring their own personal attitudes, beliefs, knowledge and assumptions, the influence of their own HIV status, and social behaviour, teachers are cognitively making sense of possibilities and limitations that confront them in their teaching task. Wood and Theron (2010:18) further argue that by holding up to critical scrutiny their views and beliefs about HIV/AIDS and their assumptions regarding teaching about HIV/AIDS, teachers get to understand themselves better. These authors believe that such a soul-searching endeavour can be situated in schools in what they term "reflexive groups". I agree with Wood and Theron's scheme for a number of reasons.

Firstly, in the context of the HIV/AIDS crisis, it is incumbent upon teachers to acquire opportunities to navigate their own cognitive and affective domains of being in communities of practice. In these reflexive groups, teachers can share experiences and collegially appreciate the hard realities that they face in their mediation efforts. It is in such gatherings that teachers are able not only to eliminate misunderstandings and misconceptions that they hold about HIV/AIDS and HIV/AIDS teaching, but also to ameliorate what Wood and Theron (2010:18) refer to as "cognitive discomfort".

Secondly, the multiple pedagogical and social responsibilities that HIV/AIDS teachers have can lead to personal and professional identity confusion. This psychological condition requires synergistic collegiality, such as mutually supportive staff members, if it is to be overcome.

It can thus be argued that for many teachers, the occurrence of HIV/AIDS has brought with it unprecedented and hitherto unfamiliar pedagogical and social demands on practising teachers in schools. Open-mindedness on the part of teachers can only be nurtured by reflecting on the challenges as deliberative groups.

I find the similarity in logic between Wood and Theron's (2010:17) construct of teacher reflexivity and the broader Adaptation approach to change and the phenomenological approach, which incorporates Honig's model, relevant to my scheme. Reflexivity has the promise of encouraging individual teachers to restructure their knowledge of themselves and of HIV/AIDS teaching to transformatory planes of abstraction about what it means to be human and to be a humane HIV/AIDS teacher.

Another important but often neglected construct that is relevant to the impact that teaching of HIV/AIDS has on teachers' personal and professional identities is resilience. I believe in an exploration of HIV/AIDS teachers' identity-related challenges which assess not only teachers' reflexivity, but their resilience. Resilience is the ability to live and function positively under negative conditions (Theron, 2008:92). It seems that all too often authors and researchers are oblivious of the fact that not all teachers fail to cope with the challenges of HIV/AIDS and the teaching of the subject as individuals and professionals. In the literature, there are cases documented of teachers who have demonstrated resilience, through being self-reflective and open-minded. Theron (2008:95) reports on a study conducted in some schools in South Africa, where some teachers had learned to cope with their adversities through the use of intrapersonal and interpersonal resources. Lesko *et al.* (2010:827) cite a study undertaken in some schools in the US, where teachers became more open-minded in their perceptions and more confident and resilient to confront teaching challenges by using the interpersonal resource of referring some of the learners' HIV/AIDS-related questions to parents and nurses.

In conclusion, the constructs of teacher reflexivity and resilience appear to be sound strategies for dealing with teachers' personal and professional challenges in relation to the HIV/AIDS crisis and the teaching of HIV/AIDS-related issues. However, the reality is that in most sub-Saharan countries, several constraints undermine the development of such constructs in teachers. Research has shown that teachers have complained that the HIV/AIDS curriculum is an additional load to the already overloaded school curriculum (Hordzi, 2008:331; UNESCO, 2005:203). Teachers in most Third World countries usually handle very large classes (UNESCO, 2005:203). It is therefore doubtful, in the light of the pressures that teachers face, whether adequate time and resources can be found to foster in teachers these useful constructs.

2.5 CHAPTER SUMMARY

Situated within the broader literature on curriculum implementation, this chapter has provided a theoretical context for interpreting the dynamism involved in implementing a curriculum such as the HIV/AIDS curriculum in the classroom. I have attempted to conceptualise the systemic ways in which the myriad of implementation factors impact teachers' mediation of the HIV/AIDS curriculum interventions, drawing on some key ideas from Honig's model and cognition. In examining some of the variables based on the "people, places, and policy" relationships that Honig posited, I have tried to theorise the complex, unpredictable nature of educational change through a phenomenological lens, thereby confirming the reality that teachers' enactment of policy is shaped and framed by a web of complex processes.

CHAPTER 3

KEY ELEMENTS AND CHARACTERISTICS OF AN HIV/AIDS CURRICULUM

3.1 INTRODUCTION

The question of how teachers in primary schools in Zimbabwe are experiencing the implementation of the AIDS curriculum constitutes part of my interest in investigating how teachers understand or configure the specifications of the curriculum into teaching practice. I probe the aspect of teachers' understanding in the context of both their personal, subjective interpretation of curriculum policy, as well as how well they think they comprehend the policy. The latter conception of understanding can best be addressed by reviewing some of the key elements of an HIV/AIDS curriculum in general and Zimbabwe's primary school AIDS curriculum in particular. Section 1.1 of this thesis indicated the existence of general HIV/AIDS curriculum features that have emanated from global education discourses.

As such, there are key features of a typical HIV/AIDS curriculum in common across different countries in the world, in terms of the pedagogy that is utilised and, to a large extent, the content that is covered. This validates a review of key curriculum elements of a typical HIV/AIDS curriculum from the international literature, drawing mainly on an international study conducted by Panchaud and Poncet (2004:15). The survey revealed that countries, including Zimbabwe, shared commonalities regarding key elements of the HIV/AIDS curriculum.

3.2 GOALS OF THE CURRICULUM

The literature indicates that the common goal in this area for countries is the need to transmit knowledge that will help learners to protect themselves against HIV/AIDS (Panchaud and Poncet, 2004:14). This curriculum goal can be realised through three curriculum components, namely content, pedagogy, and assessment.

3.3 THE CONTENT OF THE CURRICULUM

As is the case with most countries, Zimbabwe's primary school AIDS curriculum has its content represented in accordance with the coherent learning domains structure, as it takes account of the development of several learning domains, namely knowledge, skills, attitudes, and values (Barrett, Ali, Clegg, Hinojosa, Lowe, Nickel, Novelli, Oduro, Pillay, Tickly and Yu, 2007:10).

Basically, HIV/AIDS content coverage derives from thematic areas general to every country involved in the survey undertaken by Panchaud and Poncet (2004:15). These thematic areas are (a) basic scientific knowledge, (b) ways of transmission and prevention, (c) awareness, (d) care and treatment, including antiretroviral therapies (ARTs), (e) stigma and discrimination, (f) information and available services; and (g) gender issues.

It is interesting to note that to the list of the general content themes, Zimbabwe's primary school AIDS curriculum adds life skills education and topics that require an examination of social, emotional, cultural, political and economic factors and how these fuel the spread of HIV/AIDS. These topics include relationships, values and beliefs, and management, mitigation and care (MoESC, 2003:8).

As part of content, life skills are essential in developing young people's ability to deal effectively with the demands and pressures, as well as the opportunities, in a world of HIV/AIDS. According to Barrett *et al.* (2007:11), the idea of life skills arises from the insight that although knowledge about issues related to HIV/AIDS prevention may be necessary, it is not sufficient to bring about behaviour change in learners. Thus, learners must be helped to develop specific life skills, such as decision-making, negotiation, interpersonal communication, choice-making, etc. (see the synopsis in section 1.10.2), as these have the promise of bringing about behaviour change in learners. In the process, the idea is to appeal to all facets of being human in the learner, that is, intellectual, social, emotional, physical, and moral (Barrett *et al.*, 2007:10). This notion is consistent with the view that HIV/AIDS educators must focus on both content mastery and, more particularly, life skills development in learners for their holistic development (MoESC, 2003:8; MoESC, 2009:16; UNAIDS, 2009:11).

It can be discerned that the coherent learning domains structure that the HIV/AIDS curriculum follows by nurturing learners' several facets of learning seems to lend itself to the competence pedagogies outlined by Barrett *et al.* (2007:10). According to these pedagogies, all learners are considered as having the capacity to learn about a wide range of HIV/AIDS issues well, despite their differences in intellect. This is consistent with the observation that I made in the synopsis in section 1.10.2 that the curriculum does not emphasise intellectual actualisation. Perhaps one of the reasons that Zimbabwe's primary school AIDS curriculum is silent about student assessment procedures is that the curriculum intends to avoid judging learners' performance on the basis of traditional content-based criteria.

Yet another dimension that constitutes part of the content of the tasks of Zimbabwe's primary schools teachers is the pastoral role of caring and supporting HIV-infected pupils by administering antiretroviral drugs (ARVs) to them while they are at school, and counselling infected and affected children (Okore, 2009:24). Administering ARVs to children includes providing children with knowledge about the correct way of taking these drugs. Research evidence attests to the difficulties that such a conception of content imposes on HIV/AIDS educators. A study conducted by HEAIDS (2010:69) documents the complexity of the aspect of caring content, which is manifest in the superficial treatment of such content by teachers in some schools in South Africa, whose conceptualisation has been reducible to mere tokenism. The teachers' cognitive sense-making reflected a partial but important understanding of their care giving role as one that involves unconditional acceptance of HIV-infected and affected children, where a warm, empathic psychological environment and mutual trust are created. In essence, primary school teachers in Zimbabwe, besides operating as general practitioners who teach all school curricula, have to contend with multiple roles, which the MoESC (2009:14) identifies as those of "community leader", "counsellor", "parent", "manager", etc.

3.4 PEDAGOGICAL IMPLICATIONS OF THE CURRICULUM

At this juncture, a brief discussion of the pedagogy of the curriculum is presented. Broadly speaking, the introduction of the HIV/AIDS curriculum means that a transformation in curriculum goals can also have profound implications for

pedagogical practice. According to Barrett *et al.* (2007:11), the shift towards life skills education complements a radical shift towards learner-centred teaching approaches which are characteristic of the HIV/AIDS curriculum.

Barrett *et al.* (2007:11) maintain that the HIV/AIDS curriculum is informed by the social cognitive and social influence theories. These theories emphasise the use of learner-centred approaches to instruction, which promote change of attitudes and improve decision-making in the learners. The pedagogy of Zimbabwe's primary school AIDS curriculum seems to be informed by the social learning and social influence theories as it stresses learners' personalisation of life skills in social interaction settings (MoESC, 2009:17). According to Barrett *et al.* (2007:12), the social cognitive theory of teaching of HIV/AIDS in schools draws on the work of the psychologist Albert Bandura and has the following basic tenets: (a) pupils learn indirectly by observing and modelling on others with whom they identify, for example the way pupils see their peers behaving; (b) pupils learn through training in skills that lead to confidence to behave in certain ways, which is called self-efficacy. Self-efficacy includes the ability to overcome any barriers to performing correct behaviour as in practising the correct way of cleaning up of body fluids in a demonstration as an important activity which leads to self-confidence when attending to and providing care to an HIV-infected person (Okore, 2009:26).

Zimbabwe's AIDS curriculum also draws on Bandura's social influence theory for its pedagogy, as follows:

Social influence plays an important role in behaviour change. The role of opinion leaders in a community, acting as agents for behaviour change is critical. The influence of opinion leaders on group norms and customs is predominantly seen as a result of person-to-person exchanges and discussions. Teachers as role models should be trustworthy and credible opinion leaders (Barrett *et al.*, 2007:12). On this point, research evidence attests to incidents where teachers, who should protect children against HIV/AIDS, ironically, sexually abuse them (UNAIDS, 2009:5).

In the social constructivist context that underlies learner-centred education, the progression of the HIV/AIDS curriculum implementation is understood as a process in which the learner is the central focus of teaching and learning. To place the

reader in context, it may be necessary to provide some background so as to understand the origin of learner-centred teaching approaches. The idea of learner-centred education mainly derives from the works of Piaget, Dewey and Vygotsky (Chisholm and Leyendecker, 2008:197). Contemporary understandings of learner-centred teaching approaches are based on Vygotsky's cognitive psychology. Learner-centred approaches acknowledge the way the mind works. Their main premises are that: knowledge is not transmitted but is constructed in the mind of the learner and learning results from personal interpretation of knowledge. They claim that learning is a process in which meaning is developed on the basis of prior knowledge and experiences (Chisholm and Leyendecker, 2008:197; UNESCO, 2005:210).

According to Brumberg (2008:1), learner-centred approaches are instructional strategies in which instruction focuses more on the learner and the learning environment than the teaching aspect of any education programme. Such approaches place emphasis on the person who is doing the learning, and regard learners as chief agents in the learning process over which they have control. From the social constructivist perspective, learners are viewed as active discoverers and constructors of their own knowledge (Froyd and Simpson, 2009:4). Froyd and Simpson (2009:4) further observe that learner-centred approaches treat learners as co-creators in the learning process, as individuals with ideas and issues that deserve attention and consideration. In AIDS lessons in the primary schools in Zimbabwe, teachers are encouraged to respect opinions and ideas that learners brainstorm on, raise and present in the interaction activities without being judgemental in their assessment (MoESC, 2009:9).

According to MoESC (2009:9), teachers must employ learner-centred teaching approaches which emphasise active, interactive learning activities through participatory methods referred to in section 1.10.2.1, such as role play, drama, song, picture codes, case studies, group discussions, debates, surveys, "Devil's Advocate" the "Futures Wheel" and values clarification. Consistent with Barrett *et al.*'s (2007:12) and Chisholm and Leyendecker's (2008:197) view of learners as constructors of their own knowledge in social encounters, Zimbabwe's primary school pupils are expected to work in groups, where they enact and personalise

themes and life skills, with the teacher acting as a facilitator (Okore, 2009:7; UNESCO, 2005:8). Accordingly, the open instructional techniques support learning that occurs in an open, informal environment where learners are free to socially express their views. Stuart (2010:51) offers the view that the classroom atmosphere should celebrate a power shift in which equitable teacher-learner and learner-learner interpersonal relationships preside over the traditional power dynamics in which authority and knowledge rest with the teacher. According to Stuart (2010:55), a power shift comes to the fore to give way for dialogical learning whereby the learners' history and existing knowledge are acknowledged and respected. Furthermore, lessons should provide space for all learners to express their views and emotions freely (Stuart, 2010:54). Mitchell and Moletsane (2010:41) recommend a climate in which language usage should be handled circumspectly, in which usage does not presume that there is no one in the class who is dealing with being infected with or affected by HIV/AIDS, so that stereotypes, stigmatisation and discrimination are not perpetuated. While such considerations above call for teachers' ingenious pedagogical competence, the problem is that teachers are not equipped with the depth of comprehension of the pedagogy of the curriculum.

UNESCO (2005:221) notes that learner-centred strategies are appropriate for HIV/AIDS curricula as they promote social and cooperative learning. Such strategies enable students to practice social skills and enjoy positive interdependence within the learning activity.

Thus, the assumption in the learner-centred teaching approach is that in HIV/AIDS education, learners learn certain knowledge, skills, attitudes and values most effectively through social encounters with others. This assumption sits comfortably with Bandura's social cognitive and social influence theories. In this vein, a fixed linear progression of HIV/AIDS lessons could be applied in the biomedical approach to teaching about HIV/AIDS while a largely interactive approach will be much less prescriptive and linear (UNESCO, 2005:6). UNESCO (2005:6) notes that to place more emphasis on participatory learning, teachers should as much as possible strive to use social interactive participatory methods even when teaching biomedical topics.

However, learner-centred approaches have their own weaknesses. Cognitive psychologists criticise such approaches for breaking down structure within lessons, where structure is essential for pedagogical effectiveness. The minimum guidance that characterises such approaches tends to divert learners' limited working memory from learning (Barrett *et al.*, 2007:12). Seeming to differ from authors on student guidance as far as the teaching of HIV/AIDS is concerned, Stuart (2010:55) is sceptical about the effectiveness of participatory methods in instances where scripts have been authored by the teachers for the learners to enact. He seems to suggest that when application of the well-meaning strategy represents mere tokenism or ritualistic efforts, it is unlikely that the HIV/AIDS prevention messages will carry home. According to the Brazilian philosopher Paulo Freire, education must enable learners to appraise academic issues critically. Teaching and learning must therefore not engage learners with learning materials parochially. Such tokenism mentioned above would be an affront to the potential of Freire's critical pedagogy on which participatory methods are foregrounded, which according to Stuart (2010:55), stimulates critical thinking in learners.

Although it is plausible to think that the use of the 'chalk and talk' method (also known as the direct instructional method), is fundamentally inappropriate for effecting behaviour change in pupils, when the above-mentioned shortcomings of the learner-centred approach are considered, one is persuaded to reflect deeper on the following incisive observation by Barrett *et al.* (2007:14):

There is a fundamental difference between a behaviourist view of learners as passive, which leads to a focus on knowledge and how it is taught, and a constructivist view which requires that teachers view curriculum and pedagogy from the perspective of the learner and to build bridges to meet the views half-way.

Barrett *et al.*'s. (2007:14) contribution above thus draws our attention to the need to seriously consider the value of the teacher-centred pedagogy which those scholars who are aligned to the learner-centred approach seem to trivialise.

Sounding a discordant voice to the protagonists of the learner-centred pedagogy, scholars such as Guthrie (2013:129-132) and Tabulawa (2013:8-9) have criticised the subordination of the teacher-centred pedagogy for some important reasons.

Both Guthrie (2013:129) and Tabulawa (2013:1, 6) apparently take a positive stance towards the traditional, formalistic, teacher-centred approach as a culturally entrenched instructional mode which is culturally intuitive and with which teachers in sub-Saharan Africa are more familiar. Guthrie (2013:131) further justifies the teacher-centred pedagogy for the main reason that it is a representation of the socio-culturally entrenched assumption that schooling is a teaching-learning process in which teachers transmit the much needed revelatory knowledge to students who must passively absorb it for future vocational purposes. For these reasons, Guthrie (2013: 136) suggests the idea of further developing the “culturally intuitive” teacher-centred approach rather than having teachers adopt the learner-centred one that is counterintuitive to them. The authors further argue that since teachers in sub-Saharan Africa are themselves initiated into an already teacher-centred system of instruction which is embedded within a broad socio-cultural, sociological cosmology that has often emphasised the subordination of children by adults, and of learners by teachers, it remains difficult for teachers to shift from the “outmoded” teacher-centred to the “more contemporary” learner-centred pedagogy. This scenario persists despite generous provision of resources to teachers to use the participatory approaches (Tabulawa, 2013:8).

Guthrie and Tabulawa agree that whichever pedagogy a teacher chooses is contingent upon the need to problematise it in terms of the social and cultural context in which teachers operate. The fact that regardless of the amount of resources invested into curriculum change, teachers have failed to transform suggests that a myriad of complex factors play out on teachers, and that a more flexible approach that Barret *et al.* (2007:14) suggest is more productive, for as long as cognisance is taken of the context in which it is used. In other words, when learner-centred and teacher-centred approaches are considered in juxtaposition, there is the need to problematise these pedagogies as ones that teachers in sub-Saharan Africa adopt in complex, specific contexts that present themselves within a broad, conservative parent socio-cultural environment that according to Tabulawa (2013:13) is not supportive of pupil participation and independent inquiry.

It therefore seems most rational to consider a more balanced, eclectic approach which recognises the use of both the transmission method and interactive method, and which is contingent upon learners' needs and the nature of the content. Regarding the HIV/AIDS curriculum, generally, the biomedical, informational content of the curriculum may lend credence to the use of the transmission method while the social and emotional aspects of the curriculum may be more suited to the use of the interactive method.

Over and above, while Tabulawa and Guthrie make a strong case for the intractability of the teacher-centred pedagogy by advancing plausible and rich theoretical and empirical considerations, they seem to portray teachers as mere "stooges" who work within a strait-jacketed and unalterable cosmology. I contend that to assert that teachers simply initiate into a "cast-in-stone" world of teaching that they cannot transcend to new pedagogical perceptions is to denigrate their adaptability as cognitive sense-makers of educational change.

3.5 CHARACTERISTICS OF THE AIDS CURRICULUM: TEACHER ALIENATION FROM THEORIES AND MODELS INFORMING CURRICULUM PEDAGOGY

Baxen and Breidlid (2009:18) and UNAIDS (2009:7) contend that the reason for the lack of clarity and complexity of the HIV/AIDS curriculum is that teachers are not involved in the design of implementation programmes. As mediators in the intervention process, teachers have been found to play the role of purveyors of an already agreed-upon, uncontested body of HIV/AIDS knowledge, the construction of which they were not allowed to participate in. What exacerbates the problem, according to Baxen and Breidlid (2009:19), is the fact that the HIV/AIDS content is informed mainly by biomedical discourses. Regarding HIV/AIDS school programmes, scholars such as Barrett *et al.* (2007:10) and De Lange and Stuart (2008:130) attribute teachers' lack of clarity concerning life skills education, to the fact that theories and models informing the pedagogy are derived from research conducted in Western nations. Consequently, these theories and models may not be relevant to the local Third World countries. De Lange and Stuart (2008:130) note that since learner-centred approaches have recently become popular in Africa, most teachers currently practising have not been exposed to participatory methods. The

alienation of teachers from its specifications thus makes the curriculum complex for them.

Research also indicates teachers' reluctance to use some participatory methods such as role plays, problem-solving and group discussions because these methods are not clear to them (Bhana, 2009:166; Lesko *et al.*, 2010:826).

3.6 THE ROLE OF LANGUAGE IN CURRICULUM CLARITY OR COMPLEXITY

Related to the problem of clarity and complexity that Baxen and Breidlid (2007:18) point out is the question of language. As one of the key dimensions that underline how clear and easy or how difficult teachers find a curriculum, language is not a new phenomenon in the literature. In his study of teachers' cognitive sense-making of South Africa's Curriculum 2005, Blignaut (2007:12) points to the problem of clarity that arose from terminology that did not clearly convey policy messages to teachers. Spillane *et al.* (2006:47) and Fullan (2001:70) intimate how the inability of education policymakers to formulate clear curriculum policy representations that are easily communicable to recipients has often led to a lack of clarity among implementers, and hence the problem of curriculum complexity. However, Fullan (2001:70) and Spillane *et al.* (2006:47) do not discern and explicate the role of language in the problem of curriculum clarity. Blignaut (2007:12) does so. Hill (2006:66) more elaborately and perceptively illuminates the role of language in this regard. I thus agree with Hill's (2006:66) perspective with regard to language, which traces the different ways in which different policy actors enact policy, to the cognitive sense-making processes they engage in. I am of the contention that individual teachers respond to curriculum policy messages which curriculum designers described by means of language usage that either enhances or constrains teachers' understanding in ways that are congruent with or inconsistent with policy designers' intentions.

According to Hill (2006:67), language shapes implementation, and implementation researchers should therefore find out more about how policy is shaped and reshaped as it is transmitted via symbols, objects, and metaphors. If one analyses Hill's perspective regarding language in terms of Honig's model, it can be argued that

cognitive sense-making involves different people at different places communicating across boundaries about ideas, using grammar and lexis that is peculiar to their discourse communities. Consequently, the clarity or complexity of the curriculum becomes relative.

For example, as a discourse community, curriculum designers construct a curriculum using in their policy texts particular jargon and syntactic constructions, which they expect users to understand in consonance with their own perspective. Yet, in reality this does not happen. This is a case of “Clarity and complexity lie in the eye of the beholder”.

It is therefore the assignation of different meanings to the same policy messages by designers and implementers that lies at the heart of the problem of the clarity or complexity of the curriculum, and ultimately the policy-practice disjunction.

Studies have documented that teachers face problems regarding the clarity or complexity of HIV/AIDS curricula for various reasons. A study conducted by Helleve *et al.* (2009:197) in some schools in South Africa revealed negative experiences among teachers in dealing with the culturally tabooed nature of HIV/AIDS curricula and the terminology prescribed to explicate issues related to sexuality. Teachers consequently did not feel comfortable to explain content related to sexuality.

How specific the curriculum specifications are (Helleve *et al.*, 2009:62), and the multiple demands that HIV/AIDS programmes impose on teachers, such as counselling, teaching, care giving, and taking a leading role in the fight against the pandemic (MoESC,2009:21; UNAIDS, 2009:11), constitute the complexity of their task. All too often, teachers are not given any support to capacitate them to overcome the lack of clarity, or the complexity, of the curriculum.

3.7 SUMMARY OF CHAPTER 3

A brief overview of the key elements of the HIV/AIDS curriculum has been presented to contextualise the exploration of areas that teachers do not find clear when implementing the curriculum.

As was highlighted in section 3.2, one of the critical considerations of a curriculum is how clear teachers find its elements, namely the content, the pedagogy, and the methods of student assessment. It remains to be established in this study how complex or simple and how clear teachers find the AIDS curriculum in terms of its key elements, and how well they comprehend the attendant roles they are expected to perform when enacting this curriculum. These curricular issues partly account for teachers' experiences with the curriculum.

CHAPTER 4

RESEARCH DESIGN AND METHODOLOGY

4.1 INTRODUCTION

As highlighted in section 1.11.1, this doctoral study has adopted a qualitative case study research design, located within the broader social constructivist-interpretivist paradigm. Mindful of the many different types of qualitative research (Creswell, 2007:53; Denzin and Lincoln, 2008:4; Hartas, 2010:43; Hennink, Hutter and Ajay, 2011:10), I adopted a multi-perspectival strategy, guided by the unique nature of each of the research questions being addressed. I drew heavily on the interpretivist paradigm, by using content analysis, following the grounded theory approach. However, to a very limited extent, I also employed simple quantitative analysis to determine the frequency of key curricular elements in teachers' schemes/plans by presenting the data with regard to the document analysis in the form of tables. The aim was to provide a general picture of how teachers display their understanding of the implementation of the AIDS curriculum.

I engaged in the entire research process of data collection, analysis, presentation and interpretation, inevitably guided by the qualitative case study design. Importantly, the design connected the research questions I formulated to the data, the conceptual framework, and the instruments and the procedures that I used to collect and analyse the empirical evidence, as recommended by Gibson (2010:60).

A particular research design is embedded in a broad philosophical paradigm. In the case of my study, the paradigm is the social constructivist-interpretivist paradigm. I briefly describe this paradigm below.

4.2 THE SOCIAL CONSTRUCTIVIST-INTERPRETIVIST PARADIGM

A researcher's ontological, epistemological and methodological premises are developed and anchored on the basis of a particular philosophical paradigm. The

way a researcher views what reality is, and the nature of reality, or ontology, the nature of knowledge and what is to be known, or epistemology, and ways of knowing that which is to be known, or methodology (Hartas, 2010:15) all are nested in the paradigm that he or she adopts for conducting the inquiry. Creswell (2007:19) and Hartas (2010:17) view a paradigm as a world view, or a basic set of beliefs shared by a community of scholars, which guides action, that is, how a scientific inquiry is conducted. Hennink *et al.*'s (2011:11) definition of a paradigm, which is based on Babbie's work (2007), is that it is a perspective or way of looking at reality, or a conceptual framework by which human beings organise their observations and reasoning. Denzin and Lincoln (2008:30) define it as a net that contains the researcher's ontological, epistemological and methodological premises. In brief, a paradigm is a set of beliefs about the world, a frame of reference which circumscribes and guides the parameters of what to look at, and how best to do so, in order to understand a piece of reality. I regard it as a framework within which the ontological and epistemological assumptions underlying a research study are embedded, which is realised through a particular methodology that a researcher employs to investigate the central phenomenon.

A relevant fit exists between my main purpose in this study, namely to uncover, understand, and explain the subjective meanings that participants bring to their experiences as they implement the AIDS curriculum, and the ontology and epistemology of the social constructivist-interpretivist paradigm. My philosophical approach of the social constructivist-interpretivist paradigm draws inspiration from Edmund Husserl's concern with the experiential underpinnings of knowledge (Denzin and Lincoln, 2008:175). In broad agreement with Husserl's phenomenological ontology, which perceives there to be mutual harmony between the human mind and the reality of the world, I also believe that social reality cannot be understood independent of human consciousness. I find it inconceivable to understand reality as an external facticity which awaits discovery, in order to understand its essence, without it being consumed, itself, in the conscious faculties of the mind. In that vein, I contend that when seeking to understand human behaviour and the subtle nuances of it, the key assumption is that social reality is a mental construct. Furthermore, social reality essentially consists of perceptions and meanings. It is therefore subject to multiple interpretations. For example, the phenomenon of an education

curriculum will never be perceived in the same way by everyone, as each person has their own consciousness and experiences. The question of reality as objective facts belongs to a positivist tradition, which is not completely appropriate for this study.

Because this study aims to understand subjective meanings and perceptions that teachers have about their practices, I will strive to understand the subjective meanings teachers attach to their practising experiences and views from their emic (internal) perspective, in their own context, using their own words and concepts (Hennink *et al.*, 2011:17-18). For this reason, I value a reciprocal, equitable researcher-participant relationship in the knowledge-generation enterprise. In recognition of the fact that both the researcher and the participant enter into the research field with their own unique values, interests, histories, and biases (Hennink *et al.*, 2011; Hobson and Townsend, 2010:231), I respect the view that knowledge of reality is value-laden, as opposed to being value-free. Thus, both the researcher and the research participants engage in the interpretation of the participants' situation.

Consequently, I sought to rely as much as possible on teachers' views of their situation and the interpretive meanings they bring to their practising experiences as they enact the AIDS curriculum, within their contexts, and sensitive to their diverse perceptions (Creswell, 2007:20).

4.3 JUSTIFICATION FOR THE USE OF QUALITATIVE RESEARCH METHODOLOGY IN THIS STUDY

Based on the social constructivist-interpretivist paradigm, this study has as its main aim an exploration into the subjective meanings that individual teachers ascribe to the human problem of enacting an HIV/AIDS prevention education programme to children in primary school. To achieve my objective of understanding the processes that occur in the curriculum intervention, and to document every aspect within its context to obtain a complete picture of the phenomenon being investigated (Hartas, 2010:27), I employed qualitative case study. Despite the difficulty of offering a

single, general definition of qualitative research, owing to its multiple variations, Denzin and Lincoln (2008:4) offer a comprehensive definition. They define it as:

[a] situated activity that locates the observer in the world, consisting of a set of interpretive material practices that make the world visible. The practices turn the world into a series of representations, including field notes, interviews, conversations, photographs, recordings, and memos to the self. Qualitative research involves the studied use and collection of a variety of empirical materials – case study, personal experience, introspection, life story, interview, artefacts, cultural texts and production, observational, historical, interactional, and visual texts that describe routine and problematic moments and meanings in individuals' lives.

From the above definition, we can deduce that qualitative research studies the day-to-day material practices that give human beings a meaningful existence in their life world. Hennink *et al.* (2011:9) argue that qualitative research allows one to examine people's experiences in detail, using a particular set of research methods, such as in-depth interviews, focus group discussions, observation, content analysis, and visual methods.

My study involved the use of lesson observations, semi-structured interviews, and document analysis in order to understand the meanings and interpretations that participants give to their experiences of enacting the AIDS curriculum. I heeded McMillan and Schumacher's (2010:320) assertion that qualitative research entails an inductive analysis of data by the researcher, in order to establish patterns and themes, producing a final written research report that captures the participants' voices. In this way I could obtain a testimony of their lived experiences and meanings they assign to their teaching practices from what they themselves display and say.

In the process, I explored the central phenomenon by personally entering into the field as research instrument to collect data. Through this strategy I could get to know the situational factors influencing participants' behaviours and actions, and their subjective perceptions and descriptions of meanings (McMillan and Schumacher,

2010:321). Such data would not have been obtainable through the use of other research instruments, such as questionnaires, for example.

4.4 THE QUALITATIVE CASE STUDY

As one of the many variations of the qualitative approach, the qualitative case study structures and guides this doctoral thesis. The methodology of the qualitative case study is embedded in the epistemology informed by the social constructivist-interpretivist paradigm, in contradistinction to the positivist paradigm. The focus of the social constructivist-interpretivist paradigm is on locating practices within a more grounded context, as a way of providing a deeper understanding of issues (Wyness, 2010:160).

The great variation in definitions of the term “case study” makes it difficult to provide a clear-cut definition of what it is. Punch’s (2009:120) loose definition of the term, which is based on Stake’s (1988) work, explicates a case study as a study of a bounded system, emphasising the unity and wholeness of the system. It confines the attention to those aspects of the case that are relevant to the research problem at the time. Punch (2009:120) defines a case study as an empirical inquiry that investigates a contemporary phenomenon within its real-life context, when the boundaries between the context and the phenomenon are not clear, and where multiple sources of evidence are used.

Generally, a case study is a study concerning a particular event, process, activity, or individual, bounded by unique circumstances in terms of time, place, and the characteristics of the participants or the central phenomenon being investigated. The aim is to obtain complete information pertaining to circumscribed parameters of a research problem, about a single case, in its own contextual entirety.

Some authors identify intrinsic, instrumental, and multiple or collective types of case studies (McMillan and Schumacher, 2010:345-346; Punch, 2009:119; Stake, 2008:120-123; Wyness, 2010:161). In the intrinsic case study, the researcher conducts an inquiry about the case for the intrinsic interest in the particularity and

uniqueness of the case, to understand the case for its own sake, and not for purposes of theoretical abstraction (Punch, 2009:119; Stake, 2008:121; Wyness, 2010:161). An instrumental case study engages the researcher in conducting an inquiry about a case in order to provide insight into an issue, or to refine a theory (Punch, 2009:119). It serves as an instrument for illustrating a broader phenomenon, or to make theoretical generalisations with a view to facilitating something else (Stake, 2008:122). A collective or multiple case study is, according to Punch (2009:119), a type of instrumental case study that is extended to cover several cases, to learn more about the phenomenon, the population, or the general condition. The current study is an instrumental, multiple/collective qualitative case study. The study is instrumental in the sense that understanding a single case extends to several cases, which are chosen on the premise that understanding them may lead to better understanding or perhaps better theorising about a still larger collection of cases (Stake, 2008:123). I draw on Punch's (2009:122) contention that as much as every case that can be studied is unique in its own right, every case is also, in some respect, analogous to other cases.

4.5 DATA COLLECTION

4.5.1 Methods

A particular paradigm and its ontological and epistemological assumptions foreground the methodology used, that is, the totality of specific ways, strategies, and methods to understand reality (Hartas, 2010:43). Insights into the practical, real lived experiences of participants (teachers, in the case of this study) operating in their practical situations are best obtained by means of qualitative techniques (Cheek, 2008:34; Creswell, 2005:203; Hennink *et al.*, 2011:45; Taylor and Wallace, 2007:88). The main aim of this qualitative study, namely the exploration of meanings of the participants concerning the processes entailed in their natural settings, justified the use of the research methods of document analysis, lesson observation, and interviews (Creswell, 2005:203; Hennink *et al.*, 2011:45; Punch, 2009:121). I preferred the methods of document analysis, observation, and interviews to the more removed, inferential empirical methods used by positivists, such as questionnaires

with closed-ended questions, which mostly capture factual data for an objective, “value-free” description of social reality. By contrast, the methods I selected could capture in detail the subjective meanings and lived experiences, as well as the meanings of social actions, within the context in which people live (Hennink *et al.*, 2011:14; Taylor and Wallace, 2007:88). According to Burton and Bartlett (2007:38), naturalistic forms of data collection, such as observation, interviewing, and document analysis, are suitable for collecting information concerned with people’s lives as they are lived in the people’s natural setting (schools, in the case of my study). The research instruments that I utilised in my study also collected data on the implementation of the curriculum as it occurred, and the story behind the respective implementation situations. These stories could provide insight into how people (teachers, in the case of this study) construct meanings of the situations in their day-to-day, moment-to-moment course of events, which meanings statistical studies often treat superficially (Burton and Bartlett, 2007:38).

I adopted a multi-method approach to data collection and analysis. For purposes of triangulation, I used the data collection instruments mentioned above. This was in accordance with Berg’s (2009:7) observation that each method reveals different aspects of empirical reality. Triangulation was necessary for cross-validation among the data-collection strategies, so as to see whether the same patterns recurred (Creswell, 2005:252; McMillan and Schumacher, 2010:379).

To achieve organisation and clarity, I will explain the particular methods of data collection and analysis that I used, as well as the procedures for data collection that were applicable to each research question. This approach is consistent with Drew *et al.*’s (2007:205) notion that choice of an appropriate research method depends primarily on the research question being investigated.

4.5.2 Data collection on teachers’ curriculum adaptation

I made use of document analysis and lesson observations to gather data on how teachers understand and implement Zimbabwe’s primary school AIDS curriculum. Document analysis was suitable because documents (teachers’ plans, in the case of this study) are tangible manifestations that describe people’s experiences, knowledge, actions, and values (McMillan and Schumacher, 2010:321) on a first-

person basis, and they measure people's original, truthful interpretations of the curriculum. Document analysis thus potentially promotes freedom from bias and participant reactivity caused by the researcher's physical presence, as well as validity. As a form of archival material, teacher schemes/plans satisfy the criterion of being non-reactive to the presence of the researcher, which Berg (2009:271) identifies as being a benefit of using document data.

Since the ideas in the schemes/plans were presumably drawn up and documented by the teachers themselves, they could portray potentially original, truthful interpretations of the ways the teachers implemented the curriculum. The teacher schemes/plans are documents which were created during the bounded time period in each of the three cases, which more or less coincided with the period during which I intended to conduct the study. They are thus a relatively recent, relevant data source, which could, in Robinson's (2010:187) terms, provide important links between the past and the present and particular insights into aspects of change and continuity in educational ideas and practices. To illustrate this point, Zimbabwe's primary school schemes/plans usually reflect the content of the current curriculum, as they are drawn from previously covered topics, which are explicitly stated. Consequently, general patterns of teachers' typical practices of the ideas contained in the education policy are discernible.

In addition, schemes/plans are documents that provide the advantage of being phrased in the language and words of the participants, who, according to Creswell (2005:219), have given thoughtful attention to them.

Despite its usefulness and its advantages, document analysis poses challenges to the reliability and validity of research. According to Robinson (2010:190), one of the main challenges in using document analysis is to read, interpret, and find meaning in the document record. Robinson further contends that the method demands a face-value reading of the document, to elicit factual information, and a much more difficult and tenuous engagement with hidden and obscured meanings, or a critical reading "between the lines".

Heeding Robinson's (2010:190) advice, I tried to resolve this challenge by using a document analysis protocol. It captured teachers' actual representations of the key

features of the curriculum vis-à-vis the specifications that the written curriculum suggests, as criteria for making sense of how teachers interpret the curriculum. I made descriptive and reflective notes in the process, cognisant of the simultaneous, alternating processes of data collection and analysis which are characteristic of qualitative inquiry (Creswell, 2007:150; Gibbs, 2012:5; Punch, 2009:133).

The other challenge with regard to document analysis is, according to Robinson (2010:190), testing the authenticity and reliability of the documents. To obviate the challenge regarding authenticity and reliability of the documents, the author (whose name I replaced with a pseudonym) was indicated on the teacher scheme/plan, as well as the place and date of production of the scheme/plan, and the scheme/plan was date-stamped with the school head's stamp as endorsement of its officialdom. To further mitigate the challenges associated with document analysis, I conducted face-to-face interviews with the participants to obtain insights into how and why they came up with their scheme/plan representations of this particular AIDS curriculum.

As part of the literature review of this study, the description of the AIDS curriculum and the stipulations of how it is supposed to be taught formed part of the documents to be analysed in this study. The literature study documented the broad guidelines and specifications of the AIDS curriculum, to help make sense of how teachers are implementing this curriculum.

To address the research question of how teachers understand and implement the curriculum, I triangulated the research method of document analysis with lesson observation. Lesson observation was relevant to this study, which aimed to describe the current status of instructional practices and to delineate the complex practical issues, constraints, and opportunities that practitioners of the AIDS curriculum experience. Lesson observation is preferred because of its ability to permit the researcher to study the processes of education in naturalistic settings (Baker and Lee, 2011:1437; Bartlett and Burton, 2007:45), and because it provides more detailed and precise evidence of events than other sources do.

Through lesson observation, I could be able to directly see what was happening and to collect data that would provide a clearer picture of the educational activities so as to enhance the understanding of those activities within the real life context (Forrest

and Isa, 2011:1908). According to Burton and Bartlett (2007:45), lesson observation enables the researcher to gather large amounts of data in a short time and to directly see and record participants' behaviours, as well as to generate ideas about how teachers and pupils behave, and why they behave the way they do. According to Baker and Lee (2011:1437), over time and repeated observations, the researcher can gain a deeper and more multilayered understanding of the participants and their context.

Section 2.1 indicated that the teacher is the focal unit of analysis. Thus observational data collection centred on the teacher, as he or she structured and managed actions that occurred inside and outside the classroom in the enactment of the AIDS curriculum. This does not, however, mean that observation was not done of how learners learn. Although my emphasis was on how teachers behave in enacting the curriculum, an understanding of how pupils behave in the lessons would complement my understanding of the teachers' pedagogical sense-making and practices.

Lesson observation was followed by open discussions with the teachers to share insights on the implementation of the curriculum. In the lesson observations, I tried as much as possible not to be judgemental about the teachers' lesson presentations.

The choice of lesson observation as data-collection method was not without due consideration of the critical methodological concerns arising from the potential obtrusiveness of the observation method in general. Although some scholars view observation as generally unobtrusive, in that the researcher does not administer any stimulus on the participants, the method has its own shortcomings. Baker and Lee (2011:1437) and Bartlett and Burton (2007:45), for instance, cite the observer effect that teachers and students experience, or the "Hawthorne effect" (Baker and Lee, 2011:1437; Leedy and Ormrod, 2010:98), which arises from their conscious awareness of the researcher's presence. For Baker and Lee, the Hawthorne effect means that participants modify their behaviour, usually at the detriment of the validity and reliability of the findings. Baker and Lee (2011:1437) further cite the "observer's paradox" as a reactivity effect in which a researcher's presence influences the participants to modify their behaviour, performance, actions, or attitudes, to the detriment of the validity and reliability of the data. Thus, while some authors

maintain that observer effects are not concerns that are serious enough to preclude the use of lesson observation, there is the main challenge of potential threat to the validity and reliability of the findings. Hobart and Frankel (2004:33), for example, contend that researchers can achieve objectivity in classroom observation if they bracket their biases.

In spite of the associated risks mentioned above, I utilised the data-collection strategy of lesson observation with a view to exercising flexibility to reduce reactivity. I particularly impressed upon the participants during pre-observation discussions that my visit had no official associations with their work and participants were encouraged to conduct themselves in the way they would normally do. Furthermore, I emphasised the point that I intended to be as non-participating as possible and be like “a fly on the wall”, and I explained how if participants changed their behaviour on account of my presence, it could be counterproductive for my study (Baker and Lee, 2011:1438).

4.5.3 Data collection on research questions that dealt with teachers’ perceptions and experiences with the curriculum

To collect data on teachers’ understanding and implementation of the curriculum and personal and contextual factors that play out on them, as well as teachers’ experiences with the implementation of the curriculum, I considered interviews to be suitable, for various reasons. In keeping with Punch’s (2009:144) recommendation, I employed one-on-one face-to-face interviews. I preferred this type of interview for the main reason that it enabled me to understand participants’ constructions of reality from what they told me in their own terms, and in “a depth which addresses the rich context that is the substance of their meanings” (see Punch, 2009:144).

Interviews are an ideal strategy to explore the various aspects entailed in all the research questions concerned with participants’ perceptions and experiences of the curriculum. Interviews provide rich data, which is needed to describe complex meanings of central themes in the experiential life world of the subjects from what they say (Wallace and Taylor, 2007:88). Interviews also allow participants to voice their experiences and perspectives (Creswell, 2008:38).

Qualitative interviewing thus allowed me to enter into the inner world of the participants (Johnson and Christensen, 2008:207) to gain an understanding of their perspectives regarding their enactment of the AIDS curriculum.

Scholars have identified various different types of interviews, which occur on a continuum, ranging from structured interviews to semi-structured interviews to unstructured interviews (Punch, 2009:145; Hobson and Townsend, 2010:225).

Several authors place the semi-structured interview midway on the continuum, between the extremes of structured interviews and unstructured interviews (Berg, 2009:105; Drew *et al.*, 2009:192; Hobson and Townsend, 2010:225). Generally, the structured, or standardised, interview emphasises stringent interview control through pre-specified questions, with a rigid wording and order (Drew *et al.*, 2008:192; Hobson and Townsend, 2010:215). The opposite of this type of interview, namely the unstructured interview, generally applies minimal control over the interview process, as it employs questions whose wording and order of administration are impromptu (Drew *et al.*, 2008:192; Hobson and Townsend, 2010:226).

Generally, structured interviews consist of prespecified questions which restrict responses to precoded categories and do not demand great depth (Punch, 2009:145). Semi-structured questions have open-ended but focused questions that elicit a greater depth of information. The least standardised type of interview, namely unstructured interviews, consist of ad hoc, open-ended questions that are devoid of any a priori categorisations that may inhibit the scope and depth of the inquiry (Punch, 2009:148).

I chose semi-structured interviews, as much because of my epistemological stance as because of their relevance to some research interests in my study. Epistemologically, I treat participants in this study as human beings, with whom I can share insights about the central phenomenon under investigation, so that we can co-construct social reality.

Semi-structured interviews were relevant to my study, because they provide participants with a greater opportunity to speak in their own words about their true feelings and conceptions (Hobson and Townsend, 2010:230) regarding the topics of

interest in the study. I preferred the semi-structured type of interview, because it enabled me to probe and clarify interviewees' responses and discern leads for deeper insights into the topical issues entailed (McMillan and Schumacher, 2010:358).

This type of interview would enable participants to voice their perceptions of the central phenomenon as openly as they pleased, in terms of what they thought, felt, and experienced, thereby allowing me to capture a wide range of issues.

I was persuaded to use a funnelling strategy. This interviewing strategy allows the interviewer to proceed in the interviewing process from a broad focus of the research issues through asking a few general questions, to narrowing the focus by asking more specific ones (Gibson, 2010:62). The strategy could allow the participants and me to proceed from a broad grand-tour question that would orient participants to voice their perceptions about a topic, thereby covering a wide range of issues of a general nature (Creswell, 2005:223; Drew *et al.*, 2008:192; McMillan and Schumacher, 2010:359). Exposing participants to general questions before they could respond to more specific issues had the potential to elicit information of central theoretical and analytical interest which is relevant to the research questions (Gibson, 2010:62).

Furthermore, a change in the direction of the discussion brought about by a change in the wording and the order of the questions potentially elicited more obscure nuances about the issues being investigated, even though it was a challenge to the researcher to have to continually redirect the focus of the interview.

Semi-structured interviews were also preferred because they allowed for probing of participants' responses in order to gain more detailed data to explain the meaning of terms that the participants might not have understood, and they allowed for clarification of ambiguous responses from participants (Hobson and Townsend, 2010:227).

Finally, the semi-structured interviews thus made it possible for me to cover the same general topics and questions with all the interviewees in different sites (Gibson, 2010:62; Johnson and Christensen, 2008:208).

However, interviews have some major shortcomings. Critics of the use of interviews in qualitative inquiry take issue with the methodological concerns of reliability and validity (Hobson and Townsend, 2010:228; Punch, 2009:152), because of the associated dangers of interview bias and reactivity.

For instance, the mere contact of the participant with the researcher may cause the participant to respond to the researcher in a manner that does not accurately reflect the facts (Hobson and Townsend, 2010:227). Research attests to the scenario where some participants do not give accurate and truthful responses to questions where the responses could be deemed socially undesirable, hence reflecting the predisposition of some respondents to present themselves in a favourable light (Punch, 2009:152). This reactivity was a potential risk to the trustworthiness and validity of the data. I attempted to minimise this reactivity by tactfully urging participants not to tell me what they thought I wanted to hear, but to tell me, as much as possible, what was actually happening on the ground.

Finally, interviews have been heavily criticised for allowing both the researcher and the participant to bring to the domain of inquiry their experiential and biographical baggage, constituting each one's biases, with the researcher influencing both the participant and the data (Hennink *et al.*, 2011:206; Hobson and Townsend, 2010:228). Despite the several shortcomings of interviews, they are nevertheless an effective method of collecting data.

4.5.4 ENTERING THE FIELD

One of the most difficult but important tasks I had to execute as field researcher was gaining entry into the locale of the study, given the complex methodological and ethical issues involved in conducting studies about human beings (Berg, 2009:204). On several occasions I endured the frustration of missing appointments that had been made with participants. Due to her commitments with work business, a participant named Ellen could not avail herself on my first visit. I had to reschedule the appointment for two weeks later. Further complicating the task was the delay by the management at my workplace in granting me clearance to enter the field. At no

other time did I ever feel so despondent than when the looming problem of meeting deadlines for completion of this study haunted me psychologically. My first step towards entering the field was to obtain permission from the gatekeepers, namely the local education authorities in charge of running the schools at which I conducted the study. Despite some delays at the National Education Department in Harare, in general, all the people concerned were very cooperative, and I was promptly given entry clearance. They allowed me into the school sites to consult the participants, negotiate with them, and obtain their informed consent to participate in the study (Creswell, 2005:200; Creswell, 2007:219).

4.6 DATA COLLECTION PROCEDURES

The researcher as instrument

As the key research instrument, I personally entered the field to directly collect data. Exploration of the central phenomenon of interest required my personal presence, in order to come to grips with the situational factors influencing the participants' behaviours and actions, and their subjective perceptions and descriptions of meanings (McMillan and Schumacher, 2010:321). This would not be able to happen through the use of questionnaires, for example.

Deliberate planning and preparation for entry into the field for data collection and analysis was essential. Field work engagement spanned three months of personal data collection and analysis, from September to December 2012.

Preliminary visits for field mapping were conducted in the research sites for a week, in order to establish rapport (Berg, 2009:204), trust, and reciprocal relationships with the participants. It was during these orientations that I solicited and was granted permission to use the teacher schemes/plans for document analysis, and I made appointments to conduct lesson observations and interviews. The participants and I decided on specific dates for the sessions and scheduled times that were most convenient for them. Immediately I commenced data collection for the document

analysis, by writing field notes onto a document analysis protocol and making reflective notes as part of the data analysis.

The simultaneous data collection and analysis process took more than three months of engaging with the participants at their respective sites. From mid-September to the end of December, lesson observations and informal discussions with teachers, as well as writing and transcription of field notes were done. The data were then saved on computer files. I actually went and observed the participants teaching lessons and recorded the observations onto a lesson observation protocol as field notes. Recording the notes included memoing and the making of reflective notes, as part of the data-analysis process.

At intervals during the three months, interviews with the participants were held at each of the sites. The interviews were audio taped, transcribed, and saved on computer files. The interviews were followed by post-interview visits to the sites, as follow-up discussions, to obtain additional data on issues that required further verification and clarification. In order to ascertain the accuracy of the findings, further data collection was done, until data saturation was reached.

The visits to each research site were not as smooth-going as I had envisaged they would be. At the school where the participant named Stella worked, I found Stella engaged in a school meeting, and I had to wait for more than four hours. Unfortunately, she said she was too tired to attend to me and that I should come back the following day. For a full week, Ellen could not be located, as she was reportedly attending a workshop at the district staff development hall. In spite of these problems, I ultimately succeeded in conducting my data-collection procedures.

4.6.1 Actual data-collection procedures

4.6.1.1 Document analysis and lesson observation data-collection procedures

Document analysis involved collecting the schemes/plans for all the work that had been covered during the term when I conducted my research (considering the fact that the case study had a time constraint) from the three sampled teachers (n=3)

from the three school sites, photocopying them, and returning them to the owners. I took the photocopies of the schemes/plans home for document analysis.

I used a document analysis protocol for data collection (see Appendix F). In order to facilitate simultaneous collection and analysis of data, I applied the rudiments of content analysis and counted the units of analysis, that is, the essential curriculum features, namely themes, topics and content, teaching methods and life skills, which participants had included in their schemes/plans. This would aid in determining the frequency of the curriculum features that participants had included. I used the actual curriculum guidelines (referred to as “criteria” in my protocol), as well as document analysis literature on the implementation of the AIDS curriculum, described in sections 1.10.2, 3.2, 3.3 and 3.4, to make sense of the curriculum. I thus listed all possible elements that could be expected to be used by curriculum developers, as well as those features that participants included but which were not suggested by developers, to determine the frequency of occurrence of the curriculum features that participants had identified. The above procedures would provide a general picture of how the participants interpret this AIDS curriculum at the symbolic level of implementation. In the activity, I followed Creswell (2005:242) and McMillan and Schumacher’s (2010:354) advice of taking descriptive notes to describe objectively the curriculum elements as they were presented by the participants. This activity was accompanied by the writing of reflective notes, which consisted of the themes, hunches, and insights that struck me most as being potential theoretical elements. These notes were captured onto the researcher-devised document analysis protocol. Drawing on McMillan and Schumacher’s (2010:354) observation, I applied the strategy of simultaneously collecting and analysing data, as it allowed me to separate tentative subjective interpretations from observed data in the schemes/plans. This would facilitate the task of data analysis.

Foregrounding this study is the epistemological stance of interaction with, rather than detachment from participants. For this reason, I strived to demonstrate reflexivity by discussing with teachers their schemes/plans in the interviews. This was a follow-up to my unassisted document analysis of the data on the protocols. I also capitalised on the post-scheme/plan interviews to cover other critical issues pertaining to the study and to triangulate findings with those from post-lesson and general interviews.

The purpose was to share insights and seek elaboration and clarification from the teachers on how they produced their schemes/plans, and why they produced them the way they did. Thus, in line with Cheek's (2008:45) advice, I conducted this member-checking exercise, to treat participants as people who contribute to the production of knowledge, and not just as objects of research. I wanted to combine emic, etic and negotiated perspectives of data collection and analysis to obtain a well-balanced, credible description of the phenomenon.

The scheme/plan interviews were taped for later transcription and analysis, to strengthen data validation and enhance credibility and confirmability of the findings.

My third visit in the field involved conducting lesson observations. A key methodological and ethical issue concerning the use of observation was my observer role. I took the observational approach of an overt non-participant observer and did not participate in class activities. This enabled me to closely document teacher and pupil behaviours and the learning environment without any distraction from my data collection (McMillan and Schumacher, 2010:350). In Berg's (2009:89) terms, I used the complete observer role, by sitting at the back of the classroom while observing and noting the participants' behaviour, in order to avoid affecting the verbal behaviour of teachers and pupils, lest this influenced the validity and reliability of the data.

Since I had already achieved good rapport with the participants and we were now well acquainted, accessing their lessons was not so much of a problem as the greater methodological concern of not being biased in my observations.

By virtue of having taught HIV/AIDS education for many years, having trained student teachers, and having studied for and obtained an MPhil in Curriculum Studies at an internationally renowned university, the temptation was to invoke academic authority over the research issues. However, while appreciating the subjective influence of my biographical and experiential baggage on the research, and being obliged to transparently acknowledge it in my write-up I strived to follow Punch's (2009:149) advice of minimising researcher-participant status differences. This can be achieved by encouraging a more equal relationship based on mutual trust, which includes self-disclosure and reciprocity (Punch, 2009:149).

To capture the data, I made use of structured lesson observations. Guided by Merriam's (2009:70) ideas, I decided to enter classes not without any features that would offer me guidance on what to look for. Rather, I decided to focus my observations on selected teaching/learning elements, so as to circumscribe the parameters of the observed features around the theoretical framework that I had formulated in the design cycle. In keeping with the idea of simultaneous data collection and analysis, the use of predefined categories derived from the structured observation approach would facilitate data analysis. The predefined categories thus made up the rudiments of the observation protocol, onto which I recorded my field notes. The protocol thus captured descriptive notes of what I had observed, as well as reflective notes, representing my hunches, themes, and ideas (Creswell, 2005:213).

Using the structured observation strategy, I tried to follow the funnel analogy suggested by Gibson (2010:62) and Hennink *et al.* (2011:190). I first made general observations of the contextual setting, and then progressed to specific curriculum guidelines (analytical concerns), as set in my lesson observation protocol, to make sense of how teachers enact the curriculum.

The five lessons of each participant that I observed were followed by a post-lesson interview (which was taped), as a within-method form of triangulation (Berg, 2009:7). Only one all-embracing post-observation interview, instead of an interview after every lesson, was required to circumvent the problem of potentially influencing the way in which participants deliver subsequent lessons as a result of such discussions.

After each lesson observation session, I thanked the participant, for the purposes of maintaining rapport.

4.6.1.2 Preparing and conducting the interviews

After gaining entry into the field, one of the most daunting tasks confronting the researcher is handling the interviewing in such a way that it does not compromise the dignity of the participants and the quality of the data. Some authors document challenges associated with novice researchers, who seem to become disorganised and get stuck when they try to interview participants without having first thoroughly

familiarised themselves with the key issues and processes involved in the design cycle (Berg, 2009:140; Creswell, 2007:138; Drew *et al.*, 2008:191; McMillan and Schumacher, 2010:35). Some of the key issues are pilot-testing the data-collection instruments and setting up the interview recording equipment. Before using the interview schedule I pilot-tested it with a few Grade 6 teachers.

Special procedures of interview data collection directed the unfolding of the data-collection cycle.

4.6.1.3 Procedures followed for the interview data collection

On the day of the interviews at each of the respective school sites, I approached the school heads, as the gatekeepers, to gain access to the participants identified in the previous visits. Upon entry into the sites, I followed the relevant ethical procedures that could create a conducive and free interviewing atmosphere, and I ascertained which interview venue was preferred by the participants themselves (Hennink *et al.*, 2011:124). These measures had the potential to enhance the quality of the data.

The face-to-face, one-on-one interview sessions involved soliciting consent from the respondents and audio taping the conversations, as well as recording field notes onto my interview guide. The information was transcribed into textual data (Hennink *et al.*, 2011:121). The interview activity incorporated the use of probes, to encourage the respondents to elaborate and clarify issues, as a way of capturing their emic views of issues.

The above procedures were not without their fair share of problems with each participant. Ellen struggled to speak out about issues as openly as she had pledged to do during our debriefing sessions. Despite the efforts that I had made to debrief her on the general issues that the discussion would embrace, when it came to the actual sessions, Ellen tended to be terse, to clam up, and to appear nervous. However, after some persistent probing on my part, she eventually made useful contributions.

In the design cycle, I had pledged not to contradict my epistemological claim of co-constructing social reality with the participants. I thought I would heed Hennink *et*

al.'s (2011:128) advice to refrain from divulging my own views about issues in response to possible questions that participants may raise. Since, at some points in the discussion, each of my participants had some issues of an academic or theoretical nature that they seemed to be out of sync with, I ended up violating this principle by providing them with some leads.

4.7 VALIDITY

A key validity issue that makes a qualitative study credible is the extent to which the data authentically and accurately describe the phenomenon being investigated. I pilot-tested my interview guide to practise interview skills, by role-playing with more experienced interviewers, and I then did a preliminary test with my wife, who is a teacher. I pilot-tested the guide to not only develop my interviewing skills but also enhance the validity of the findings. I acknowledged Hennink *et al.*'s (2011:120) observation that it is difficult to predict how the interviewee will interpret and respond to the questions asked. The issue at stake was thus to refine the questions that I would pose to the participants, so that participants could understand them sufficiently to provide me with responses that as much as possible measured what I wanted to measure. The questions would then more accurately capture data that addressed the research questions, thereby enhancing the validity of the findings. To further enhance the validity of the findings, I returned to the database and scrutinised my codes again and recoded them. I checked whether they corresponded exactly with the questions I had asked, and I provisionally discarded even those responses that seemed relevant to the study but were not congruent with my questions. Similarly, during the interviews I kept probing, until the participants had given me responses that I felt accurately addressed a particular question.

4.8 RELIABILITY

My efforts to validate this qualitative study also included taking measures to ensure reliability of the findings. Reliability refers to the extent to which findings of a study can be replicated (Merriam, 2009:220). Replicability is defined as whether a study can yield similar results if the same design is applied. It is difficult to obtain similar

results from a repeated study conducted with human beings, given the unstable, ever-changing nature of human behaviours and perceptions regarding a phenomenon. In view of this complexity, I applied the more feasible approach to the criterion of reliability in the human sciences, namely of determining the degree of consistency of the results with the data collected.

I attempted to ensure reliability by first applying triangulation of data-collection methods. By using the methods of document analysis, lesson observations, and interviews, my intention was to seek confluence of evidence on the central phenomenon (Creswell, 2007:204), to achieve credibility. This strategy would help to ensure a thick description of findings through the development of multiple perspectives or angles, from which greater sense could be made of the phenomenon of interest, namely the implementation of the AIDS curriculum. Complementing the above strategy, continually comparing my categories with the data supporting them provided the promise of internal consistency. This way, I could determine whether the data really represented the reality on the ground. To reinforce internal consistency, I also conducted some member checks with the participants to verify the accuracy of my own interpretations and to establish whether they were congruent with the participants' own perceptions.

4.9 SAMPLING

In selecting my sample, I paid due attention to the size of the sample, and I tried to keep it consistent with the aims of qualitative case studies, where participant recruitment is not driven by the need to generalise findings to a broader population (Hennink *et al.*, 2011:84), but by the need to make theoretical generalisations. I observed Creswell's (2005:207) general guideline for qualitative sampling, namely that a few individuals should be selected to enable the researcher to present the complexity of a site or of the information that participants provide, for an in-depth picture of the phenomenon of interest.

My participant recruitment involved purposive sampling. Creswell (2007:118) asserts that this procedure allows for selection of information-rich cases, from which

the researcher will discover, understand, and gain insight into the phenomena under investigation. Another reason that I employed purposive sampling was to select participants who bore the specific characteristics or experiences that could best contribute to an understanding of the central phenomenon (Hennink *et al.*, 2011:84).

For uniformity of interpretation (Punch, 2009:162), the study employed purposeful homogeneous sampling, where participants with similar traits were involved (Creswell, 2005:206; Punch, 2009:162). Thus, three Grade 6 class teachers (n=3) who are known as the best AIDS teacher-educators and are actively involved in teacher development in HIV/AIDS teaching were chosen. They also have at least five years' teaching experience each.

The participants were drawn from a total of three schools with maximal variance from Gweru Urban school district and Lower Gweru Rural school district. Maximal variance sampling of the three teachers (n=3) from three different schools of different socio-economic status in terms of resources and materials was relevant to my purpose of searching for central themes and patterns that occur across the cases, that is, similarities, for cross-case analysis (Johnson and Christensen, 2008:244). Conversely, maximal variance sampling would enable me to observe maximal differences in participants' perceptions about the central phenomenon across the three information-rich teachers (n=3) from different school types (McMillan and Schumacher, 2010:326).

Accordingly, I purposively sampled three school sites and three selected teachers to enhance the possibility of transferability. It is possible to discern analytical links and possible similarities, as well as differences that emerge between one site and another site. In other words, although my aim was not to generalise the findings of the sample to the population, I value the potential of case-to-case theoretical generalisation. It should be realised, however, that transferability is not a neat and straightforward feature, but a contextual feature. For instance, the same issue at one school might be interpreted differently by the same researcher at another school, and even more differently by another researcher, and thus the interpretation might not be neatly transferable to other cases.

A critical methodological concern attendant to the sampling process in qualitative studies is what Drew *et al.* (2008:133) refer to as following the direction of the data. Consistent with this strategy, the sample that I ultimately selected hinged on the principle of data saturation. Thus, in terms of Hennink *et al.*'s (2011:88) conception of data saturation, I would decide whether or not to recruit additional participants, and when I reached the stage where new data yielded no new theory, recruitment would cease.

Finally, the sampling of participants in qualitative inquiry has considerable ethical implications. This important aspect has so far been alluded to merely in passing, in section 1.11.1.4, and thus will be given special attention in section 4.11.

4.10 DATA-ANALYSIS PROCEDURES

4.10.1 Preparing and organising the data

After the researcher has disengaged and exited the field, it is important that he shifts to a more settled data analysis exercise that culminates in the reporting of findings to the relevant stakeholders (Drew *et al.*, 2008:343). For this reason, preparing and organising the data is essential.

In this study, I first transcribed verbatim the audio taped data and the field notes into text and organised them systematically by type (Creswell, 2005:232). Verbatim data transcription included capturing colloquial language, so as to accommodate “in vivo” codes, that is, codes derived from the participants’ own words, which could possibly carry important meanings (Hennink *et al.*, 2011:215). In accordance with Berg’s (2009:53) recommendation, my organising of the raw data involved editing, correcting, capturing and saving the data on computer files. I labelled the data files for ease of access.

A pertinent question often raised is at what point data transcription should commence. Hennink *et al.* (2011:212) suggest the options of either doing this soon after completion of the first interview, or after all the data has been collected. I preferred the first option, for several practical reasons. Firstly, I could detect new

issues from the first interview, which could be explored further in subsequent interviews. Secondly, I could identify new, interesting, and unexpected theoretical issues that might assist in the refinement of the interview schedule for collection of more accurate, deeper information in subsequent interviews (Hennink *et al.*, 2011:213). Lastly, the cyclical analytical process of induction and deduction motivated me to transcribe the data immediately.

Leedy and Ormrod (2010:153) regard data organisation as an integral part of settled, ongoing data analysis, and they advise the researcher to file the transcribed data by creating and maintaining a permanent computer database. Transcribing the data entailed segmenting and organising it by typing the following as textual data: the transcribed document analysis and lesson observation data (field notes); the transcribed post-scheme/plan interview data; the transcribed post-lesson interview data; and the transcribed interview data on teachers' perceptions on overall implementation.

I saved the data sets into computer files and labelled them (Berg, 2009:53; Leedy and Ormrod, 2010:153) by school site (case), by research question, and by data-collection instrument, addressing one specific research question at a time. I conducted manual data analysis, because I did not feel comfortable to use qualitative computer software, as I have not received training on how to use it, and so that I could be closer to the data and have a hands-on feel for it (Creswell, 2005:234).

4.10.2 The analysis of the data

The data-reduction process of collapsing large masses of data into smaller, manageable chunks for making theoretical sense of them (Berg, 2009:54) set me into transforming the textual data by inductive coding. More specifically, I employed the inductive content-analysis method of data analysis, using ideas borrowed from the grounded theory approach of analysing qualitative data. This study's interest in systematically developing theoretical explanations of the processes entailed in the enactment of the AIDS curriculum in classrooms (Creswell, 2007:64) justifies the use of inductive content analysis. This method of data analysis enables discovery of theoretical patterns and categories embedded in the research data that explain

teachers' implementation of this curriculum. Because of my specific objective of gaining a nuanced understanding of teachers' experiences with an education phenomenon, and thereby discovering concepts that theoretically explain the phenomenon, I opted for the method of content analysis. Essentially, the content analysis process involved coding data, developing themes, and the abstraction of theory.

4.10.2.1 Data analysis of how teachers understand and implement the curriculum

As I was collecting data from the teacher schemes/plans, using the document analysis and lesson observation data through lesson observation protocols that I had designed, I wrote reflective notes as an initial process of interpreting the data I was collecting. I used the rubric on the document analysis and lesson observation instruments as the predefined codes onto which I assigned meanings to develop theoretical themes/categories. I was therefore wary of the inevitability of the use of pre-existing ideas and concepts, and the impossibility of completely eliminating prior frameworks (Gibbs, 2012:8).

The analysis of the document analysis data collected from the photocopied teacher schemes/plans involved objective analysis of the messages conveyed in the schemes/plans, and the analysis of the lesson observation field notes involved subjective analysis of the teaching practices of the teachers.

Analysing the document analysis data entailed the counting of units of analysis from the field notes under the predefined codes, and then developing these codes into themes. The counts from the document analysis data transcript were then used to quantify the frequency of occurrence of the key curriculum features that teachers had included in their schemes/plans, to produce a general picture of their codifications of the AIDS curriculum. The results would be presented on an information table, accompanied by a narrative description. Lesson observation data was also subjected to coding of data and development of themes. Thus, from both the document analysis and the lesson observation transcripts, I formulated emerging themes.

I felt a sense of desperation as to how best I could develop themes from document analysis and lesson observation transcript field notes, where the data was dispersed across two sources unlike the way it would be if I had only interview data. As I thought the matter through, an idea suddenly dawned on me: “What if I acted as if I was interviewing the participant from whose scheme/plan and lesson observation transcript I had collected the data? Would he or she not give me the same answers about the predefined codes, which I would then start coding, as I would do if I conducted an interview?” This was indeed a “eureka” moment for me.

Upon adopting the above strategy, I came up with several themes from the predefined codes of the document analysis transcript and clustered and collapsed them into very few broad themes. A similar content analysis process with the lesson observation transcript resulted in the codes being reduced to a few broad themes.

4.10.2.2 Data analysis of teachers’ perceptions of their implementation configurations and practices, and personal and contextual factors that play out on them, their experiences, and suggestions

I employed the same content analysis procedures used for developing categories in the scheme/plan and lesson observation data to analyse data on teachers’ views with regard to their implementation of the AIDS curriculum.

More specifically, I engaged in the content analysis procedures of (a) perusing each transcript for a broad picture of the data, (b) writing down hunches in the margins, (c) open coding, (d) clustering and collapsing codes carrying related meanings into themes, and (e) categorising the themes for conceptualisation. I thus adopted Creswell’s (2005:231) open coding strategy of collapsing data into broader themes by integrating overlapping and redundant codes, which was relevant to my study, as it enabled me to obtain a deeper, detailed understanding of the phenomenon under investigation, using a reasonable number of themes.

Axial coding was then done. I categorised and conceptualised the data by identifying those codes with similar characteristics and grouping them together into meaningful categories (Hennink *et al.*, 2011:245). As a measure to move analysis to

a higher level, I tried to establish theoretical connections between and across categories (Hennink *et al.*, 2011:245; Leedy and Ormrod, 2010:143).

Heeding Gibbs's (2012:8) coding strategies, I also tried to move away from the description of codes based on participants' terms to a more categorical, analytic level of coding. This was done by clustering codes which described common issues that occurred with or were reported by participants across the different school contexts.

Content analysis procedures with the interview transcript of each participant resulted in the production of numerous initial themes, which were then collapsed into a few broad themes.

Using the constant comparison method, I continually returned to the database to check whether the provisional themes I had formulated were supported by the actual data. The back-and-forth process of returning to the data and going back to my tentative theoretical themes helped me to reach data saturation. It was only when I was satisfied that all my themes had been conceptually fitted into the broader categories that I stopped clustering and integrating the themes. The result of the analysis was some themes that remained exclusive by virtue of their uniqueness, since they could not fit into any category. However, since they spoke to my research interests, they were not discarded.

The sub-themes of the developed broad categories were therefore used in the service of being the substantive content of the categories. This was done to enable a thick description and an analytical and theoretical appraisal of the findings.

4.11 ETHICAL CONSIDERATIONS

The interest in qualitative research of collecting data from human beings necessitates that researchers follow situated guidelines to assist them to conduct research practice in a professional manner that protects participants from research harm. Cheek (2008:60), for instance, stresses the need for researchers to protect participants from adverse effects of research.

Granted the intrusive nature of qualitative research, where the researcher is the data-collection instrument, the need to observe special ethical considerations cannot be overemphasised. It was incumbent upon me as well to safeguard the participants' human rights, and thereby respect their human dignity in the entire research process.

For this reason, I made efforts to comply with the wide range of key ethical considerations and principles that regulate researcher behaviour, among the various forms of which the most commonly observed include informed consent, voluntary participation, anonymity, and confidentiality (Hennink *et al.*, 2011:63; Leedy and Ormrod, 2010:102; Lindsay, 2010:118-120).

I thus complied with the above-mentioned ethical considerations in the context of some of the key ethical principles that inform them, which scholars such as Lindsay (2010:113) and Hennink *et al.* (2011:64-66) cite, namely non-maleficence, beneficence, fidelity, justice, autonomy, and respect for persons.

Among some of the primary ethical considerations that a researcher should observe is informed consent, which commences with entry into the study field. First, in adherence to Creswell's (2008:33) advice, I sought permission to conduct this study from the university's Human Research Ethics Committee (REC-H), which governs the ethical clearance process. I then sought permission from the gatekeepers, first at national level, from the Ministry of Education, Sport, Arts and Culture, then at provincial level, from the Provincial Education Director, and then at school level, from the school heads. These gatekeepers have the authority as leaders to grant such permission for one to gain entry into the schools (Creswell 2005:210; Hennink *et al.*, 2011:68).

While the power relationship between the school head and the teachers enabled me to easily identify potentially appropriate participants, I heeded Hennink *et al.*'s (2011:68) advice to seek informed consent from the participants themselves. They could have felt pressurised to participate on account of their superiors, in which case they would have participated involuntarily, or against their will.

In observance of the ethical principle of respect for persons, I provided adequate general information about the study to prospective participants before they consented or declined to participate (Hennink *et al.*, 2011:70; Leedy and Ormrod, 2010:101). In the interest of observing the principle of autonomy, advanced by Lindsay (2010:113) and Tobin (2006:18), I afforded participants the freedom to choose to participate or not on the basis of key information, such as the purpose, place, and duration of the study, and the dates on which certain activities would engage them.

Observing the ethical principle of beneficence (Hennink *et al.*, 2011:64; Lindsay, 2010:113) entailed informing participants of the possible benefits that could be derived from their participation in the study, namely shaping the study, contributing their interpretations to the data analysis, and knowing the results (Guthrie, 2010:11). In the interests of non-maleficence, that is, avoidance of harm (Hennink *et al.*, 2011:67; Lindsay, 2010:113), I informed prospective participants of the potential risk that the study may pose to their psychological well-being, given the sensitive HIV/AIDS and sexuality issues involved in the study. The idea was to avoid inflicting harm on prospective participants, some of whom could have felt uncomfortable in the light of their HIV status and the cultural and religious taboos associated with discussing issues related to sexuality.

Associated with the process of gaining informed consent from participants are the ethical considerations of anonymity and confidentiality. Before they volunteered to participate in the study, I assured participants of their anonymity and that their data would be treated confidentially. I assured the participants of their right to privacy, by following Leedy and Ormrod's (2010:102) advice to keep participants' participation and contributions in the study strictly confidential throughout the study. Since in this study participants' responses were tape-recorded, requesting permission from participants to record them went further to assuring them of and ensuring anonymisation of the transcripts, by removing any identifying features and assigning codes and pseudonyms to the schools and the participants.

In compliance with the ethical principle of fidelity that Lindsay (2010:122) identifies, I strived to report my findings in a fair, honest, and accurate manner, for purposes of maintaining professional integrity. Fidelity entails refraining from falsifying and

fabricating data (Johnson and Christensen, 2008:117), as such unprofessional behaviour is tantamount to exploitation of participants, whose time and effort are then wasted on a project that will have no value (Cheek, 2008:58).

The need to leave participants with peace of mind after completion of the study prompted me to apply the ethical procedure of debriefing the participants. According to Johnson and Christensen (2008:117), this involves desensitising participants to any stress or undesirable feeling that the study may have created.

In conclusion, the execution of ethical procedures, although essential, can never be a neat and straightforward affair, as unexpected circumstances may dictate how one should handle the ethical concerns.

4.12 WRITING THE REPORT

In writing up this study, I was guided by Creswell's (2007:178) general principles that direct the overall structure of a qualitative research write-up. I presented findings on information tables, visual representations and narrative descriptions to describe and explain the concepts embedded in the data (Hennink *et al.*, 2011:258).

The dense narrative description that I engaged in incorporated literature evidence and participants' verbatim quotes, to ensure credibility of the data and transferability of the findings. To further enhance transferability of the findings, I combined the dense narrative descriptions and common patterns derived from data collected in different school sites with different social contexts with evidence from the literature review (Punch, 2009:161).

To promote trustworthiness of the data, I tried to observe empathic neutrality by explicitly acknowledging and describing my own opinion but not making value judgements about participants' views where they differed from my own views (Drew *et al.*, 2008:206).

In writing up the report, I presented results relative to each research question and the data-collection method(s) used, for purposes of giving the report organisation

and structure. Sections 5.3, 6.3 and 7.3 where the findings are presented provide clear markers to make sense of issues from a myriad of detailed and voluminous data. This enabled me to articulate the key theoretical issues and core messages in the findings of each research question at each school, thereby facilitating cross-case analysis of the findings during my write-up of the report.

4.13 A SUMMARY OF CHAPTER 4

Chapter 4 explained the research design and methodology that guided the investigation in this study. It also exposed the broad research paradigm, the specific research design, and the related ontological and epistemological underpinnings of the study. In this chapter, I outlined and justified the specific data collection and analysis instruments and procedures applicable to each research question. I also outlined and justified the sampling procedures and the resulting sample, and I explained the ethical considerations that the study adhered to. Strategies that were followed in the writing up of the research report were also explained.

CHAPTER 5

PRESENTATION OF THE DATA

STELLA SONGO'S CURRICULUM IMPLEMENTATION

5.1 INTRODUCTION

The preceding chapter described the research design and methodology utilised in conducting this study. In this chapter I present the findings of the first case. For purposes of organisation, I detail findings from the first participant, research question by research question, and I proceed in the same fashion for the other two participants in subsequent chapters. I describe the biographical background of Stella and the context in which she was teaching the curriculum. Evidence is presented on how she understands and codifies the written AIDS curriculum, the teaching practices that she engages in her lessons, and the personal and contextual factors that could play out on her change efforts. Finally, data presentation is given on Stella's practical experiences with the curriculum and her suggestions for improved practice. From the content analysis process, I describe Stella's understanding and implementation of the curriculum, by linking the document analysis and lesson observation themes with the themes derived from the interview data. Since this case study centred on understanding of teachers' actual implementation of the curriculum with learners, lesson observation served as the central data-collection instrument. I used semi-structured interviews to triangulate findings on teachers' understanding of the curriculum, actual teaching practices, and teachers' experiences with the implementation of the curriculum.

5.2 A PROFILE OF STELLA

Stella Songo is a short, stout and fairly well-built woman aged 49. She takes one of the 10 streams of Grade 6 classes in the primary school subject curricula of English, Shona, Mathematics, Environmental Science, Music, Home Economics, Religious and Moral Education, Physical Education, and AIDS Education.

A holder of Ordinary Level and a Certificate of Education from the University of Zimbabwe, Stella is also one of the chief examiners responsible for training of national markers for the Grade 7 examinations in her province. The softly spoken woman is regarded as one of the best teachers at Taiwan Primary School and has a reputation for producing good results.

Of interest to note about Stella's professional profile is that she has 18 years' experience teaching the AIDS curriculum at primary school level. Having received some pre-service training for this curriculum, Stella is one of the teachers actively involved in the teaching of the AIDS curriculum, and she has attended the teacher workshops in Zimbabwe that have been offered for staff development, which have been few and far between, and which were discontinued 12 years ago, owing to the economic meltdown of over a decade in the country. Due to non-disbursement of funds from central government, workshops ceased to be offered. They were offered again in 2010, after the Global Political Agreement, which gave birth to Zimbabwe's current government of national unity.

Thus my biography of Stella describes her professional experience and her academic qualifications, as well as the contributions she has made to the general educational welfare of Taiwan Primary School, which she joined in 1993. I now describe the context in which Stella operates.

5.2.1 The context in which Stella teaches

5.2.1.1 The community

Without question, Stella operates in a school situated within a fragile macro-economic system, characterised by general poverty. Situated in the Gweru Urban District of Zimbabwe's Midlands province, Taiwan Primary School is located right in the heart of Blackmore high-density suburban area, which is populated by about 600,000 inhabitants.

The Provincial Education Directorate in charge of schools liaises with the school heads and parents to ensure the achievement and maintenance of good academic

and sporting results. It plays only a ceremonial role of awarding schools and pupils who excel in the subjects mentioned above.

The Directorate thus does not provide any financial assistance to pupils, except for very poor orphans, who receive meagre funds from a government sponsorship scheme known as the Basic Education Assistance Module (BEAM). At the time of my visit to the school, the BEAM sponsorship scheme was reported to be on the verge of collapse, on account of the country's fiscal problems.

In the same way, the Provincial Directorate can no longer afford to maintain the school buildings as it used to do up until 1998, when it could release a small portion of funds for that purpose. The school now carries the entire burden of funding everything.

Regarding the broader community in which Taiwan School is situated, it can be said that it is fortunate to have generally enterprising parents and guardians from whom the school enrolls its students. The local residents are mainly Christians from various denominations, and are largely of the Shona and Ndebele tribes. Regardless of the slow pace of economic recovery from the doldrums of a hyper-inflationary environment, most parents eke out a living as local self-employed workers, some of whom own tuck-shop, and they work as cross-border vendors. They thus face daily struggles in a relentless effort to send their children to school.

5.2.1.2 A profile of Taiwan Primary School

A double-session government primary school situated in the heart of the Blackmore high-density suburban area, Taiwan School enrolls over 1,000 pupils, who are housed in well-built redbrick blocks. The school was established in 1978, following the Education Act of 1976, which mandated the establishment of more government primary and secondary schools in high-density suburbs in the country's cities.

The school's catchment area comprises children who reside in families of largely Shona- and Ndebele-speaking locals.

Near the main gate of the school, to the east, there is a large, unpretentious administration block, which contains the offices of the school head, the deputy head, and the teacher-in-charge. Inside this block is also a spacious and well-furnished

staffroom, as well as a neatly maintained ablution block for the staff. Upon my visits, I received very warm, friendly welcomes and offers of tea from the staff, but I turned them down due to my extremely busy schedule.

Directly opposite the administration block are about eight blocks, one for Home Economics, and the other seven for the conventional classrooms, making up 10 streams per grade.

Notably, most of the windows were in a general state of disrepair, as some of the window panes and handles were broken.

On venturing beyond the school fence, I came across used and unused condoms strewn in the street, evidence of the fact that there is a clinic nearby, named Polyclinic, which serves the suburban population in the vicinity.

The school, having Grades 1 to 7, and each grade having 10 streams, is not that well resourced, as some children do not have textbooks. It boasts qualified teachers, a library, and a computer laboratory, where children are taught basic computer skills.

5.2.1.3 The context of Stella's classroom

Stella's classroom is located in the third block when approaching from the southern side of the rows of classroom blocks. The fact that on the second day of my lesson visits, I nearly slipped on the shiny, well-polished cement floor taught me that Stella was particular about tidiness.

The walls were furnished with a variety of educational charts, some of which Stella had made herself, and others which she had acquired from the local offices of the Ministry of Education.

The classroom furniture consisted of fairly small, new desks, which were fixed to benches and could seat 10 learners. Attached to the side of the teacher's table was a built-in cement locker, in which learners and the teacher stored their books.

Since Stella was sharing the classroom with another teacher, it was difficult to tell who the various charts displayed under the different subject areas belonged to. A few battered charts on AIDS education were also on display.

5.3 A DESCRIPTION OF STELLA'S LESSON DOCUMENTATION AND TEACHER ARTEFACTS FROM THE WRITTEN CURRICULUM

Before attempting an analytical description of Stella's actual teaching, it is necessary to try and provide the reader with a clearer picture of her cognitive sense-making of this curriculum at the symbolic level of its enactment, by offering a detailed description of the teacher artefacts that Stella suggested to effect actual pedagogical processes.

An obsolete *Let's Talk* version of the AIDS curriculum, a teacher-made scheme/plan and a progress record book constituted Stella's set of the main documentary teacher artefacts for enacting this curriculum. From the "Let's Talk AIDS" version, Stella selected the topics for the term from which she formulated a general aim which focused on "Helping pupils to gain knowledge about HIV/AIDS and to create an awareness of behaviours that can spread AIDS, and to help them change their behaviours." She conducted a conceptual analysis of the curriculum by breaking down the topics that she had listed into weekly teachable units. From the topics Stella pre-specified the key curriculum elements of lesson objectives, teaching methods and teaching media. Generally, the teaching methods that Stella suggested included a limited number of participatory methods such as discussion, role play song, and a good number of non-participatory ones such as explanation, textbook and story narration. The other teaching artefacts that the teacher displayed on the classroom walls included teacher-made charts and a few charts on HIV/AIDS from the Health Ministry. In her scheme/plan, Stella suggested the chalkboard, flash cards and group work cards as tools for putting across the curriculum to her class. The teacher used the progress record book into which she recorded the marks scored by the learners in individual written work to show their performance in the subject curriculum. It was thus from Stella's scheme that I conducted a content analysis of her work.

5.4 STELLA'S UNDERSTANDING AND CODIFICATION OF TEACHING PRACTICES FROM THE WRITTEN AIDS CURRICULUM

To address the first research question "How do teachers understand and implement this curriculum?" I describe key findings on how teachers understood and codified classroom practices at the symbolic level of implementation. In this section I

describe Stella's written mutations of the AIDS curriculum, using the key curriculum features identified in a document analysis of her scheme/plan. The scheme/plan was her own version of the tentative approximations she would use to actualise the national curriculum policy messages with her learners. Adopting a multilayered approach to the presentation of the findings, I first present this codification on an information table, along with Stella's views on how she understands the curriculum, taken from the interview data.

Since the data-collection procedures followed were described in the previous chapter, I will not elaborate on them here. In a nutshell, the document analysis and lesson observations captured on the protocols were subjected to content analysis, resulting in key themes.

I used the rudiments of content analysis and counted the units of analysis, that is, essential curriculum features, namely themes, topics and content, and teaching methods and life skills, which Stella included, to determine the frequency of the curriculum features that Stella demonstrated. The aim was to gain a general picture of how Stella interprets this curriculum at the symbolic level of implementation. Table 5.1 shows the frequency of essential curriculum features that Stella codified in her scheme/plan.

Table 5.1

Data on Stella's symbolic representation of the AIDS curriculum

Item	Week												
	1	2	3	4	5	6	7	8	9	10	11	12	13
Theme	0	0	0	0	0	0	0	0	0	0	0	0	0
Topic and Content	1	1	1	1	1	1	1	1	1	1	1	1	1
Teaching Methods													
Discussion	3	1	1	0	2	1	1	0	1	1	1	1	1
Question and Answer	1	1	1	1	1	1	1	1	1	0	0	0	0
Role Play	0	0	0	0	0	0	0	0	0	0	0	0	1
Drama	0	0	0	0	0	0	0	0	0	0	1	1	0
Picture Codes	0	0	0	0	0	0	0	0	0	0	0	0	0
Devil's Advocate	0	0	0	0	0	0	0	0	0	0	0	0	0
Brainstorming	0	0	0	0	0	0	0	0	0	0	0	0	0
Explanation	0	0	0	1	1	0	0	2	1	1	0	1	1
Demonstration	0	0	0	0	0	0	0	0	0	0	0	0	0
Case Studies	0	0	0	0	0	0	0	0	0	0	0	0	0
Values Clarification	0	0	0	0	0	0	0	0	0	0	0	0	0
Futures Wheel	0	0	0	0	0	0	0	0	0	0	0	0	0
Textbook	1	0	0	1	0	1	0	1	0	0	0	0	0
Life Skills													
Decision Making	0	0	0	0	0	0	0	0	0	0	0	0	0
Self-awareness	0	0	0	0	0	0	0	0	0	0	0	0	0
Communication	0	0	0	0	0	0	0	0	0	0	0	0	0
Negotiation	0	0	0	0	0	0	0	0	0	0	0	0	0
Critical thinking	0	0	0	0	0	0	0	0	0	0	0	0	0
Resistance to peer pressure	0	0	0	0	0	0	0	0	0	0	0	0	0
Refusal	0	0	0	0	0	0	0	0	0	0	0	0	0
Self-discipline	0	0	0	0	0	0	0	0	0	0	0	0	0
Empathy	0	0	0	0	0	0	0	0	0	0	0	0	0
Coping with stress	0	0	0	0	0	0	0	0	0	0	0	0	0
Problem solving	0	0	0	0	0	0	0	0	0	0	0	0	0
Social adjustment	0	0	0	0	0	0	0	0	0	0	0	0	0
Interpersonal relationships	0	0	0	0	0	0	0	0	0	0	0	0	0

Table 5.1 above shows that generally Stella's understanding of the curriculum was one in which she seemed oblivious of the many critical curriculum features which she excluded from her scheme/plan, which curriculum developers deemed to be necessary. She seemed to have conceived of and adapted the written curriculum in a manner that captured and included those curriculum features that she interpreted as necessary, discarding the others. The zeros in Table 5.1 indicate the omission from Stella's scheme/plan of themes, life skills, and participatory methods that had been recommended by curriculum developers. Throughout the 13-week term, Stella interpreted content purely as topics carrying related concepts, and not as topics defined by the overarching themes.

Stella conceived of the participatory methods of role plays, pictures and discussion as the key teaching strategies that enhanced active involvement of learners in AIDS lessons. She excluded several other participatory methods that could tap life skills in the learners from different pedagogical approaches. She thus complemented the few participatory methods with non-participatory methods of the explanation, telling and question and answer.

5.4.1 Linking Stella's codification of curriculum policy messages with interview data

A caveat to note for analytical purposes in this thesis is that I appraise issues through the conceptual lenses of the phenomenological-adaptive approach, Honig's "people, policy, and places" model, and the cognitive sense-making model. Broadly speaking, individual teachers make sense of and mutate a curriculum in a manner that they personally understand at particular policy mediation venues.

Phenomenologically, Stella's written versions of her understanding of the AIDS curriculum constitute her symbolic representations of her implementation of the curriculum with learners. Thus, themes derived from the schemes/plans represent Stella's general codification of this curriculum. They can be connected with themes from interview data, to gain a fuller picture of Stella's cognitive sense-making of this curriculum at the symbolic level of implementation.

5.4.1.1 Document analysis theme: Codifying an essentially cognitivist approach, with behaviourist undertones

Stella's conception of the ideal way of implementing the national AIDS curriculum seemed to lean towards an essentially cognitivist approach. A cognitivist approach to teaching and learning basically emphasises development of learners' intellect, mainly through in-depth mastery of subject matter. Predominant representation of subject matter materials that favour intellectual actualisation in learners seems to confirm this inclination. Content centres on the impartation of factual knowledge in the form of topics and concepts. Stella's assertion that she uses the textbook methods of "reading and analysing situations from textbooks" and "reading stories from textbooks" seems to confirm her use of a cognitivist conception, as such learning activities favour the development of the intellect in learners. This oral

assertion is represented in the broad interview theme “A cognitivist, pragmatic epistemology with behaviourist undertones” which describes Stella’s beliefs about the teaching of this curriculum. Furthermore, Stella’s scheme/plan reflects the same possible theme of “Relationships”, which spans seven of the 13 weeks of the term’s work. Although it does not explicitly show in the scheme/plan, the topics and concepts for seven consecutive weeks are subsumed in the “Relationships” theme. From a cognitivist perspective, repetition of the same broad idea over a space of time is meant to increase learners’ depth of understanding of content, thereby developing their intellect.

In her written version, Stella omitted themes and life skills as integral content dimensions related to topics and concepts that she suggested. In the interview, Stella intimated that themes were omitted from her plan, simply because she did not have a copy of the current syllabus, but used the outdated *Let’s Talk* textbook, which did not list themes. This omission meant that learners would not be assisted to gain broad and integrated ideas from what they would have learned.

Consistent with the above evidence pointing to Stella’s cognitivist inclination, interview data confirms her epistemological position of knowledge impartation. She categorically stated:

Okay, myself, what I believe is for pupils at least to have knowledge about AIDS itself as a subject, as deadly disease<er>, rather than skills, skills, skills...I think knowledge <er> will be of important use to them.

By implication, Stella omitted life skills in her scheme/plan not only because of her lack of awareness of the need to explicitly teach them, but probably because of the blind spot seemingly created by her somewhat persistent belief in impartation of knowledge as the hallmark of implementation of this curriculum.

It is important to remember that to say impartation of factual knowledge emphasises cognitive development is not to imply that factual knowledge always leads to intellectual development. Rather, in terms of the AIDS curriculum, life skills address all facets of human development, namely intellectual, social, emotional, moral and spiritual development (MoESC, 2009:16).

In contrast with Stella's cognitivist approach, there were some behaviourist undertones which were evident in her scheme/plan. Her plan reflects a behaviourist, programmatic approach to teaching, where Stella broke content down into smaller teaching units, arranged in sequence according to a weekly focus. Behaviourist objectives were evident in her plan, which described observable actions and behaviour learners should demonstrate at the end of each week. The idea was to have learners respond to units of knowledge as learning stimuli, to master these units, and then to proceed to subsequent units, presumably after successful mastery. Thus, through the process of successive approximation and shaping, Stella's learners would undergo shaping of certain competencies in her programme. In the interview, Stella confirmed the use of a conceptual analysis of content, and she stated her behaviourist objectives. This is reflected in a sub-theme that I termed "a behaviourist-pragmatist conception of the AIDS curriculum" subsumed in the above-stated broad interview theme. Her programme would be pragmatic in the sense that learners would utilise the acquired knowledge about HIV/AIDS "to confront situations as they present themselves".

However, of major concern is the fact that the evidence suggests that Stella had a confused understanding of content. It appears that Stella did not conceive of shaping of competencies in terms of themes and life skills, but in terms of mastery of subject matter and, perhaps to a remote extent, life skills. In the same vein, it is difficult to comprehend Stella's conception of content. She seemed to be unclear of the distinction between topics, content, and themes. For her, the broader ideas occurred in the form of concepts broken down into topics. This is in conflict with curriculum developers' view of themes as the broader ideas from which topics and concepts are derived. Stella simply understood concepts in terms of their function in guiding her scheduled, programmatic teaching. She stated thus:

You know, a concept is rather<er> a broad topic. It is there to guide me what I must teach for the week.

In addition to the above issues, the content aspect of "caring for children infected or affected by HIV/AIDS" seemed to be intimidating for Stella. Stella excluded this dimension, thereby failing to comply with the specifications of the AIDS curriculum.

Triangulated data from the interviews confirms her conception of exclusively imparting knowledge, and not caring for her learners. She stated:

I thought I left it out, because it was not <er> part of my duty to do the caring. Myself, I do the education part of it, I educate, and then when there are pupils who need care, that is done by supportive teachers.

She absolved herself of the responsibility of caring for her learners, abdicating the responsibility to other role players. Thus in her conceptualisation of the content of the curriculum, Stella seemed to be unaware of the fact that the “educating role” that she purported to play included educating learners on how to take their antiretroviral medication at home and at school, for example.

Regarding the pedagogy of this curriculum, Stella seemed to have understood discussion and picture codes as the only key participatory methods for effective teaching of AIDS lessons for the whole term, to the exclusion of the various other participatory methods. Her plan suggests that she proposed to use more of the traditional teaching methods found in the teaching of other subjects and suggestive of the lecture method, for about one-third of the programme in the term. It appears that Stella was unaware of the idea that only through the use of a variety of participatory methods, such as role play, case study, values clarification, Futures’ wheel, Devil’s advocate, etc., could learners personalise and internalise content issues, thereby acquiring life skills. Stella was able to suggest only a few interactive teaching methods. Implicit in the interactive nature of this curriculum is the belief that it is only through activities involving talking about situations relating to HIV/AIDS that learners can learn HIV/AIDS prevention strategies.

From the foregoing evidence, it seems logical to tentatively characterise Stella’s symbolic representation of the implementation of the AIDS curriculum as a configuration which is indicative of the impartation of knowledge more than life skills, through Stella’s use of predominantly teacher-centred teaching methods, as opposed to learner-centred methods. It seems plausible for me to conclude that regarding adaptation of the content of this curriculum, Stella’s personal configurations tended to run counter to curriculum developers’ conceptions.

In the domain of education practice, it is accepted that what is taught to learners depends on the educator's professional expertise. Thus, the jargon phrase "the science and art of teaching" that people use in this domain highlights the concept of pedagogy. It is to the major findings regarding Stella's proposed pedagogy that I now draw the reader's attention.

A complete picture of Stella's implementation practices would be obtained by observing her actualising the version of the curriculum that she had codified. At the symbolic level of curriculum implementation, the foregoing findings suggest teaching patterns that could be either confirmed or refuted by lesson observations and further interviews.

5.5 STELLA'S ACTUAL TEACHING PRACTICE

My interest in establishing how teachers understand and implement Zimbabwe's primary school AIDS curriculum prompted me to observe the kind of teaching-learning features, processes and practices that occurred in teachers' classrooms. For a fuller understanding of teachers' adaptation and enactment of this curriculum, I present the lesson observation and interview findings thematically. For the main purpose of understanding Stella's translation of her symbolic representations of the curriculum into actual teaching-learning processes and practices with her class, I relied principally on five lesson observations, which I conducted at various times during the research process. The findings were supplemented with interviews that I conducted with the teacher. Observation of Stella's lessons was not without its own potential methodological concerns. Although I found Stella's classroom without any difficulty, following a research orientation exercise in which Stella and I had become well acquainted, I was concerned about possible biases of mine that could influence my inquiry. Given my considerable teaching experience as a primary school teacher who has taught the AIDS curriculum before, my long service as a teacher educator, and my protracted engagement with academic work, it was a struggle for me to avoid influencing my interpretation of Stella's practice with my own education background.

Before offering an analytical description of Stella's classroom practices, I attempt to give the reader a clearer picture of her actual teaching by offering a narrative

description of the pedagogical interactions that transpired in some lessons that I observed of her teaching. In addition, it is from some of these lessons and those that are described in passing in this report that some key themes explaining Stella's practice emerged.

In the first lesson on the topic "Myself: Looking good," the teacher introduced the lesson by asking for volunteers and coaching two boys to role play a situation depicting the lesson topic. As the teacher introduced the topic, the learners were all seated as one large group of 50, each in his/her own desk. After having been broken into working groups by the teacher, the learners worked in a total of five groups of (a) 10 (5 boys and 5 girls); (b) 9 (2 girls and 7 boys); (c) 12 (4 girls and 8 boys) and (d) 6 girls.

The teacher declared the purpose of the lesson as "To learn about myself" and "Looking good". She then asked her learners a series of questions such as "What must we do to look presentable?" Complete the saying: "Cleanliness is next to....." for the first part of the lesson which took eight minutes. Meanwhile, she paced up and down in front of the classroom. The two learners who had volunteered performed the role play, which took about 5 minutes. The other 48 learners watched and listened to this play acting, amidst some laughter and giggling by some learners who seemed amused with the content of the conversation.

Working in their groups, the learners brainstormed, discussed and came up with their own plays to enact the situations as directed by the teacher.

Upon the teacher's instruction, one girl, led the class to Group 1's play which involved two brothers who were fighting for a dirty shirt but were then stopped from fighting by neighbours. Almost drowning the words that the actors were saying, some loud laughter could be heard from most of the learners. At such points where learners were too noisy, Stella called for order. Led into its presentation by its group leader, Group 2 also presented its play, which aroused in the learners some laughter and whistling, which the teacher did not seem to be too particular about.

The role plays took twelve minutes. The other two groups who could not present their plays due to time shortage grumbled for their loss of chance.

In the final segment of the lesson, all the learners quietly sat on their benches and individually wrote down answers to teacher-set questions on the board, into their exercise books. Again a few children (3 or 4) at different times answered questions from the teacher which served as the conclusion of the lesson while the rest listened and clapped hands for the 'correct' answers.

A spectacular lesson of analytical interest in this study that needs detailed description was the third one that I observed of Stella's teaching.

The teacher introduced the lesson with a song 'AIDS Chiwororo' meaning "AIDS is dangerous, much to the learner's amusement. The entire class sang the song "AIDS Chiwororo" together with the teacher for three minutes.

Stella explained to the learners that people suffer from many different diseases and asked them to name some of them. She asked learners to explain the terms "HIV" and "AIDS". She explained to the class the terms for 3 minutes. A good number of learners took turns to verbally answer the teacher's questions amidst the clapping of hands for those who gave correct responses. The question-and-answer session with the class took about 3 minutes after the song. Some learners voluntarily gave responses to the questions that the teacher posed. To the question on anything they knew about AIDS, some learners responded thus: (i) AIDS is a disease which cannot be cured (ii) AIDS is caused by sexual intercourse. Almost the whole class broke into loud laughter at this sexual response except the teacher who blushed, appearing to be uneasy. To quite a number of responses that were related to sexual issues that the learners gave, Stella was rather cold as she simply ignored them.

After a certain girl had read out to the class, a passage on the ways of spreading HIV, from the grade 6 Environmental Science text book, Stella asked the class some questions based on the reading, whose responses she recorded onto the chalk board. Stella then broke the class into smaller working groups where the learners discussed and listed down ways in which HIV is spread and ways in which HIV is not spread. She also used flash cards on which she had written tasks for children to complete as groups. Notably, during group work the teacher mingled with each group to provide guidance in a free teacher- learner interaction where she chatted with her learners. In their groups where they enjoyed a free interaction amongst themselves, the learners helped one another to complete written tasks. They

reported back their responses to the class, which Stella recorded onto the chalk board. Individually, the learners completed a questionnaire for about 7 minutes.

As a way of recapitulating the key points of the lesson, Stella concluded the lesson with a question and answer session with the whole class for three minutes.

A description of these lessons and the other lessons that I observed of her teaching which have not been fully described but are referred to in passing in the analytical report provides some empirical evidence of the pedagogical processes and interactions that Stella steered in her classroom. At a more settled analytical level of description, sections 5.51 and 5.5.2 provide a thematic presentation of the lesson observation findings triangulated with interview data.

5.5.1 Content

5.5.1.1 Lesson observation theme: Processing and reproduction of knowledge

In all five lessons that I observed of Stella's teaching, I discovered that generally her actual teaching did not diverge much from her symbolic configurations of classroom practice.

As was the case in my first lesson visit, Stella hardly referred her class to the broad themes which incorporated the topic and content that she would be covering with the class. I thought that perhaps although she had not suggested themes in her scheme/plan, she might possibly refer to them during her actual teaching, but for the following four lessons that never happened.

The third lesson, in particular, was purely knowledge-oriented. The introduction stage of the lesson was followed immediately by a question-and-answer session, in which some of the learners raised their hands and gave answers, with others being summoned to write down answers on the chalkboard for the whole class to see. Although the introduction stage of some lessons was in the form of role plays and song, the remaining stages of the lesson would be dominated by serious academic engagement. In the lesson titled "HIV/AIDS: How HIV is spread and not spread", the children sat quietly and started working out answers to questions Stella had selected from the Grade 6 Environmental Science textbook. In this she showed her preoccupation with equipping her class with all the information that she deemed was

useful. Stella's improvisation of using a textbook from another subject that she felt contained the right information seemed to highlight this preoccupation of hers.

In the second, third, fourth and fifth lessons, Stella used the teaching methods of role play and discussion, but she allocated minimal time to them. Through the dominant use of the question- and-answer and explanation methods, the first 10 to 15 minutes of Stella's lessons involved mainly processing and reproduction of factual knowledge by the teacher and her learners. Learners responded to the teacher's oral questions while the teacher wrote the responses on the chalkboard.

Even in lessons involving role play and discussion during group activities, Stella tended to keep giving learners written tasks to complete. In all five lessons that I observed, she would mark learners' work during group work and individual work activities.

I could infer from Stella's practice that she tended towards a preoccupation with knowledge transmission. This preoccupation was evident from the following response in the interview:

I usually impart knowledge to pupils and then ask questions, and they'll be answering, and also I do the imparting of knowledge by telling my pupils facts about HIV/AIDS.

Her approach to the articulation of content thus seemed to confirm "A cognitivist, pragmatic epistemology" that she expressed as her teaching philosophy during the post-lesson observation interview. By the predominant use of the explanation, telling and textbook methods and the negligible time allocated to the few participatory methods that she employed, Stella's practice seemed to reflect a close connection between her largely non-participatory pedagogy and the knowledge-centred approach to teaching content. In the light of this inference, I now discuss Stella's pedagogy.

5.5.2 Pedagogy

Broadly speaking, I use the "science and art" explanation of pedagogy to explain the dynamic frame of reference that a teacher uses to effect teaching. A description of

Stella's pedagogy potentially gives us a fuller, deeper understanding of the art and science that she employs to implement the AIDS curriculum.

To construct Stella's pedagogy, I draw on data from lesson observations, as well as interview themes.

5.5.2.1 The learning environment

5.5.2.1.1 Lesson observation theme: A limited physical environment

Change leaders and teachers should value the importance of the physical space in which the teacher and the learners operate and in which learners are organised to engage with a given curriculum. Generally, the classroom in which Stella and her pupils operated had limited space. For the facilitation approach embraced in AIDS lessons, it was found to be a limited space, which required that the teacher be creative.

In the context of the limited space, Stella employed the traditional grouping strategy of organising learners into learning processes, applicable in the teaching of any subject. Evidence from the lesson observations indicates that during the lesson introduction, learners worked as one large group of 50 children, then broke up into smaller groups for collaborative engagement with tasks, and then reverted to the usual class grouping.

This pattern persisted throughout the entire period of my lesson visits. Learners stuck to their usual seating order at desks arranged in such a way that up to 10 pupils, five on each side, would face their mates each time they worked as a group.

For example, in the third and fourth lessons I found Stella trying to finish a Mathematics lesson and a Social Studies lesson, respectively, and to move on to an AIDS lesson. There was no sensitivity on the part of the teacher to the fact that a switch to a different curriculum was being made, and that a change in the physical environment of the classroom was thus needed. Children simply removed their books, arranged them neatly inside their desks, and started paying attention in preparation for the following lesson, namely the AIDS lesson. To me, it appeared that Stella was not conversant with the setting up of a physical learning environment

peculiar to the facilitation method that the AIDS curriculum requires. For curriculum developers, AIDS lessons demand an open space, where learners are free to choose whom they wish to work with across the room.

Apart from the aspects mentioned above, Stella's groups in three of the five lessons tended to be either too big or pupils tended to crowd around small desks, hampering meaningful participation by some learners. As a result, some learners were reduced to mere spectators. The limited space tended to inhibit use of teaching methods that demanded active collaborative interaction, especially when processing situations in role plays and drama.

5.5.2.1.2 Lesson observation theme: Psychosocial and political interactional and teaching-learning transactional patterns

A crucial pedagogical element displayed in Stella's practice, also related to grouping, involves the web of interactions that occurred in her actualisation of the proposed adaptation she had drawn up. Although in her scheme/plan Stella did not codify the kind of learning environment that she envisaged, and the kind of interactional patterns she envisaged between the learners and their teacher, she effected a wide range of processes.

Lesson observation data reveal that during Stella's lesson introductions, the teacher-pupil interactions tended to be selective. They privileged only a handful of those learners who raised their hands and voluntarily responded to her questions. Meanwhile, the majority of the learners simply watched and applauded those few learners who made "correct" oral responses and wrote answers on the chalkboard. As lessons progressed to the group activity stages, learners acquired the opportunity to be more social. I noticed that as Stella released her class from the drudgery of listening to her questions and explanations (where she led the process) and initiated group tasks, the psychosocial climate relaxed. Despite the limited physical space, the learners enjoyed social engagement in collaborative work, where they freely cross-pollinated ideas. However, as Stella confirmed in the interview, not everyone fully and meaningfully engaged in the social learning encounters, as "the usual 10 pupils, they are the ones who will be leading others, whereas they will be quiet listeners." On this note, it was evident that some learners did not have much access to direct interaction with the learning tasks. Hence, the learner-learner interaction

tended to merely increase opportunities for interpersonal relations among learners, some of whose contact with the set learning materials, which involved academic application, was peripheral.

Also noticeable was a diminishing in open social relations at the times when Stella recalled the class to its usual classroom configuration. Despite these processes, it was interesting to note that Stella's lessons were generally characterised by a free, open, but disciplined learning environment, which permitted free psychological interaction patterns. A happy teacher-learner and learner-learner interaction setting prevailed, which resulted in the expression of a variety of emotions, ranging from joy and excitement to frustration and disappointment. For example, most learners laughed during the role play presentations, cheerfully interacting with their teacher as she mingled with them and guided them during the group tasks. Similarly, some learners blushed at the teacher's disapproval of certain responses and contributions. A case in point can be drawn from the fifth lesson. When a certain boy said "I feel great, because I will be experimenting to have a baby", Stella gave him a talking eye, frowned at him, and told him to sit down. She thus essentially censured the little boy for expressing his imagination. Stella thus seemed to be sensitive to the socio-cultural context in which she and her learners were embedded, and the societal regulations governing "desirable" and "undesirable" verbal utterances.

By implication, while Stella celebrated freedom of expression of contributions and emotions in the AIDS lessons, she apparently condemned any utterances she considered to be obscene, a practice that is discouraged in AIDS lessons. Thus, it would seem that Stella believed that freedom should be enjoyed with a sense of responsibility. The foregoing evidence highlights the effect that the AIDS curriculum can have in evoking emotions in both the teachers and the learners, an issue that is integral to this thesis.

In striking contrast to her occasional disciplinarianism in her AIDS lessons, Stella was keen to constantly motivate her class to learn, by providing them with encouragement and urging others to clap hands for those who had tried well. She seemed to espouse the idea of motivation and positive reinforcement.

Another interesting observation that I made in Stella's lessons was the way she assigned group leaders to direct others during group activities. It would appear that

Stella conceived that delegation of power, authority, and responsibility to “cleverer” learners would facilitate learning. Whenever the class worked in groups, I could see group leaders were given the tasks, which were written on flash cards. The group leaders would then brief members of the group on how to tackle the task, and they would initiate the responses, with members following and ultimately endorsing the leaders’ suggested answers.

To me it appeared as if the teacher substituted her role as facilitator with perceived cleverer learners. I could infer the power distribution dynamics from this process. The learners seemingly accepted and enjoyed this arrangement, despite the political connotations that the practice carried.

Data from the lesson observations revealed a thematic piece of evidence to the effect that Stella’s pedagogy consisted of open but guided teacher-centred transactions. Mostly, through the use of teaching methods such as explanation and question-and-answer, which favoured mastery of factual content, Stella led in the unpacking of subject matter, with learners following. She exercised strict discipline in her class which she kept warning against making too much noise.

However, during role plays and discussions, Stella allowed learners to initiate group tasks. Demonstrating some semblance of what I perceived as a constructivist approach, Stella encouraged learners to collectively author their own scripts to play-act. Learners constructed their own plays, with minimal guidance from Stella, with the exception of where there were “slow” learners.

As Stella engaged with her class in the cognitive encounters of thinking, reasoning, and providing learning stimuli dialectically, her learners grappled with the intellectual tasks of reading, writing, and completing tasks from textbooks and on the chalkboard. There seemed to be a concerted effort that Stella made with her class towards serious and gainful learning, as learners set out on their tasks with resolve to do well.

These processes unfolded in the context of what I would characterise as a cognitivist approach, which Stella seemed to adopt.

5.5.2.2 The teaching methods

5.5.2.2.1 Lesson observation theme: Limited participatory methods, complemented with some non-participatory teaching methods

Lesson observation data indicate Stella's use of role play, discussion, and song, as some of the participatory methods recommended by curriculum developers. She seemed to respect these methods and to conceive of them as the most common participatory methods for mediating AIDS policy messages with her class. To her it seemed as if the notion of participatory methods with regard to implementation of the AIDS curriculum was associated with the use of only these methods.

Practically, her classroom practice did not incorporate the use of the many other possible participatory methods, such as values clarification, Futures wheel, case study, etc., as these fell outside her instructional repertoire. For Stella, the few participatory methods that complemented the non-participatory, didactic question-and-answer, explanation, telling, and textbook methods served as the most appropriate vehicles for effecting learning of this curriculum.

Stella's visible use of the above-mentioned teaching methods occurred in the context of her behaviourist approach, whereby she unlocked pieces of knowledge in instalments during each successive lesson step. The pattern that I observed was that of Stella successively proceeding from one lesson step to the next, through the use of either role play and discussion or transmission-oriented, content-based methods in the various lesson phases. Stella's preoccupation with combining the use of a few participatory methods with the use of traditional transmission-oriented methods is consistent with the findings from the interview data. Thematic evidence presented as "reliance on the use of role play and discussion, and non-use of the various other participatory methods" confirms Stella's propensity towards this practice when she stated thus:

I was relying maybe on the questioning and role plays.

Indeed, Stella admitted to having little knowledge of the various other participatory methods.

Consequently, her limited use of the interactive teaching methods in preference for the didactic methods potentially compromised the development of life skills in the learners. Thus, I can conclude that the way Stella displayed her understanding of the implementation of the AIDS curriculum was characterised by teaching that tended to be generally incongruent with policy prescriptions. Essentially, she employed a pedagogy that leaned more towards the traditional, conventional transmission-oriented approach than the recommended interactive approach.

As indicated earlier, the phenomenological-adaptation approach, Honig's "people, policy, places" model, and the cognitive sense-making model are the conceptual lenses that constitute the theoretical framework of this study. In the context of this thesis, the above-mentioned models acknowledge the fact that as a central agent of educational change, a teacher engages in the interpretive-adaptive process of making sense of curriculum policy messages and puts these messages into classroom practice in accordance with his or her own personal conceptualisation of the curriculum. Operating in the classroom as a unique venue, the teacher mutates the curriculum policy in the context of a web of complex actions and decisions that people inside and outside the school make. It is possible to validate the extent to which some of the actions and decisions filter down to the classroom teacher, in turn shaping and framing his or her practices.

With reference to Stella as a teacher implementing a curriculum, I try to connect my model empirically. I argue that whichever way she conceptualises and effects implementation practices, there are a host of factors endogenous to her, as well as exogenous factors that emanate from certain players in the entire society and education system, that are brought to bear on her teaching practices. It is therefore in my interests to explore some key personal and contextual factors that play out on Stella as she implements the AIDS curriculum.

5.6 SOME PERSONAL AND CONTEXTUAL FACTORS THAT PLAYED OUT ON STELLA'S IMPLEMENTATION OF THE CURRICULUM

Findings from interview data reveal a wide range of issues from Stella, which centred on her personal attributes in relation to the implementation of the AIDS curriculum.

Combined conceptually, these theoretical elements resulted in the broad theme of “teacher implementation characteristics”.

5.6.1 Personal factors

5.6.1.1 Teacher implementation characteristics

Evidence indicates that Stella selected and used the teaching methods of role play, discussion, and pictures, and that she used these methods because she believed she possessed sufficient knowledge of them. Similarly, her non-use of the many other participatory methods occurred because she regarded herself as not possessing knowledge of them. This can be linked to the inadequate pre-service teacher preparation that she claimed to have received.

In her admission of having little knowledge of the pedagogy in the way of teaching methods, and her neglect of the content of themes and life skills development, Stella seemed to attribute her deficient implementation efforts to her personal inadequacies in these dimensions. She admitted that as a practitioner, some of her deficient efforts at interpreting the AIDS education policy were as a result of her personal frame of reference in relation to the policy. She seemed to be conscious of her cognitive shortcomings due to the inadequate knowledge and skills she had received during both pre-service and in-service teacher training towards the implementation of the AIDS curriculum. On this note, Stella lamented the inadequate provision of staff development workshops by the change leaders as an impediment to the enhancement of knowledge of this curriculum among teachers.

It appears from the findings that a host of complex problems were attendant to Stella’s vague understanding of the content and pedagogy of the AIDS curriculum. The lack of up-to-date and clearly described curriculum materials, such as a copy of the syllabus and textbooks, as well as related materials, seemed to influence her cognitive sense-making in a negative way.

The limited availability of knowledge-enhancing materials and resources can be linked with her use of the only available, limited information that there was, and her development of a limited repertoire and a narrowly focused scope of pedagogic

epistemology. Constrained by her limited frame of reference resulting from inadequate teacher training towards the curriculum, Stella believed that her task required personal initiative to come up with a teaching-learning programme to satisfy merely the minimum requirements of the curriculum. She stated:

But in my case, I mean, I had to draft them on my own, so that at least I could have something that I would call a topic<er>, because in the Let's Talk, we don't have concepts there, we don't have sub-topics, or sub-objectives, or main objectives. So I had to do all that on my own. It was not very easy, because, as you can see ...it is very difficult to scheme without a syllabus or a teacher's guide.

Evidence also shows that problems related to Stella's knowledge of the implementation of this curriculum took their toll on her affective dimension in relation to the AIDS curriculum. Stella mentioned that she tends to develop a negative attitude towards the implementation of this curriculum. Thus she thought she acquired a negative attitude over time in her contact with the curriculum, such that in the absence of implementation support, the attitude seemed to persist.

Stella believed that the negative attitude she had towards implementing this curriculum arose from her perception that the curriculum is difficult, and her problems with interpreting ways of actualising it. She stated:

I end up sometimes having an attitude, because I think this subject is very difficult. That affects me a lot.

Evidence from the interviews confirms Stella's negative attitude caused by a feeling of work overload and burnout due to too much classroom work and general neglect of the curriculum by other stakeholders.

The Ministry of Education's Zimbabwe School Examinations Council (ZIMSEC) examiners, whom Stella believed marginalised and trivialised this curriculum by not examining it, contributed to Stella's negative attitude, as she remarked:

Only two questions are asked at the end of <er> seven years, so that gives teachers a negative attitude towards the subject.

The sense of frustration evident in Stella's attitude seems to link with the lack of commitment that she expressed during the interviews. Stella's feeling was that if no one cares, then why should she bother herself with a task that other players did not see as important? Her reasoning was that she shouldn't bother herself if the environment itself is characterised by a lack of order.

Contributing to Stella's sense of disillusionment was her school head who she believed was not concerned about the teaching of this curriculum as evidenced by the fact that he did not make available materials to teach it. In addition, her feeling of stress from the difficult-to-implement curriculum seemed to add to her feelings of frustration and despondency. As a result of the above-mentioned affective issues, Stella's negative attitude tended to make her pay little attention to implementation making her engage in irregular teaching.

Notwithstanding the negative feelings that Stella articulated in the interviews, it was observed that she put maximum effort into her teaching of the curriculum. She seriously thought out and executed what she conceived of and believed to be the most suitable teaching practices. Thus, the amount and level of commitment with which she applied her particular teaching approaches (regardless of whether they were appropriate or not) seemed to be motivated by a well-meaning desire to bring about effective learning in her learners.

5.6.2 Contextual factors

Postmodern thinking on educational change sets great store on the capacitation of teachers as the engine of change.

5.6.2.1 Deficient teacher capacitation

Several forms of facilitative support that a teacher receives towards the implementation of a curriculum constitute the kind of teacher capacitation, and the adequacy thereof, that is availed to him or her. Findings on Stella's implementation practices reveal deficient teacher capacitation as a key endogenous contextual factor which Stella believed played out on her and other teachers implementing Zimbabwe's primary school AIDS curriculum.

For Stella, there were inadequate resources in the way of curriculum materials to use for sourcing content and obtaining clear pedagogical guidelines for practice. According to Stella, curriculum developers, as well as the Ministry of Education, did not make available copies of the syllabus teachers' guides that were in current use. The non-availability of resource materials resulted in Stella improvising by using the outdated *Let's Talk* textbook as a reference source for implementation of the curriculum.

Regarding paucity of materials, Stella's sentiments are consistent with the lesson observation data, which revealed a lack of curriculum materials. It was observed that Stella used mainly the *Let's Talk* textbook, her scheme/plan, from which she extracted teaching matter, and the chalkboard. The limited curriculum materials that Stella used raise questions as to the depth of understanding she possessed as a teacher concerning content and pedagogy, and the learners' degree of comprehension of some of the work.

Besides its failure to provide teachers with the resources mentioned above, the Ministry of Education contributed negatively to Stella's implementation efforts, by allocating limited teaching time for the curriculum. Evidence from the lesson observation data confirms Stella's concerns with teaching time, as her lessons usually took more than the prescribed 30 minutes.

One can deduce that, due to the paucity of curriculum materials, Stella responded by improvising. In one of the lessons, she used a Grade 7 Environmental Science textbook to extract content matter from, and wrote an extensive piece of text from it on the chalkboard and on sheets of paper.

Another issue raised by Stella which compounds the problem of deficient teacher capacitation was inadequate facilitative teacher implementation support by way of supervision and monitoring by the Ministry of Education and the school heads. Stella claimed that the school inspectors have never visited her school and that at her school no one (including the head) cares to afford this curriculum the attention it deserves. It can thus be inferred from the evidence that the change leaders' actions and decisions not to provide implementation support to Stella seemed to shape and frame her practices negatively. In terms of Honig's model and the phenomenological-adaptation approach, then, it seems to be the attitude of the

change leaders towards the AIDS curriculum that negatively affects the level of commitment of teachers such as Stella. By not capacitating teachers, for whatever reason, change leaders seem to create in Stella and other teachers the impression that this curriculum is not important.

What lends credence to the inference I make above is Stella's reference to inadequate feedback on workshops. She squarely blamed the local education authorities, whom she thought simply neglected their supportive role. Much as they operate from their offices (the "place", in terms of Honig's "people, policy, places" model) as change agents carrying power and authority to pass decisions on policy enactment, their decision to not be active in the implementation of the AIDS curriculum was one that caused indignation for Stella. She commented as follows:

They are the ones who see to it that they organise things like <er> workshops. And they are the ones who should be moving around schools to see that the curriculum is being implemented. So, once I see that they do not come, I'll tend also not to do things in the way that is expected<er> to be done. And they are also the ones who should make sure that schools have enough resources. So, if they don't supply us with <er> resources like syllabuses, teachers' guides, and textbooks, what can I do as a teacher?

The analogy that I make from Stella's sentiments is that of a classic case in which those people in decision-making offices (the "place", in terms of Honig's "people, policy, places" model) tend to simply delegate and defer implementation responsibility to their subordinates (the teachers), whom they have not capacitated with support to do the task. Nor did the change leaders apply pressure on the teachers to ensure implementation. It is a case where people with enormous change influence abdicate themselves of their mandate of ensuring implementation of policy, thereby creating an enormous implementation challenge to Stella in her classroom.

Exacerbating the problem mentioned above was the issue that Stella raised of the poor example her school head set regarding implementation of this curriculum. Stella believed that her school head that should set the pace by ensuring that the curriculum is not neglected actually did not bother to monitor its implementation. Again, in terms of Honig's proposed model, here lies a case in which Stella's

curriculum adaptation occurred within a context space where there was much licence, where teachers assumed any attitude towards policy that they pleased.

5.6.2.2 Some policy-related implementation dynamics

Findings from this study revealed a host of policy-related implementation dynamics that played out on Stella's practice. It is these multiple exogenous issues that emerged from my data abstraction that resulted in the theme "policy-related implementation dynamics".

These complex implementation issues are explored in this section to address the second part of the research question on the personal and contextual factors that play out on teachers as they implement this curriculum. On the basis of Stella's perceptions, I categorised the policy-related issues according to the different levels of the education system at which they occur, shaping and framing Stella's teaching practice.

5.6.2.2.1 Macro-level policy-related implementation dynamics

At the macro level of policy implementation, people working in the Ministry of Education and the Curriculum Development Unit (CDU) affected Stella's implementation practices. According to Stella, their failure to produce a sufficiently developed and clearly described curriculum made the curriculum unclear to Stella during the scheming/planning stage and during actual implementation. Stella said she found some of the curriculum guidelines difficult to operationalise in actual teaching. Elements such as themes, life skills, and several participatory teaching methods were difficult for her.

Stella thus brought to light the constraining problems that have often plagued educational change, as a result of bold policy decisions made by change leaders. When high-ranking change agents such as local education authorities sanction slapdash adoption and enactment of a premature and poorly conceived curriculum policy, the host of implementation problems that attend such actions cannot be overemphasised.

In their capacity as change leaders operating at Zimbabwe's central curriculum development agency, the CDU also added to the lack of clarity of the curriculum

which Stella experienced. According to Stella, the CDU did not provide sufficient and relevant curriculum materials. This suggests that dissemination of curriculum materials to teachers is a core responsibility that change leaders failed to fulfil to a satisfactory degree.

The evidence also shows that the Ministry of Education's policy on the amount of time allocated to teaching about AIDS was a cause for concern to Stella. For Stella, the Ministry's decision to allocate only 30 minutes per week for teaching of the AIDS curriculum meant inadequate teaching time in the context of an already congested school curriculum. This evidence is consistent with my observation of Stella's lessons, which, in most cases, took far longer than the stipulated teaching time.

Related to teaching time is the issue of the Ministry's policy decision on the personnel who should be implementing the AIDS curriculum, which Stella raised in the interviews. For Stella, the Ministry's policy mandating that primary school teachers teach all 10 subjects in the school curriculum causes congestion of subject curricula, which are handled by one generalist teacher. The resulting problem is burn out due to work overload, and a negative attitude towards the curriculum. Stella made the following response, which illustrates the serious negative impact that macro-policy decisions concerning time and allocation of personnel to school subject curricula are having on her:

The Ministry, they just expect, for example, us teachers, especially primary school teachers, to teach any subject they think of. They don't consider that we are already overloaded. For example, we are supposed to teach <er> nine subjects, and then AIDS is going to be the tenth one. How can I be a fountain of knowledge?

When Stella complained about the Ministry's policy decisions on the aforementioned issues, it can be hypothesised that the idea of a general practitioner implementing all school curricula has the potential danger of diluting teaching efforts in some curricula that teachers may deem to be less important. My hypothesis about this matter seems to be supported by Stella's opinion that, besides "duplicating" the AIDS curriculum, whose topics are carried in the content subjects, the Ministry itself has undermined this curriculum by not examining it. Stella thought that the Ministry's

trivialisation and marginalisation of the AIDS curriculum due to its not examining it also perpetuated a negative attitude among teachers concerning the curriculum.

It is without question that a teacher that has been professionally trained to teach a particular subject curriculum can be expected to expertly deal with the opportunities and challenges of its implementation. Stella believed that the HIV/AIDS pre-service teacher training system in her country was rather deficient. She blamed the teacher educators, whom she claimed did not adequately equip her with skills and knowledge on the content and pedagogy of the AIDS curriculum. She argued that the emphasis of the lecturers on theory rather than the practice of implementing this curriculum left her insufficiently prepared to effectively implement this curriculum.

Finally, Stella contended that the Ministry's policy on the language of instruction had a negative impact on her practice. Since for all the pupils Stella teaches, English is a second language, most learners fail to participate due to lack of proficiency in the language. Whereas Ministry policy expects teachers to use English as the medium of instruction, the nature of the curriculum dictates that speaking dominates in the lessons, and that use of the mother tongue is therefore more feasible. The medium of instruction problem was indeed evident in Stella's lessons. At the teacher's invitation to discuss issues, I saw many learners struggling to communicate their ideas in English. As a result, in an attempt to move ahead with the lesson, Stella resorted to allowing her learners to switch to Shona, their mother tongue to express themselves more easily. How the language in which policy messages are couched by policy designers to be communicated by the end users, in this case the learners, can be a contentious issue.

5.6.2.2.2 Meso-level policy-related implementation dynamics

At the provincial and local education authority levels, there were some implementation issues that Stella felt impacted on her practices. Stella felt that the setting of unrealistic job expectations by inspectors tended to make her frustrated with her work. She intimated that the work expectations of supervisors, such as inspectors and district education officers required teachers to complete scheming/planning by the end of a prescribed time frame. She considered that to be asking too much from already oversubscribed generalist teachers who are handling

up to 10 subjects single-handedly. This resulted in hurried teaching preparation to meet the deadlines.

One could reason that “intense classroom pressure”, coupled with the pressing demands of the AIDS curriculum itself, could play out on the quality of Stella’s implementation. Hence, while this pressure and these demands could enable timely completion of preparatory tasks to enact the curriculum, this meso-level regulatory pressure in the absence of the necessary facilitative support, tended to hinder Stella’s change efforts.

5.6.2.2.3 Micro-level policy-related implementation dynamics

At the local site, people such as the school head and fellow school administrators interpret policy and play the leading role of facilitating change. Their decisions and actions on curriculum policy enactment are normally guided by general education policy. According to Stella, her school head did not monitor the implementation of the AIDS curriculum. While he should be the leader who sets the pace, the head at Stella’s school rather played an indifferent, uncommitted role.

The foregoing evidence attests to the extent to which the actions and decisions of specific change leaders with regard to various levels of curriculum implementation can shape and frame the practices of an individual teacher in the classroom. Stella admitted that these change leaders could have influenced her policy configurations and actual practices by their decisions and actions. By failing to set a proper example in the school for the teachers to develop a culture of paying serious attention to this curriculum, Stella’s head contributed to the negative attitude, lack of commitment, and feeling of apathy in Stella.

5.6.2.3 Characteristics of the curriculum

Evidence from the interview data reveals the negative effects of the characteristics of the AIDS curriculum on Stella’s practices. She felt incompetent and unable to understand some of the key specifications of the curriculum, and how to operationalise them into actual practice with her learners.

Stella schemed/planned for this curriculum in the context of a perception that she was handling a rather complex and difficult curriculum, which lacked clarity. Stella

produced her symbolic version of the curriculum from what she conceived as a curriculum that was too technical to be taught by a generalist practitioner. She also contended that learners found the AIDS curriculum traumatic, by virtue of the fact that many of the learners were personally affected by the pandemic, and being forced to learn this curriculum thus engendered feelings of resentment in them.

Thus, consequential to her cognitive sense-making of this curriculum at the symbolic level was Stella's production of a scheme/plan which was drawn from an already "complex" macro-curriculum policy. It is plausible that Stella's perception of the curriculum as complex can be linked to her claim of there being a lack of professional development programmes such as workshops, for teachers to gain more knowledge about teaching. It is against these circumstances that Stella expressed the urgent need for technical assistance. Although not done intentionally, perhaps it was because of the complexity of the curriculum that Stella omitted some critical elements during scheming/planning and actual teaching.

Related to the complexity of the curriculum is its clarity. Throughout the three interviews, Stella cited lack of clarity of the curriculum as a stumbling block to the clarity with which she comprehended its content and pedagogy. She asserted that the curriculum elements, namely the topics and concepts, were clearly described, but that the link between content topics and life skills was difficult to discern. She stated:

The curriculum designers they were not very clear on certain topics. It's very difficult to link certain topics directly with HIV and AIDS.

Further clarifying her failure to understand the connections between topics and the HIV/AIDS pandemic itself, Stella cited the problem of failing to determine which life skills she would emphasise in a particular lesson. In addition, she found the intended methodology and student assessment procedures not clearly explained in the curriculum framework.

It seems plausible to reason that in the face of cognitive discomfort that Stella was experiencing in her interpretation of the AIDS education policy, there was no way she could not have mutated and practised the curriculum in ways that were generally incongruent with its prescriptions. In the context of the theoretical lenses that I used,

the extent to which curriculum designers' description of policy is brought to bear on a teacher's practice has so far been evidentially validated in Stella's case. This is a case where research evidence attests to the complex ways in which curriculum designers' own version of policy (which they believe they have described well) filters down to the teacher as cognitive sense-maker in a way that is conceptually very different from the way in which the policy was conceived by the curriculum designers.

5.6.2.4 Learner attributes

Stella reported learners' negative attitudes towards this curriculum as an issue that impacted her teaching efforts. She intimated that some learners perceived HIV/AIDS as a life-threatening subject, which made them uninterested in learning about it in class. Thus Stella attributed the lack of participation of some of her learners in class to their negative attitude, which had the ripple effect of making the teacher despondent and lacking in commitment towards the curriculum.

5.7 TEACHER IMPLEMENTATION ENCOUNTERS

I pursue my interest to explore teachers' practical experiences with the implementation of this curriculum by describing the challenges, opportunities, and coping strategies that teachers encountered. As will be discerned, several implementation experiences explored in this section tend to overlap with some of the findings in the areas of interest explored in sections 5.6.1.1, 5.6.2.2 and 5.6.2.3.

Rigorous content analysis of data resulted in the broad theme "practical teacher implementation encounters: challenges, opportunities, and coping". The theme reflects findings on the research question "What are teachers' practical experiences with the implementation of this curriculum?" In an attempt to articulate the findings, I address the themes as practical psychological experiences of the cognitive and affective domains, under the broad categories of positive and negative implementation encounters.

5.7.1 Some negative teacher implementation encounters

As Stella was implementing the AIDS curriculum, she practically encountered a variety of experiences that affected her cognitive and affective faculties as a cognitive sense-maker.

In her efforts to implement the AIDS curriculum, Stella encountered a lack of clarity in the way the AIDS curriculum was described. She said she found some of the curriculum policy messages clear and others unclear. As described in section 5.6.2.3, her problems with clarity arose from her failure to understand links between some curriculum elements in a practical, operational manner. Her conceptual difficulties were thus caused by the vague description of the elements of life skills and content, whose connection she could not see. Stella's inability to interpret certain policy messages of the curriculum seemed to affect both her cognitive and her affective experiential domains. It affected her cognitive domain, in the sense that she had to think out coping strategies, and it affected her affective domain, in the way that she felt a lack of commitment and a negative attitude towards the curriculum.

The teacher's inadequate knowledge and understanding of the content and pedagogy of the curriculum also presented cognitive challenges to her of how best to ensure effective learning in her learners. Since her graduation from college, where Stella believed she had not been adequately equipped with implementation competence for this curriculum, she continued to operate in a "sink or swim" situation. In the absence of any form of knowledge-improving learning opportunities, she had to find her own ways to teach the curriculum. Lack of information support from local institutions, a lack of staff development workshops, and a shortage of curriculum materials also played out negatively on Stella's cognitive well-being.

In the face of a paucity of resources, Stella resorted to improvising by using textbooks from other subjects and using her initiative, to produce a "sensible" AIDS scheme/plan. I actually saw her using the Grade 6 Environmental Science textbook in one lesson to extract teaching matter, and also formulating tasks for learners by herself for some topics. Stella also claimed that in order for her to cope with her knowledge deficiency and the complexity of the curriculum, she tried to tailor her teaching to her learners' cognitive levels and abilities.

Whereas it would have been ideal for her to share knowledge with other teachers collegially, Stella experienced teacher isolation at her school. Coupled with the lack of a common understanding among her fellow teachers on the pedagogy of this innovation, teacher isolation added to Stella's cognitive problems. To countervail these knowledge challenges, the innovative teacher had to employ the coping strategy of sometimes consulting student teachers on practicum at her school, and the local college for technical assistance.

One of the key psychological encounters which a teacher can experience, influencing his or her adaptation of a curriculum, resides in the affective domain. Stella categorically deemed the AIDS curriculum to be an emotional innovation, which affects the learners' emotions during lessons. She stated:

And...also it's a very affective subject, which arouses emotions, even in pupils. You find that some of the pupils they have their parents who are infected or who are affected. So once you start teaching the subject, you find that the pupils don't feel at home.

Stella's concern about the absence of supportive HIV/AIDS education infrastructure for learners at community level seemed to underline her notion of the emotionality of this curriculum, for both learners and teachers. In Stella's opinion, the existence of community HIV/AIDS support clubs would provide psychological support to learners and nurture positive attitudes in them towards the learning of this curriculum. By implication, such supportive education infrastructure would foster a collective spirit in addressing the education problem between the school and the broader community, thereby relieving the emotional pressure on the teachers.

Stella also complained about the burnout that teachers experienced due to work overload. Furthermore, in the context of intense classroom pressures, she believed she had to contend with what she considered to be inevitable but difficult-to-deal-with language sensitivities in AIDS lessons. She coped with this negative emotional experience by just letting go unchecked sensitive issues that learners discussed in role plays and discussions. The teacher thus argued that it is difficult to stop learners from speaking out their views, even if they might offend learners infected or affected by HIV or AIDS.

One can imagine how Stella had to struggle to manage the tension between, on the one hand, promoting freedom of expression in the essentially discursive discourses that the curriculum demands, and, on the other hand, preventing the stigmatisation and discrimination, as well as psychological harm, that such utterances could cause to learners. She thus seemed to be in a dilemma.

Stella's negative experiences with the implementation of this curriculum also included pupils' lack of proficiency in their use of English. This tended to make Stella despondent in lessons, as a result of minimal participation by the learners. In my observations, I saw the woman struggling to get learners to communicate, and when they failed to do express themselves in English, she coped by rephrasing the questions, and even persuaded them to use their vernacular. The temporary deadlocks in lessons due to the language problem seemed to frustrate Stella, sometimes causing her to demand of her learners to participate, much to her embarrassment.

Exacerbating Stella's negative feelings with this curriculum was her feeling of difficulty to openly discuss sex and sexuality issues with her class, particularly in front of a "visitor", or a "stranger". Stella felt that it was a cultural taboo to discuss these matters in my presence as a researcher. Her sentiments regarding this matter are confirmed by my observations that she visibly held serious reservations. She even non-verbally castigated a learner for fantasising his sexuality, by applying what I would call negative reinforcement, so that next time the learner would make "proper", and not "obscene", contributions. She simply gave the boy a reprimanding glare and declined from responding to his opinion and from drawing the contribution to the attention of the other learners. By implication, Stella seemed to be obsessed with preservation of and respect for the cultural norms and values of the community in which she served. To confirm her uncompromising stance in this regard, she made reference to her historical and socio-cultural, as well as religious, background when she contended;

I think the way that we were brought up, even in our culture or in our religion, we believe that these topics are taboo.

Finally, the number and degree of cognitive and emotional interventions required of Stella in the face of the numerous implementation challenges mentioned above

cannot be overemphasised. In the face of the multitude of negative experiences confronting Stella, a major coping strategy that she admitted to using was irregular teaching of the subject, where she satisfied her urge to implement the curriculum by substituting the prescribed content with similar content from other subjects. She felt more comfortable teaching AIDS topics that had already been covered in the curricula of those subjects.

5.7.2 Some positive implementation encounters

Findings from this study revealed many negative and positive psychological experiences with the implementation of this curriculum. The negative implementation encounters highlighted in the previous section took their toll on Stella's cognitive and affective domains in relation to the implementation of the AIDS curriculum.

However, emerging from the findings of the study was that there were also some positive psychological experiences that played out on Stella. They are described below.

Despite Stella's difficulty in understanding how to implement the curriculum, and her lack of implementation knowledge, a positive encounter that she experienced was the availability of resource persons around her. She made reference to the presence of pre-service teacher trainees doing teaching practice at her school and the local college community and libraries, which she could consult for technical assistance and information.

The presence of an AIDS club in Stella's school was also described as a positive practical psychological experience. According to Stella, it was a positive encounter to have an AIDS social club in the school, following the recommendations of the UNICEF workshop which was held in 2010 for schools at a district staff development hall, to establish such learning infrastructure in schools. Although for her the club was not operationally effective, due to underutilisation and lack of time, it inspired a sense of hope in her. Stella regarded it as useful supplementary learner learning infrastructure, and she was optimistic that it would improve the attitude of learners towards the AIDS curriculum.

From the importance that Stella placed on having an AIDS support club can be inferred her belief in collective engagement within the school as one of the leverages for ameliorating teacher's implementation challenges. It would seem she valued the need to orientate pupils to different learning situations that could work in complementarity with classroom activities, as a way of reducing the psychological estrangement that learners may face in actual lessons.

5.8 STELLA'S SUGGESTIONS FOR IMPROVING PRACTICE

In order to address the research question "What do teachers suggest as the ideal way of improving implementation of the AIDS curriculum?" I present Stella's versions regarding this matter. The development of themes from the interview data resulted in the broad theme "transforming implementation proficiency", which was further divided into the sub-themes of "enhancing personal instructional proficiency" and "policy-level transformation of implementation proficiency for school improvement".

5.8.1 Transforming implementation proficiency

Stella's contributions seem to suggest the need for radical transformation to improve implementation of the AIDS curriculum.

5.8.1.1 Enhancement of personal instructional proficiency

Stella seemed to hold the view that a teacher's resourcefulness can go some way towards compensating for lack of knowledge, inadequate resources, and the general situation of inadequate incapacitation that were evident from the findings of this case. She pointed out that she and other teachers should be more enterprising in the midst of the host of challenges that they face as teachers. They should go out and source materials and consult local educational institutions, such as colleges and clinics, for technical assistance and information facilities, to improve classroom practice.

As a measure for improving practice, Stella also proposed the idea of inviting resource persons from the local institutions to come and help teachers with both materials and teaching skills. She cited the personnel from local outreach

programmes on AIDS as some sources of knowledge about AIDS and its teaching, who could be invited to schools to assist teachers.

Seeming to have reflexivity concerning her practice, Stella admitted that her practice was flawed, besides the exogenous factors that played out on her. She admitted that the physical space that she created for AIDS lessons was limited, and she suggested that she needed to address this problem by changing the venue (that is, working outside the classroom). She also suggested that her grouping strategy should improve, so as to enable every child to actively participate in the activities.

5.8.1.2 Policy-level transformation for implementation proficiency

It has so far been established that Stella also attributed the many challenges she faced in implementing this curriculum to hastily passed decisions to implement an insufficiently developed policy. Stella suggested that at the macro-level of policy, the CDU should improve the development of the AIDS curriculum, by producing more relevant information materials and related resources, and by making these available to teachers.

Stella seemed to be particularly sensitive to the need for policy to adequately address the flawed implementation dimension of knowledge which she believed she and other teachers faced. For her, this area of need could include the revitalisation of teacher learning infrastructure at school level, such as subject committees. In her school, the subject committees were rather inactive, yet there was the potential that they could form teacher learning platforms for sharing ideas to improve practice. Along with this infrastructure, an increase in staff development workshops and collaborative learning activities in the school could, in Stella's opinion, transform current practice to better levels of proficiency.

According to Stella, an improvement in instructional technology from the current methods of teaching HIV/AIDS concepts to learners should be introduced into the pedagogic strategies. She believed that radio broadcasts could stimulate improved teaching if introduced into the teaching of the AIDS curriculum.

When Stella looked at the general struggles she and her fellow teachers currently contend with, in the context of having multiple teaching responsibilities, she believed that one critical issue that policy decision makers could address was the question of

who should teach the AIDS curriculum. For her, turning the AIDS curriculum into a special subject curriculum taught by specialist teachers could “lighten” the burden that teachers carried, by reducing their workload. It could also enhance implementation effectiveness by the specialised pedagogical expertise that the specialist teachers could apply to deal with the various complexities associated with this “scientific” and “sensitive” curriculum. In this regard, Stella stated:

So I think it should be done by people who know how to handle these situations, who are well trained, even degreed people, not people who'll be having scant knowledge of how to do these things.

In conclusion, the suggestions that Stella offered on the best ways of implementing the AIDS curriculum seem to be informed by her own implementation experiences. It seems that the multiple challenges and a few opportunities that she faced in implementing this curriculum, along with her personal attributes, framed and shaped her practice. In addition, the myriad of exogenous factors created by people in the school and elsewhere in the broader social and education system tended to play out on her in different ways in her change efforts.

5.9 A SUMMARY OF CHAPTER 5

This chapter has described Stella’s account of her understanding and implementation of the AIDS curriculum. It has also articulated how the complex web of implementation factors, both endogenous and exogenous to Stella as cognitive sense-maker, played out on her teaching of this curriculum. The following chapter provides an exposition of the research participant Ellen Kubudirira’s adaptation and enactment of the curriculum.

CHAPTER 6

PRESENTATION OF THE DATA

ELLEN KUBUDIRIRA'S CURRICULUM IMPLEMENTATION

6.1 INTRODUCTION

The presentation of findings on the second case is borne out of more or less the same document analysis, lesson observation and interview data analysis procedures that were employed in the previous case. For this reason, I need not elaborate on the procedures. As in the previous case, I shall first describe Ellen's biography and her context, and then thematically present the key findings on each research question.

6.2 A PROFILE OF ELLEN

Currently employed as a teacher at Success Primary School, Ellen Kubudirira is a fairly tall, well-built woman, who is dark in complexion. The 52-year-old woman is currently teaching Grade 6 at the school, handling all the school subject curricula, namely English, Shona, Mathematics, Environmental Science, Social Studies, AIDS Education, Religious and Moral Education, Art, Music, and Home Economics.

Ellen is a holder of an Ordinary Level school certificate and a Diploma in Primary Education, which she obtained more than 20 years ago. She is a long-serving primary school teacher, who has taught for 16 years. For all these years, she has also been teaching the AIDS curriculum. Having received pre-service training to teach the AIDS curriculum, Ellen is one of the most actively involved AIDS teachers at her school, and she sometimes attends the very few and irregular life skills staff development workshops that are presented.

Owing to the country's protracted economic problems, staff development for all school innovations had ceased until 2010, when it was revived, with the advent of the government of national unity, and a subsequent improvement in the economy.

From her commanding voice, it could be deduced that Ellen is a confident teacher. She is well known for being a good teacher who actively participates in the school's drama club.

6.2.1 The context in which Ellen teaches

6.2.2.1 The community

Within the context of a generally fragile national economy, Ellen works at a school which is located in the heart of Blackmore high-density suburban area, with a population of about 600,000. The community consists of industrial employees, self-employed workers, business persons, and market vendors. These people send their children to the surrounding schools, one of which is Success Primary.

The Midlands Provincial Education Directorate plays a pivotal role in the well-being of all schools, but in recent times it has absolved itself of its responsibility to support schools with funding for maintenance of infrastructure, following the economic downturn of the country. Currently it can only make available, through central government, the meagre BEAM programme for funding very poor pupils. This fund is said to be about to cease, due to the government's fiscal problems. Fortunately for Success School, the body of parents in the School Development Committee provides financial support to the school for the purchasing of furniture, stationery, and infrastructure development. It is from the funding of this body that Ellen and her fellow teachers receive a payment known as an "incentive", to supplement their paltry salary.

6.2.2.2 A profile of Success Primary School

Located in the high-density area of Blackmore North Township, Success Primary is a non-government single-session school which falls under the administrative control of Gweru City Council. When the school was established in 1997, it had an enrolment of about 720 pupils in Grades 1 to 7, most of who were drawn from the local vicinity. For purposes of overall management of teaching and learning in schools, the Midlands Provincial Education Directorate manages both government-owned and

private schools, including Success. In terms of its socio-economic status, Success belongs to the Group B category of schools. These schools are fairly well resourced.

Seven fairly new classroom blocks, each with three streams per grade and a modest Home Economics block, constitute the pupils' learning places. The buildings are in a good state of repair and are being maintained by the Gweru City Council. To the south of the school gate is the main administration block, which houses the offices of the head, the deputy head, and teacher-in-charge, as well as the staffroom. Generally, each of the rooms in this block is well furnished. Along the perimeter fence to the north of the school gate are ablution blocks for both teachers and pupils.

At the time of my research visit, Success had a total enrolment of over 1,000 pupils. Most parents like to send their children to this school because of its reasonably adequate teaching and learning resources, and because it affords pupils adequate learning time. A feature that places Success in a more advantaged position than the government primary schools in the same vicinity is the frequent donor funding it receives. UNICEF and local donors have always provided the school with textbooks, computers, and sporting equipment.

The school has a reputation for achieving good national Grade 7 results. Success is also preferred for offering pupils a diversity of learning disciplines aside from the usual subjects. It also has a Boys Scouts club and Brownies.

6.2.2.3 The context of Ellen's classroom

Ellen's classroom is located in one of the western classroom blocks of Success School, about 30 metres away from the administration block. The rectangular classroom is big and spacious and has fairly new furniture, consisting of about 25 wooden desks fixed to benches. Ellen had organised her learners into a seating arrangement of eight groups, where each group consisted of six members occupying two desks. The groups were spread out across the room.

At the back of the room, on the well-polished floor, was a Science Corner, where various realia and models were displayed. In front of the classroom, to the right-hand side, was the teacher's desk, where Ellen sat when doing her marking. Immediately behind her table was a green chalkboard. In the left-hand corner of the room, there was a metal cabinet where Ellen stored her children's books and her charts.

On all four classroom walls were spaces where Ellen displayed her charts according to the different subjects she teaches, clearly labelled accordingly. The classroom was well decorated with colourful charts, including a few charts about HIV/AIDS.

The well-ventilated room had four large windows, which were in a good state of repair. In the classroom there were sufficient textbooks for the mainstream subjects, as each pupil had a book for himself or herself. It was evident that there was a shortage of textbooks for the AIDS curriculum, as no textbooks were used in the lessons. There was only use made of a copy of the syllabus copy and a lesson plan by the teacher. Of interest was that in her class, Ellen had a student teacher from the local college, who was attached to her on an internship.

6.3 A DESCRIPTION OF ELLEN'S LESSON DOCUMENTATION AND TEACHER ARTEFACTS FROM THE WRITTEN CURRICULUM

Before an analytical description of Ellen's codification of this curriculum is provided, a detailed description of the teacher artefacts that she suggested to effect actual pedagogical processes is necessary to provide the reader with a clearer picture of Ellen's symbolic representation of this curriculum.

Ellen used the AIDS syllabus copy, her teacher-made scheme/plan and a progress record book as the main teacher artefacts that she codified from the written AIDS curriculum. She used the current version of the Grade 6 AIDS syllabus from which she designed a scheme/plan. In her lesson scheme/plan, Ellen listed the topics from which a general aim was formulated, which read thus "To help children to the importance of healthy social relationships in a world of HIV/AIDS so that they may protect themselves from HIV infection." The teacher did a conceptual analysis of the topics that she had selected for the term by breaking them down and organising them into smaller, weekly teachable units. Weekly lesson objectives were formulated, which would be attained through some participatory and non-participatory teaching methods. Ellen conceptualised and suggested in her lesson scheme/plan the teaching media of pictures, group work cards, flash cards and the chalkboard. In her classroom she kept some HIV/AIDS pamphlets and posters. A

few teacher-made charts and some HIV/AIDS posters were mounted on the classroom walls.

6.4 ELLEN'S UNDERSTANDING AND CODIFICATION OF CLASSROOM PRACTICES FROM THE WRITTEN AIDS CURRICULUM

Key curriculum features that were identified from a document analysis of Ellen's scheme/plan helped me to describe Ellen's written mutations of the AIDS curriculum to address the first research question, namely "How do teachers understand and implement this curriculum?"

I will use the multi-layered approach to data presentation that I have already described to present my findings on Ellen's codification of her classroom practice, represented in her scheme/plan. Using a document analysis protocol, I collected information on Ellen's tentative symbolic version of the AIDS curriculum from her scheme/plan, which she would animate into actual teaching practice with her learners. Using the rudiments of content analysis, I counted the units of analysis of core interest in my study, namely the curriculum elements of themes, topics/content, teaching methods, and life skills that Ellen had included in her scheme/plan.

With the intention of determining the frequency of essential curriculum features, I utilised the benchmark of actual curriculum guidelines, or "criteria", from the literature, in my protocol. This would assist me to make sense of the curriculum and establish a general picture of Ellen's symbolic representation of the AIDS curriculum.

Table 6.1 shows the frequency of essential curriculum features that Ellen had codified in her scheme/plan, in relation to the specifications of the national AIDS curriculum, as envisaged by the curriculum developers

Table 6.1

Data on Ellen's symbolic representation of the curriculum

Item	Week												
	1	2	3	4	5	6	7	8	9	10	11	12	13
Theme	1	1	1	1	1	1	1	1	1	1	1	0	0
Topic and Concept(s)	1	1	1	1	1	1	1	1	1	1	1	0	0
Methods													
Discussion	1	1	1	0	1	3	2	3	2	3	2	0	0
Question and Answer	0	0	0	0	0	0	0	0	0	0	0	0	0
Role Play	1	0	0	1	1	0	0	0	0	0	1	0	0
Drama	0	0	0	1	0	0	0	0	0	0	0	0	0
Picture Codes	0	0	0	0	1	0	0	0	0	0	0	0	0
Devil's Advocate	0	0	0	0	0	0	0	0	0	0	0	0	0
Brainstorming	0	0	0	0	0	0	0	0	0	0	0	0	0
Explanation	0	0	0	0	0	0	0	0	1	0	0	0	0
Demonstration	0	0	0	0	0	0	0	0	0	0	0	0	0
Case Studies	0	0	0	0	0	0	0	0	0	0	0	0	0
Values Clarification	0	0	0	0	0	0	0	0	0	0	0	0	0
Futures Wheel	0	0	0	0	0	0	0	0	0	0	0	0	0
Song	0	0	0	0	0	0	0	0	0	0	0	0	0
Debate	0	1	1	0	0	0	0	0	0	0	0	0	0
Text book	0	0	0	0	0	0	0	0	0	0	0	0	0
Telling/story narration	0	0	0	0	0	0	0	0	0	0	0	0	0
Life skills													
Decision Making	0	0	0	0	0	0	0	0	0	0	0	0	0
Self-awareness	0	0	0	0	0	0	0	0	0	0	0	0	0
Communication	0	0	0	0	0	0	0	0	0	0	0	0	0
Negotiation	0	0	0	0	0	0	0	0	0	0	0	0	0
Critical thinking	0	0	0	0	0	0	0	0	0	0	0	0	0
Resistance to peer pressure	0	0	0	0	0	0	0	0	0	0	0	0	0
Refusal	0	0	0	0	0	0	0	0	0	0	0	0	0
Self-discipline	0	0	0	0	0	0	0	0	0	0	0	0	0
Empathy	0	0	0	0	0	0	0	0	0	0	0	0	0
Coping with stress	0	0	0	0	0	0	0	0	0	0	0	0	0
Problem solving	0	0	0	0	0	0	0	0	0	0	0	0	0
Social adjustment	0	0	0	0	0	0	0	0	0	0	0	0	0
Interpersonal relationships	0	0	0	0	0	0	0	0	0	0	0	0	0

Findings from Table 6.1 above show that generally the way Ellen codified her teaching practice in the scheme/plan portrays an understanding of the AIDS curriculum which is dissonant with curriculum developers' specifications regarding which essential features should be captured. It would seem that Ellen conceptualised and included those curriculum features that she was conversant with and understood to be fundamental, and left out the others. The many zeros appearing against curriculum items throughout the 13-week programme for the term testify to Ellen's gross omission of essential features. With the exception of themes, topics/content, and teaching methods, namely discussion, role play, debate, picture

codes, and drama, Ellen neglected to use many of the various participatory methods which she could have used to teach her pupils. While in terms of the curriculum element of content, she suggested the themes and topics/content as per the specifications of the written curriculum, Ellen seemed to be ignorant of the life skills which form the core of the AIDS curriculum. She rightly conceived of and stipulated themes as the broad ideas from which content is derived, and in her cognitive sense-making she seemed to understand role play and discussion as the key participatory methods for imparting content to learners. Yet even the discussion method would be used for more than half of the duration of the term.

By and large, Ellen's scheme/plan shows her understanding of the written curriculum in a manner that suggests a minimal, partial grasp of the essential elements that promote and facilitate interactive learning of life skills through a wide range of possible participatory methods.

6.4.1 LINKING ELLEN'S CODIFICATION OF CURRICULUM MESSAGES WITH INTERVIEW DATA

Following the phenomenological-adaptive and cognitive sense-making conceptual frameworks that I established as the lenses in my study, I contend that Ellen's oral views regarding the curriculum can be linked with her written views as her adaptive configurations of the way the curriculum is implemented. These perceptions can be presented thematically.

6.4.1.1 Document analysis Theme: Codifying an essentially cognitivist approach which minimally incorporates the learner-centred, interactive approach.

At the symbolic level of curriculum implementation, Ellen's configuration of the written curriculum seems to reflect an essentially cognitivist approach to teaching the AIDS curriculum, but with limited traces of learner-centred approaches and behaviourist undertones. The teacher conceptualised the content in terms of themes, topics and concepts which learners must master in depth over a relatively long period of time during the term. Repetition of the same themes carrying different topics and concepts signifies Ellen's interest in and emphasis on knowledge mastery

and intellectual growth of learners. For example, the theme “Relationships” is allocated seven weeks, “Health”, two weeks and “Human growth and development”, two weeks. This pattern is consistent with the cognitivist tradition.

Ellen’s obsession with a cognitivist thinking of impartation of factual knowledge as opposed to life skills development was confirmed in the interviews. She purported that her teaching embraced learners’ different levels of cognitive development, their assumed or pre-existing knowledge and choice and use of appropriate media. This approach embraces the traditional, subject-centred approach which is oriented towards mastery of subject matter. More confirmation that Ellen followed this approach was that she mentioned that selected topics which were appropriate to her learners’ information needs, with her core concern being “to give her pupils the right matter”. Ellen’s codification of the curriculum included revision work described in the last two weeks of the scheme/plan. It apparently represented Ellen’s intention to assess learners’ content mastery of the whole term’s work.

Although Ellen’s programme seemed to assume a cognitivist slant, in limited ways it depicted a learner-centred, interactive approach of lessons which would involve participatory teaching methods throughout the term. Interview data confirms this sensibility. Ellen claimed adoption of an interactive, learner-centred approach that includes participatory methods of role play and drama. As shown in Table 6.1 above, these two participatory methods predominantly featured throughout the term. They were complemented by the negligible appearance of debate, drama and picture codes which Ellen proposed in only few weekly lessons.

She thus seemed to understand the few participatory methods that she used as vehicles for imparting knowledge, and not for developing life skills in learners. She almost neglected altogether to include life skills in her scheme/plan, despite the explicit mention of life skills in the current version of the written AIDS syllabus that she had used for scheming/planning. When I asked her why she had neglected to include life skills, Ellen admitted that she had little knowledge of them. In the same vein, like Stella, Ellen did not incorporate into her tentative programme several other participatory methods that she could have used to develop in her learners the wide range of life skills that the curriculum specified. She appeared to be closed to the didactic connection between the participatory methods of Futures Wheel, Devil’s

advocate, case study, values clarification, and song, etc. and the life skills that these techniques develop, such as decision-making, self-assertion, self-discipline, negotiation, etc. Likewise, she did not know much about the participatory methods.

With the exception of the few participatory methods about which Ellen seemed to have an idea, the several other methods would just lie unexploited, as these seemingly did not exist in her cognitive frame. Similarly, the teaching of life skills as a dimension of content, which is emphasised in the curriculum, rather than mere mastery of factual knowledge, was grossly neglected. Thus, although Ellen conceived of a few participatory methods as being ideal for developing life skills, the fact that they were so limited in number meant that not sufficient attention was paid to the wide range of life skills that the curriculum intended teachers to develop in their learners.

Ellen's broad pedagogical approach to this curriculum also assumed some behaviourist undertones. By stating behavioural objectives, she seemed to be interested in having her learners demonstrate the behaviours they have learned as a result of instruction. It seemed as if Ellen believed in breaking down content into teachable units for learners to achieve the objective. Ellen broke the content down from the themes into more specific topics and concepts, thereby producing chunks of factual learning stimuli to which learners would respond programmatically, in weekly-focused instalments. From a behaviourist perspective, the learners are expected to successively form notions of what they have learned by shaping, as the teacher approves of correct learning behaviours or disapproves of them and makes learners correct unwanted responses. Ellen confirmed the idea of conceptual analysis in the interview, by saying that when scheming/planning, she broke down the content, proceeding from themes, which were expanded to topics, and then concepts. On this note, however, Ellen seemed not to be clear of the fact that themes are the broadest content ideas from which both topics and concepts are derived. All the same, what makes Ellen's programme generally cognitivist was her behaviourist concept analysis of content into learning experiences that emphasise intellectual actualisation, as opposed to the development of all human facets, that is, social, cognitive, emotional, and moral.

It can be inferred from Ellen's epistemological position which reflects a cognitivist spirit that the behaviourist approach that she incorporated was just a vehicle for putting across her academically biased programme.

6.5 ELLEN'S ACTUAL TEACHING PRACTICE

A narrative description of some of the pedagogical interactions that transpired in some lessons that I observed of Ellen's teaching can provide the reader with a clearer picture of her actual teaching. By offering empirical evidence to the reader of the actual pedagogical processes, the description places the reader in the context in which to understand the key analytical issues in the subsequent sections of this thesis.

In the first lesson, the teacher introduced the lesson by giving the learners pictures and asking them, 'What can you see in the picture?' At the start of the lesson, the learners worked as one large group of 50. They were seated in seemingly permanent arrangements of clusters of desks and benches to make 7 groups of on average, 7 members each. Ellen wrote some learners' responses on the board such as, 'I can see some friends talking'; 'I can see people drinking beer.' The teacher then asked the class, 'What are the qualities of a good friend?'

A few learners (up to about 20) were given different pictures by the teacher which they took turns to look at, individually. This took 5 minutes. Meanwhile, the other 30 learners were watching. Different learners responded to the teacher's question, 'What can you see in the picture?' They gave varied answers such as: (1) I can see two people drinking beer. (2) I can see a man sleeping on a bed. (4) I can see two people smiling at each other. In turns and on being appointed, some learners read out all the responses given by their mates which the teacher wrote on the chalkboard.

She then asked children, 'What topic do you think we are going to learn about today in this lesson?' Upon being appointed to contribute, a learner gave the response that the topic they would learn was about 'Friendship', as expected by the teacher.

Pacing up and down the front of the room, Ellen asked her class to tell her the qualities of a good friend to which one learner responded confidently “A good friend always listens to me and trusts what I do.” To this learner’s response, the teacher responded by disapproval.’ She asked the child, “Can your friend always trust you?” “That is impossible. “ It was evident from her response that Ellen was particular about “correct” responses from her learners as she told this learner to sit down. She thus wrote down some learners’ “correct” responses on the chalk board such as “A good friend is one who does not ask me to do bad things.”

In the next lesson step Ellen instructed her learners to list qualities of a good friend in their groups, which activity took 6 minutes to complete. When the teacher asked them to work as groups the learners did not move around and create groupings out of their own choice with other members. They all remained transfixed to their benches and desks where their group leaders led them in their tasks.

She explained to the learners what she personally conceived of as the qualities of a good friend, after which she called upon group leaders to read aloud their groups’ responses to the class in turns. This took about 5 minutes. In the process, Ellen praised her learners who gave “correct” responses and disapproved of “incorrect” ones.

The teacher then instructed her class to write down answers to the questions she had set on the chalk board individually in their exercise books. The writing activity took about 8 minutes. During the exercise, the teacher went round the class and marked some learners’ work.

Ellen wound up the lesson by revising with her class what they had learnt and asking them the question, “Do some of you have many friends or only one friend?”

She then told them that in the next lesson she would teach them about the dangers of having too many friends. She completed this lesson in 28 minutes.

A spectacular lesson from which we can glean pedagogical issues of analytical interest that prevailed in Ellen’s AIDS classes was her third lesson in which she was teaching about” Sex and Sexuality.”

In a seemingly routine organisational arrangement in Ellen's classroom, the learners initially worked as one large group at the start of the lesson and later, in smaller, fixed groups, confined to their desks.

To introduce the lesson, the teacher first asked the class, "How would a mother know whether a new-born baby is a boy or a girl?" To a learner's response, "We can see if it has a thing for a boy or a thing for a girl," the teacher remained cold and did not pay attention. She simply moved on to the next step where she declared the purpose of the lesson as "To learn about Sex and 'Sexuality.'" Ellen then asked the learners "What are some of the changes that come with sexual growth as children are growing up?"

Some of the learners that the teacher appointed to respond gave answers such as: (1) The penis becomes bigger (2) Hair grows in armpits and between legs (3) Girls have bigger hips. Most of the learners laughed at these responses and one boy stopped at the teacher's hard glance as he wanted to attract others' attention.

Looking rather indignant, Ellen called for order from her class to effect a firm control as some learners were now excitedly making a lot of noise.

Standing in front of the room, Ellen asked her class to mention some of the changes that occurred in humans as they were growing, while she listed them on the chalk board for everyone to see. As she listed them, she said, "I am not sure whether I have to let us talk of emotional or psychological changes." At this point I wondered whether or not Ellen doubted her knowledge of this topic.

She allocated the question and answer and explanation session about 7 minutes and then asked the class to work in their groups for them to discuss and list more examples. The teacher called upon group leaders to lead in giving feedback to the class as a way of integrating ideas from various groups. Due to shortage of time, only 3 groups were allowed the chance to report back on their responses.

In the next lesson step, Ellen drew a diagram and illustrated to the class the cycle of the spread of HIV from one person to many others who get the virus by "sleeping with John who slept with Tracy who sleeps with Abel who slept with Lisa, etc." She explained that the changes trigger sexual desires which pupils must suppress.

She then instructed the class to in their groups, discuss and suggest some ways in which young people can prevent the temptations arising from the sexual changes. She allowed them 4 minutes. When the class had completed this collective task, Ellen instructed the class to write tasks that she had written on the board into their exercise books. She gave them 8 minutes for this task. As the learners quietly wrote their individual tasks, the teacher went round the class and marked some children's work. To end the lesson, Ellen asked one girl to summarise what they had learnt before the whole class, which activity I understood to serve as a recapitulation of the key points in the lesson.

In some of the lessons that I observed of Ellen's teaching but did not fully describe in this section, the formalistic, transmission approach of teaching prevailed whereby Ellen took centre-stage in teaching-learning transactions.

6.5.1 Content

6.5.1.1 Lesson observation theme: Processing and reproduction of factual knowledge

It appears that Ellen's preoccupation with impartation of knowledge was firmly lodged in her cognitive structure, albeit her verbal claims of lessons which involve "acting, drama, and minimal written work". In the post-scheme/plan interview, she categorically asserted her intention of empowering her pupils with facts to teach their peers and community members who had little knowledge about AIDS, when she intimated:

I want them to impart the knowledge both at school and at home.

I became confused when I tried to imagine how young school pupils could be "small AIDS teachers" when they themselves need educational assistance. However, I inferred that, despite the purposes to which Ellen believed her learners could put the knowledge, her conceptualisation of the content of this curriculum as learners' mastery of knowledge seemed to have been firmly anchored in her cognition.

In all the five lessons that I observed Ellen teaching, her preoccupation with impartation of factual knowledge amply manifested in the learners and herself

processing and reproducing factual knowledge. In her first, second and fourth lessons, the early phases of Ellen's lessons predominantly involved definition, explanation, and clarification of concepts, just as with any other mainstream subject curricula.

In her first lesson, Ellen was teaching about the topic of "Friendship". She instructed the class to list factual pieces of knowledge around the topic, as a way of generating information. While the class was doing this, she set written tasks on the chalkboard, which the class later tackled in groups and individually. The same pattern persisted in subsequent lessons. In the second lesson, in which she taught the topic "Cultural issues", the teacher asked the class to "list down things that make up culture". In the third and fourth lessons, learners were asked to complete group and written tasks.

Underlying Ellen's preoccupation with the impartation of factual knowledge was her setting of a lot of written materials in her lessons for children to tackle. It was often observed that in her preferred linear, step-by-step lesson progression, she wrote many questions and notes on the chalkboard. In the way that is done with academic subjects, whose preparation demands presentation of written tasks before a lesson begins, Ellen neatly wrote pupils' individual written work tasks on the chalkboard. She covered up her writing with newspapers in anticipation of my arrival. An informal pre-lesson discussion that I had with her about this revealed that "as usual" she covered her work "to arouse a sense of curiosity in learners" of what they would learn in a particular lesson.

In the lessons, Ellen wrote down pupils' responses from the question-and-answer sessions for all to make notes in their jotters. She also drew diagrams to illustrate concepts. In the third lesson that I observed, Ellen seemed to enjoy the "intellectual gymnastics" that she got her class to do, where they used a diagram to illustrate causal links between certain sexual behaviours and the spread of HIV/AIDS. The academic engagements were then accompanied with individual written tasks in pupils' exercise books, which pupils wrote very quietly, while Ellen did some marking. Ellen espoused accurate and correct mastery of the content, as she went round marking pupils' work and warning pupils to use correct grammar. This was the case particularly in her third lesson, which was exclusively teacher-centred (didactic)

and transmission-oriented. It became abundantly clear to me that, even in a lesson where Ellen employed the teaching method of role play, written work was given.

6.5.1.2 Lesson observation theme: The teacher's legitimization of personal conceptualisation of knowledge

In contrast with the spirit of the interactive, life skills-based approach that is encouraged in the curriculum, that is, more talking about and experiencing of issues than impartation and mastery of knowledge, Ellen emphasised formal dissemination of content to pupils. She went further to impose her own conceptions of content as axiomatic truths, thus violating the prescriptions of the curriculum to accommodate as openly as possible children's views and opinions, with her acting as moderator and facilitator. Rather than imparting content as a vehicle to develop life skills, Ellen concentrated on imparting factual content. She consolidated this tendency by legitimating her own conceptualisation of "facts" about HIV/AIDS issues. This she did by disapproving of some children's "incorrect" responses or approving of "correct" responses, even in pieces of knowledge that demanded multiple interpretations of meanings. Literally invoking her academic authority as a fountain of knowledge, as it were, over her learners, Ellen firmly endorsed as unquestioned truths, personal claims that Ellen made that "Culture is what people used to do long ago" and "Culture is made up of beliefs".

In addition, she reinforced her personal legitimization of knowledge about this curriculum by imposing her own moral values on her learners. In the second lesson, she disapproved of a child's response "I think it is good, so that one can have many children" to her question "Is it good for a person to have more than one wife?" It would seem that to Ellen, the child's response represented an "unreasonable decision", which Ellen believed could "morally contaminate" the class. In the fourth lesson, Ellen resolutely intervened and moderated the script of some learners performing a role play, discouraging and removing formulations that she felt conveyed "immorality".

Seeming to forget that the learners were merely acting, she discouraged the play actors from acting out the part about beer drinking, and she chastised them by saying "*You don't drink, because you are school children*". The idea struck me that

the exercise of de-roling, where actors shake off the roles they have been playing and resume their real selves was outside of Ellen's teaching repertoire.

In all of the above processes, Ellen did not in her cognitive sense-making activity conceptualise the impartation of content in terms of life skills development accompanied by mastery of knowledge. Rather, she seemed to understand dispensing of content as enforcing and imposing understandings on learners, instead of allowing them to personalise and internalise content through active participation.

6.5.2 Pedagogy

6.5.2.1 The learning environment

6.5.2.1.1 Lesson observation theme: A constrained physical learning space

In Ellen's classroom, learners worked in a constrained working space during AIDS lessons. While for teaching and learning of mainstream subject curricula, such as Mathematics, Ellen's classroom seemed to be spacious enough, for the facilitation approach encouraged in the teaching of AIDS lessons, it proved to be too small.

In the context of the limited physical space that she had created, like Stella, Ellen employed the conventional grouping strategy of organising primary school learners for instructional processes. The early lesson stages involved seating the class as one undivided whole, after which the class was broken up into smaller collaborative groups of about seven members each, and finally the groups reverted to the class arrangement.

Notably, during group work, pupils worked at their small, crowded desks. In the third lesson, I saw in at least two groups that there were children that were competing for space, pushing each other off the desks as the group leaders distributed tasks that the teacher had set. At first, I wasn't certain whether it was Ellen's inability to organise her learners into appropriate spaces, or whether the room itself was too small. I soon discovered that there was abundant space at the back of the room, which was left unused. I was thus surprised by Ellen's lack of awareness of the possibility of either just taking her class outside, where more space was available, or

changing the arrangement of the furniture in the room, so as to create more space for the role plays.

Instead, the tendency was for children to crowd around the desks that they usually used and to become fixed to more or less permanent, unchangeable groups, with little room for movement. In the post-lesson observation interview, Ellen argued that she let her groups work at their usual places, because that was the norm of the class. She even conceptualised the nature and appropriateness of topics, as well as the amount of noise a particular lesson could generate, as determinants in deciding whether or not to go outside, where learners would be able to make as much noise as they pleased.

Like Stella, Ellen openly admitted the ineffective way in which she organised the learning of her pupils in AIDS lessons. Admitting to having a lack of knowledge of this important pedagogical aspect, Ellen stated:

And maybe on my part as a teacher, I did not have the knowledge that when I'm teaching some of these concepts in HIV, I should let the pupils sit to the positions where they think they can do very well in, in the HIV lessons.

Thus, by the formal teaching approach that Ellen seemed to have entrenched in her cognitive frame, the idea of designing a physical configuration unique to AIDS lessons was remote. This is because Ellen thought every lesson must somehow include some written work at a certain stage, in contrast to curriculum developers' conceptions.

6.5.2.1.2 Lesson observation theme: Some psychosocial and political interactional and teaching-learning transactional patterns

Lesson observation data revealed evidence that I theorised to describe the kind of interactional and teaching-learning transactional patterns that prevailed among learners and their teacher. To explore the psychosocial and political dimensions of the learning environment in Ellen's AIDS lessons, I employ the sub-theme "Restricted, closed interactional patterns".

Significantly, the generally restricted, closed psychosocial and political interactional patterns that prevailed in Ellen's AIDS classes differed from those in Stella's class.

A much more stringent and inflexible learning atmosphere punctuated Ellen's lessons, with the result that pupils seemed not to feel free to participate. The tense, formal psychosocial climate in the lessons tended to confine learners to collaborative engagements with the same group members, thereby depriving them of free cross-group interaction, which would enable cross-pollination of ideas. Although pupils enjoyed the privilege of mingling among themselves, within the limited spaces of their respective groups they seemed to engage in limited social encounters, in comparison with the recommended freedom of association that curriculum developers expect. Because of the teacher's strict discipline and control, pupils spoke in low voices during group activities, with the teacher pacing up and down the room, seemingly monitoring for any kind of indiscipline. In contrast with Stella, who was more relaxed and free with her class, only rarely did Ellen mingle with her pupils and share some jovial social moments.

The only lighter moments the class seemed to enjoy were the laughing and giggling during some of the teaching-learning transactions that were observed, which will be discussed later on in this section, which Ellen abruptly terminated in the interest of order. Confirming the stern psychosocial climate that Ellen promoted in her lessons, teacher-learner interactions during question-and-answer sessions were restricted to Ellen and the few actively participating learners. Whereas this may not have been planned this way by Ellen, she seemed not to make much effort to involve all of her learners, but interacted only with those who appeared interested. This is incongruent with the spirit and rhetoric of the facilitation approach to AIDS lessons, namely of creating and maintaining a free learning environment that allows participation by all, regardless of ability.

As the above processes occurred, I deduced that by selectively interacting with "interested" pupils, Ellen might not have realised the political connotations that such practices carry in terms of who has better access to learning opportunities than others. Furthermore, by assigning group leaders to distribute tasks and lead others in tackling them, subtle political messages seemed to be conveyed regarding power differentials between the leaders and the led. However, Ellen did not seem to see these dangers, as she engaged in this practice in a well-meaning spirit.

In view of the above evidence concerning the general learning atmosphere that Ellen created in her AIDS lessons, it can be concluded that Ellen's conceptualisation of this pedagogical aspect ran counter to the curriculum specifications. Furthermore, the expectation specified by the curriculum that the teacher should be a free, cheerful, and flexible facilitator and moderator of learners' learning experiences and a knowledge generator seemed to be problematic for Ellen.

Within the context of the above-mentioned processes and practices, the kind of cognitive and affective encounters that prevailed among learners and with their teacher was also revealed in the interviews. Ellen seriously applied her class to teacher-initiated learning activities, in a form that was reminiscent of the traditional academic approach applied to the mainstream subject curricula. Taking almost absolute control of the teaching-learning transactions, Ellen set her learners into the active cognitive encounters of thinking, reasoning, and responding to learning stimuli, both orally and in writing. I saw learners putting their heads together during group work as they completed academic tasks and collaboratively constructed their own role play scripts. There was much activity in all the lessons I observed, as the class would usually be given individual written work to do until the lesson ended.

The downside of the teacher and learners' cognitive encounters was represented by Ellen's cognitive efforts to drive effective learning among her learners. I saw her earnestly teasing out academic issues, providing her class with the explanations that she considered to be the most appropriate. In the face of the paucity of textbooks that the class had for this subject, Ellen thought out and formulated her own knowledge-based questions, which she wrote neatly on the chalkboard.

A cognitive blunder which Ellen made in one of her lessons was her interjection and moderation of some learners' role play scripts. It seemed as if Ellen's redirecting interventions reflected her continual re-visioning of what sort of content matter would be the best to steer her AIDS lessons. It seemed to be a compelling intellectual engagement in which the teacher restructured the content of the scripts into new versions, which she perceived as being part of the core pedagogical considerations of how best AIDS lessons should proceed.

Nevertheless, the above cognitive encounters occurred along with affective experiences, for both the teacher and her class. Evidence from lesson observations

highlights some emotional experiences of loud laughter and giggling, as well as blushing in distress by learners and the teacher during teaching-learning transactions. In the sense that she practically breathed her codified teaching practices into life, Ellen caused these emotions to happen. The various emotions were experienced in a strictly disciplined and controlled psychological environment. In the second, fourth and fifth lessons, some learners, who seemed amused with the content of the role plays and the references to sexuality, laughed derisively. As a gendered person living within the social context of an African culture, I found myself enmeshed in a socio-cultural situation which Ellen and her learners experienced regarding which things were permissible and which things were not permissible to laugh at. I felt that I was not a disembodied inquirer who could not appreciate why the little learners laughed at what, in Ellen's opinion, seemed not to be worth laughing at. I inferred that the issues that aroused the derision were culturally defined and were shared by Ellen and her learners in ways and attitudes that were not the same. For Ellen, it was not necessary for learners to laugh, and she therefore abruptly stopped the laughter.

The stopping of the laughter seemed to restrain the learners, who had been enjoying the more light-hearted moments from persisting in laughter over issues that Ellen felt they should regard as a reality. Furthermore, Ellen's disapproval of those responses she deemed inappropriate from the learners often tended to discourage learners from continuing to disrupt the progress of the lesson. Hence, on a face-value judgement, the learners' expression of happy emotions seems to suggest that Ellen was affording learners a free, relaxed AIDS learning environment, but in reality such happy emotions were experienced only momentarily, since the teacher seemed to be pre-occupied with the restoration and maintenance of order.

6.5.2.2 The teaching methods

6.5.2.2.2 Lesson observation theme: Non-participatory methods, which complemented a few participatory methods engendering knowledge transmission

In practice, a cognitivist pedagogy with some behaviourist undertones underpinned Ellen's actual teaching practice. She employed the behaviourist strategy of unpacking subject contents in a linear, step-by-step lesson progression, where she introduced the topic, declared the purpose of the lesson, and disseminated subject matter to the class. Ellen remarked thus:

Okay, normally I introduce the lesson to the children. After I've introduced the lesson I give them questions to work in groups, or whatever discussions they want, if it needs discussion. Or sometimes I engage them in role plays and question-and-answer.

Indeed, in most of her lessons, Ellen used role play as the dominant participatory method, which she usually complemented with the discussion method. She predominantly used these two interactive methods at the expense of the several other participatory methods. She seemed to employ these participatory methods for supplementing the explanation, question-and-answer, and lecture methods, which featured most prominently in her teaching.

Whereas the development of life skills could best be realised through the use of a wide range of participatory teaching methods, Ellen's limited use of only a few participatory methods, and her frequent use of non-participatory methods, were inimical to the development of life skills.

Radically departing from her claim in the interview that she espoused a pedagogy that favours discussion and "minimal written work", Ellen used only the participatory methods of role play, discussion, and picture codes in the lessons that I observed. She devoted very little or no attention to participatory teaching methods. For example, while she absolutely ignored the debate method that she had codified in her plan, she allocated the role play method minimal presentation time, and gave the groups, on average, only three minutes to play-act. I concluded that the method of role play was used in a ritualistic manner. Ellen probably used it because she had

known and understood it to be most popular and appropriate method for the AIDS curriculum.

Ellen did not seem to realise the fact that if used in earnest, in conjunction with other participatory methods, such as case study, Devil's advocate, Futures wheel and role play can effectively develop the life skills of negotiation, decision-making, and self-discipline, etc.

A significant finding which attests to Ellen's unique version of how role play and discussion function was discovered in this case. In striking dissonance with the conception of the curriculum developers, Ellen did not understand how these methods could be used to develop life skills. Rather, for her, the methods of role play and discussion functioned as student assessment tools, which tested whether or not learners were grasping the content matter.

By contrast, she comprehended case study as a method which is operationalised by actually taking the students out into the hospitals, so that they can see actual persons infected with HIV or AIDS, rather than having learners act out imagined situations. Phenomenologically, these pieces of evidence underline the choices teachers can personally make as cognitive sense-makers mutating a curriculum, and signify their peculiar ways of making sense of and responding to policy messages.

And, yet again, Ellen tended towards teaching methods and environments that suggested impartation of content and mastery of content by learners, following the traditional, didactic (teacher-centred) practices seen in mainstream subject curricula. Her bias towards this type of pedagogy is evident in her remark:

I'm saying mastery of concepts, because it seems as if very little is done about life skills. Maybe my teaching I, I just do it as the same I do Maths and English.

After I probed what Ellen's teaching was characterised by, she admitted that it did not follow the pedagogy envisioned by the curriculum developers.

From the foregoing evidence, it can be concluded that through the largely non-participatory teaching methods that Ellen used in her formal teaching-learning situations and her negligible use of a limited number of participatory methods in

transitory interactive situations, the didactic (teacher-centred), transmission-oriented methodology took precedence over the expected interactive approaches.

Having explored the complex ways in which Ellen displayed her understanding of the curriculum, symbolically and practically, I now turn to some personal and contextual factors that played out on Ellen's teaching practice.

6.6 SOME PERSONAL AND CONTEXTUAL FACTORS THAT PLAYED OUT ON ELLEN'S IMPLEMENTATION OF THE CURRICULUM

In the context of the theoretical framework of this study, I contend that the data suggests that in some ways, Ellen's personal attributes towards this curriculum, together with contextual factors, combine to shape and frame her teaching. Evidence from interviews conducted with her reveals some personal dimensions which played out on her practice of this curriculum. I theorise them as "teacher implementation characteristics". In order to address the first part of the research question, namely "What and how are the personal and contextual factors playing out on teachers as they implement this curriculum", I now explore teacher implementation characteristics with regard to Ellen.

6.6.1 Personal factors

6.6.1.1 Interview theme: Teacher implementation characteristics

Her inadequate knowledge of the content and pedagogy of the AIDS curriculum played out on Ellen as she implemented this curriculum. Ellen believed that the rudimentary knowledge that she possessed qualified her to teach at least a Grade 6 class. Like Stella, she openly admitted that she possessed only basic knowledge of many key curriculum elements. As evidence of her lack of knowledge of the curriculum, Ellen neglected to cultivate life skills in her learners, and she neglected to use several participatory methods. In the interviews, Ellen did not hesitate to admit the negative effects of her lack of knowledge on the quality of her AIDS lessons. She believed that her inability to create a learning environment unique to AIDS lessons and her neglect of life skills development were due to a lack of knowledge

on her part. She also confessed that her knowledge deficiency caused her to have a lack of confidence in some of her lessons.

To illustrate Ellen's ignorance of some key aspects of the curriculum, she said:

Ha-ha [laughs]; I can say I am not well versed in this subject compared to other subjects, like I've said, because it was a new thing for us.

Ellen tersely ascribed her inadequate preparation towards teaching the curriculum to the inadequate knowledge that she had of the curriculum.

In this study I was struck by the contrast between Ellen's attitude and her cognitive disposition towards this curriculum. Unlike Stella, Ellen cited her positive attitude towards this curriculum as the driving force of her implementation efforts.

In an interview, Ellen proudly declared:

I like the subject itself, because I am an affected person. Most of my relatives passed away because of ...this AIDS.

In an optimistic mood, Ellen intimated that her natural interest in this curriculum and her zeal to implement it were dampened by a lack of resources, "classroom press" that is, too many classroom teaching responsibilities, and a lack of time.

I felt humbled by Ellen's expression of intrinsic motivation to teach this curriculum, in spite of the challenges that she cited, and which I saw her contending with in her classroom. What struck me was Ellen's intrinsic motivation, which was so strong as to drive her to want to self-actualise in the field of AIDS teaching through further study. This was in contrast to Stella, who expressed negative feelings towards the subject of HIV/AIDS.

Confirming Ellen's positive feelings towards this curriculum was the zeal and enthusiasm with which she conducted her lessons, engaging learners in serious academic learning, and confronting them whenever they seemed to go off course. I saw Ellen running around, hands white with chalk dust, as she tried to write as much content as possible on the chalkboard which she thought would help her learners.

Ellen also held the view that it was her personal ability to motivate pupils that led to meaningful and successful AIDS lessons. The mutual connection between Ellen's

positive attitude and her motivation to teach makes me infer that for Ellen it seemed not to be so much about the many implementation challenges that one has to contend with as it was about setting about to assist pupils to master facts about AIDS in the best ways possible.

6.6.2 Contextual factors

6.6.2.1 Interview theme: Deficient teacher capacitation

It is undeniable that the knowledge and skills to implement a curriculum constitute a primary source of capacitation for a teacher to engage in curriculum change. In section 2.4.3 of this doctoral study, I alluded to the superordinacy of teacher knowledge and skills over other forms of teacher capacitation, such as financial, material and related resources, towards the task of teaching. But even where there are adequate resources, if the teacher has inadequate knowledge and skills to breathe life into the particular education policy, it is as good as if there were not sufficient resources.

Ellen intimated that she and her colleagues did not have adequate pre- and in-service teacher training towards the AIDS curriculum. Although she did not elaborate as much as Stella on the issue of inadequate pre-service teacher training towards this curriculum, Ellen felt that she was not capacitated with adequate teaching expertise for this curriculum. She believed that teacher training colleges were not training teachers towards this curriculum effectively, as they tended to pay more attention to the conventional subject curricula.

The inadequate teacher learning opportunities, such as staff development workshops, and the complete absence of educational resource persons to teach others about this curriculum were cited by Ellen as serious concerns. She mentioned that the lack of continued teacher professional development opportunities for capacitating teachers with the knowledge and skills to implement the curriculum at district and school levels was a serious barrier to educational change.

It can be inferred that the non-availability of continuing teacher learning platforms for teachers to share tacit knowledge concerning the curriculum effectively implies that

the dream of the development of communities of practice (COPs) emphasised in this study remains too remote to realise.

The issue of inadequacy of materials and resources for use by teachers and learners emerged as deficient teacher capacitation which tended to immobilise effective implementation of this curriculum in Ellen's class. Ellen expressed concern over the paucity of textbooks, teacher guides, and related curriculum materials that teachers could use to implement this curriculum effectively.

6.6.2.2 Some policy-related facilitative implementation dynamics

The findings of this study revealed a number of exogenous curriculum implementation factors at some levels of policy implementation that played out on Ellen as she was implementing this curriculum. I will now explore these implementation dynamics.

6.6.2.2.1 Macro-level policy-related facilitative implementation dynamics

Evidence shows that at the broad level of education policy implementation, the Zimbabwe Ministry of Education and the Curriculum Development Unit (CDU) seemed to make decisions and take actions that negatively affected Ellen's mediation of policy in her classroom. In section 5.5.2.2.3 I posited that at certain places, some people's inaction to support policy implementation to teachers is actually a practical implementation decision and action that affects teachers' response to policy messages.

Ellen lamented the inadequacy of curriculum materials and resources towards the implementation of the AIDS curriculum. She believed that the Ministry of Education's CDU was failing to make available to schools adequate textbooks and teacher guides. With a copy of the syllabus as the only available material to refer to, Ellen experienced difficulty in lesson preparation and teaching.

Ellen seemed to share a similar view to Stella on the Ministry and CDU's dissemination of a hastily and ill-developed AIDS curriculum. Ellen's more pronounced concern on this matter was the inadequacy of accompanying curriculum materials. Stella's concern went beyond the non-availability of complementary

materials to the issue of curriculum developers' failure to conceptually link the curriculum elements that make operationalisation of guidelines clear and easy.

According to Ellen, the paucity of curriculum materials which are congruent with the curriculum, such as textbooks, teacher guides, and ready-made media kits, caused teachers to have a fuzzy understanding of the curriculum and its pedagogic principles. She advocated the provision of curriculum materials with clearly laid-out instructional guidelines that make syllabus interpretation and teaching less difficult.

She remarked as follows:

Maybe they... must give us material that is laid down or broken down, so that the teaching of AIDS can be very easy. As of now, we just take it from the syllabus, and the syllabus is very shallow, and we have to find other means of making children understand.

Ellen's sentiments above are confirmed by the fact that in her lessons I saw her use only her scheme/plan of work and a copy of the syllabus as sources of information. She seemed to use personal intuition as her primary source of content matter to add flesh to the skeletal guidelines in her scheme/plan and her copy of the syllabus. I actually saw her writing written tasks for pupils straight from her head onto the chalkboard, and I reflected on the depth of the knowledge that she had to offer to her learners.

It seems that Ellen was aware of the aspect of depth of knowledge, as she describes the syllabus as "shallow". Ellen thus fulfilled the need to find other means of making her pupils understand the curriculum, by using charts on HIV/AIDS, which I saw on the classroom walls.

Adding to Ellen's implementation challenges was what she perceived to be the inadequate teaching time that the Ministry of Education had allocated for this curriculum. For Ellen, the 30 minutes allocated for the teaching of the AIDS lessons was so little that she ended up leaving out the energisers that is, some periodic warming up activities used during AIDS lessons to keep learners active, and life skills development, and she neglected to use participatory teaching methods. She perceived the time to be so little for role plays and drama that sometimes she was compelled to go into the next lesson or interrupt pupils in the middle of their

activities. Indeed, in her lessons, I noticed that she taught for much longer than the stipulated 30minutes.

For teachers to earnestly engage with change, facilitative motivation by way of supervision and monitoring is required. Ellen claimed that the Ministry did not visit schools to supervise and monitor whether teachers were implementing the AIDS curriculum properly. Ellen believed that in the absence of guidance, there was bound to be neglect of certain curriculum specifications by teachers and a lack of accountability.

6.6.2.2.2 Meso-level facilitative implementation dynamics

The findings of this study indicate the manner in which, by their actions and decisions, local education authorities at provincial and district level influenced Ellen's operations as she taught this curriculum. Below follows a brief description of the impact of these dynamics.

According to Ellen, the local education authorities provided very few and irregular staff development workshops at provincial and district level for teachers to meet and share practising ideas. Ellen noted that even when the few workshops were made available at school district level, only a few teachers were selected and allowed to attend from her school.

Furthermore, she claimed that there were no local school district resource persons that came to impart knowledge on the implementation of the curriculum to teachers in schools.

In view of the above scenario, it means that in the context of their limited knowledge, Ellen and other teachers lacked opportunities for continuing professional teacher development for the improvement of their teaching practice. By implication, the chances that they had to enhance their knowledge remained bleak.

6.6.2.2.3 Micro-level facilitative implementation dynamics

The degree of facilitative support offered to a teacher for implementation of a curriculum has far-reaching effects on how the teacher engages in cognitive sense-making and enacts education policy. Findings from this study indicate that in some ways Ellen's school context affected her implementation efforts.

At the school level, Ellen believed that she lacked sufficient facilitative support from her head who she said did not provide her with adequate curriculum materials, such as textbooks and teacher guides. This oversight made her teaching of the curriculum difficult. The head also did not initiate and provide school-based staff development workshops to support teachers with opportunities for learning how best to implement the curriculum. According to Ellen, only a few, irregular workshops were presented “once in a blue moon” at the school, and these were not very effective, Ellen maintained. Consequently, Ellen’s prospects of gaining knowledge from fellow teachers as they shared tacit ideas in collaborative teacher learning settings remained remote. Teaching the curriculum remained a struggle for Ellen.

According to Ellen, another issue that shaped and framed the kind of scheme/plan that she ultimately produced for her class was whether the plight of the infected children in her class was addressed. Coming as some kind of administrative, instructive advice from her school head, this obligation demanded that teachers select and handle AIDS curriculum topics in a way that prevented psychological harm being caused to infected or affected pupils. It can be argued that while this particular school policy would seem to mean well in its intentions, to implement it in the context of deficient teacher capacitation is a matter of contention.

6.6.2.3 Characteristics of the curriculum

The influence of the characteristics of a curriculum on a teacher’s cognitive sense-making and mutation, with regard to the intrinsic nature of the curriculum and its specifications, has so far been established in this study. Evidence shows that in some important ways, the extent of the clarity and the complexity of the AIDS curriculum played out on Ellen’s interpretation of policy messages from this curriculum, as well as her actual teaching practice.

Data from the interviews conducted revealed that, while Ellen found the AIDS curriculum specifications to be generally clear, she did not clearly understand how to operationalise some of the topics into teaching. She said that she rated the clarity of the curriculum at “50%”, as only some of the topics and teaching methods were clear to her. Her sentiments to this effect were:

I will just say 50%, because some topics, yes, I understand them clearly, but at times, some I find it very hard to understand them, so I'll just say 50% of it I cannot interpret the syllabus.

When I probed her on this assertion, Ellen admitted having inadequate knowledge of, and hence incompetence in, the topics “Misconceptions” and “Sexuality”, which she experienced as tricky and complex to tackle. For her, the participatory teaching methods of role play and discussion were relatively clear, provided she allowed the pupils to use their vernacular.

In addition, Ellen believed that the clarity of some elements of this curriculum was obscured by inadequate provision of curriculum support materials, such as teacher guides, for teachers to read and interpret the curriculum. Thus, Ellen’s observation illustrates how misleading it can be to have a superficial understanding of the policy messages appearing in the syllabus, if this is not supplemented by more substantive information, in the way of curriculum support materials.

What confirms the lack of clarity that Ellen had concerning some curriculum features was her misinterpretation of the participatory methods of role play, discussion, and case study. For Ellen the first two methods were vehicles for student assessment, not for life skills development. Contrary to curriculum prescriptions, she conceived of these methods as tools for testing students’ understanding of knowledge. Ellen’s misconceptions about the methods of role play and discussion are consistent with her admission of having a lack of clarity concerning the assessment procedures of this curriculum. Attributing her lack of clarity regarding student assessment procedures to a lack of materials with relevant information, Ellen admitted:

I am not very clear on the assessment. I think something must be done about this.

For her lack of clarity regarding some key curriculum elements, Ellen blamed the Curriculum Development Unit (CDU) for producing, adopting, and disseminating a prematurely developed curriculum. She believed that this mistake caused her to have a fuzzy understanding of some aspects of the curriculum during teaching.

In terms of the degree of complexity of the curriculum, Ellen experienced the AIDS curriculum to be difficult and demanding in the area of the participatory method of

case study. She argued that case studies were difficult to implement in the classroom, as the environment was not practical enough. She maintained that case studies were most appropriate when they allowed teachers and learners to visit hospitals to practically see cases of people infected with HIV or AIDS.

In terms of Honig's model, the foregoing evidence illustrates the extent to which teachers as cognitive sense-makers on the ground engage in assigning meanings to policy messages in their classrooms, as they operate in specific context spaces that produce certain implementation behaviours and experiences. Here is a classic case where, owing to some unique exogenous factors that may play out on teachers' work, those meanings that have been espoused by policy makers can be changed into new interpretations in the classroom.

6.6.2.4 Learner attributes

Interviews with Ellen revealed learners' personal attributes in relation to the AIDS curriculum as an important exogenous factor that played out on her planning and teaching. According to Ellen, people infected or affected with HIV or AIDS displayed a negative attitude towards this curriculum. She said they tended to lack interest in the curriculum.

She said:

At times pupils are not interested in the subject. If you teach them about AIDS, they tend to be reserved. This affects my teaching.

This piece of evidence links closely with the negative affective experience that Ellen had when she was tasked by her school head to make instructional decisions when planning and teaching that recognised the psychological plight of those learners infected or affected with HIV or AIDS.

Another important learner attribute that Ellen felt played out on her teaching relates to the perceived lack of maturity of the Grade 6 learners. Ellen believed that these learners were emotionally too immature to confront the AIDS curriculum, and that this complicated the choices that she had to make with regard to content.

This issue seems to speak to the complex emotional nature of this curriculum and its affective impact on both the teachers and their learners as key players responding to

curriculum policy messages. As it is an integral part of the central phenomenon of interest in this study, this implementation complex will be discussed in the following chapter.

6.7 TEACHER IMPLEMENTATION ENCOUNTERS

In an attempt to address the third research question of this study, namely “What are teachers’ practical experiences with the implementation of this curriculum?” I conducted rigorous content analysis of the data and produced the theme “Teacher implementation encounters”, which I explore below. I integrated and distilled the data describing the property of teachers’ actual contact with the implementation of the curriculum to capture Ellen’s major challenges, opportunities, and coping strategies. Ellen’s responses discussed in the previous section on contextual factors are here reiterated as challenges. Essentially, I categorise the encounters into positive and negative cognitive and affective aspects, and I describe the coping strategies that Ellen employed to deal with these encounters.

6.7.1 Some negative implementation encounters

Ellen acknowledged the lack of availability of curriculum materials such as textbooks and teacher guides as one of the major challenges that she had to deal with in her change efforts. She claimed that she had to juggle around ideas to come up with meaningful subject matter to teach and had to scrounge for information from the skeletal syllabus and her lesson scheme/plan. As stated in section 6.6.2.2.1, in some lessons Ellen engaged in formulating intuitively her own pieces of knowledge as written work tasks for her learners. She claimed that the paucity of curriculum materials consistent with the curriculum specifications caused her to have a fuzzy understanding of the content and pedagogy of the curriculum. To address this problem, Ellen solicited some AIDS charts and pamphlets from a local clinic health worker. She also resolved this problem by incorporating subject correlation teaching, that is, by teaching AIDS topics contained in other subjects. In the face of the paucity of resources, Ellen said that she coped by being resourceful, going out to look for materials, and finding her own ways of making children understand the subject matter.

Another major challenge that Ellen personally experienced was using inadequate supplemental materials such as textbooks, to mutate an already poorly developed curriculum. She felt this made the teasing out and formulation of subject matter a daunting intellectual task. This is confirmed by her sentiments that some topics were quite difficult and that she experienced the clarity of the curriculum to be “50%”.

The lack of collaborative teacher learning infrastructure also emerged as a major implementation challenge for Ellen. It seemed to create a knowledge vacuum in Ellen concerning the pedagogy and content of this curriculum. The lack of staff development workshops for long periods of time is probably what made Ellen alleviate her teaching difficulties by inviting a resource person to help her teach some lessons for her.

Poor pre-service teacher preparation and continued professional development of teachers towards the implementation of the AIDS curriculum served as a major challenge for Ellen. Although Ellen was rather terse about teacher preparation in her responses in the interviews, she acknowledged that the local colleges were doing a disservice to teachers by placing a greater emphasis on teacher training for mainstream subjects at the expense of the AIDS curriculum. In this regard, she took issue with the way generalist teachers were being tasked with handling the “half-clear” curriculum. She recommended that the AIDS curriculum be taught by specialists.

Besides the cognitive discomfort that comes with deficient content knowledge and teaching skills due to poor training, lack of confidence was a negative implementation experience for Ellen. She stated:

So if I as a teacher don't know much, maybe there are some [pupils] who have this knowledge, at home through their mothers or their fathers. I stand to be someone who is not fully equipped in front of them.

Ellen coped with the above challenges by sometimes skipping lessons that she found she had little knowledge in. Actually, Ellen said she experienced a sense of difficulty when teaching those topics that she perceived as unclear and did not have much knowledge about. She seemed to experience discomfort with topics that she experienced as difficult. In the lesson on the topic “Alcohol abuse” that I observed, I

was surprised by Ellen's bold admission of having inadequate content knowledge about the categories into which certain drugs fell. She actually consulted me on whether Mandrax and cocaine were in tablet or powder form. Similarly, she disclosed that she experienced discomfort with the topics on sexuality.

Interviews with Ellen also revealed inadequate teaching time as a major challenge that confronted her in her class. She intimated that her lessons did not promote the development of life skills because "the time was too short". Similarly, she disclosed that she usually deliberately avoided using energisers during role plays, because in the limited time at her disposal they used up the time for concept teaching. Confronted with a lack of knowledge and inadequate teaching time, Ellen had to engage in the cognitive sense-making activities of thinking out and choosing which curriculum elements to emphasise and which to relegate to the periphery in her teaching.

It has so far been established that Ellen considered pupils' personal attributes in their learning of the AIDS curriculum as an important contextual factor that played out on her. Ellen argued that in her class she had to contend with the psychological and emotional problems that infected or affected pupils might face during AIDS lessons. She stated:

Another influence is the affected children. You find when you are imparting knowledge about this; they seem to think of whatever happened to them in life.

When I probed her as to whether this actually happened, she confirmed that "once or twice" a certain child started crying during an AIDS lesson. Mired in this web of complexes of emotions, Ellen seemed not to despair, contrary to what would be expected. She claimed in an interview that she treated AIDS issues positively, following the deaths of many of her relatives from the pandemic. Ellen seemed to be so resilient that she would reassure her affected learners to soldier on. In an interview, she claimed that she usually gives the affected learners psychological support through using examples of others who have experienced similar problems. In her efforts to deal with the emotional challenges that potentially threatened her personal affective domain, Ellen sometimes felt so much empathy towards vulnerable learners that she would behave in a humane way towards them. She

indicated that sometimes she experienced empathy towards these affected learners and tried to accommodate them by abandoning some sensitive AIDS lessons and teaching something different. Such escape leverage made it possible for her to persist with the programme.

Confirming the affective nature of the AIDS curriculum is evidence to the effect that Ellen, like Stella, experienced some negative feelings as she implemented the curriculum. Although she had a positive attitude, Ellen said that she felt reluctant to openly discuss sexuality-related issues by using terms such as “penis”, etc. with pupils, whom she said sometimes can be naughty and rowdy if such terms are allowed to be used. It came not as a surprise to me when she confessed that she avoided using such terms with children in my presence, considering my gender. It was apparent that entertaining learners’ responses, such as the one that a little, chubby, jocular boy made, namely “The boys’ penis grows bigger”, without checking the trend of such responses would become chaotic for Ellen. Amid the wild, uncontrollable laughter and giggling of the children and their scratching one another for attention, Ellen started looking rather perplexed and serious.

While Ellen did not openly claim that such language usage was cultural taboo, the way Stella did, she seemed to imply that it was. She could not take this from her class any longer. She had to deal with the frenzy of emotions, and this she did in a subtle but resolute way. She cast a hard, talking glance to another boy who wanted to continue to draw attention away from the class, by giggling and laughing continually. This was a kind of negative reinforcement intended to stop the behaviour. In effect, it was visible in the lesson that Ellen’s emotions had changed to indignation. Nevertheless, curriculum designers prescribe that the topic must be taught.

After probing Ellen on this matter, she claimed that she coped with this complex matter by what I theorised as “Submerging open usage of terms through escape leverages”. She said she gave learners charts to discuss sexuality-related issues and let them use sensitive sexuality-related terms in her absence, as a means to get the topic going.

Ellen also seemed to be uncertain about the emotional dynamics of sensitivities to language usage in AIDS lessons in respect of its psychological effects on learners.

She said there was nothing wrong with her language usage and that she did not perceive that anyone felt offended during her lessons.

While she expressed a lack of awareness of sensitivities in the interviews, little did Ellen realise that in the second lesson I observed, she might have caused some emotional discomfort in learners who come from polygamous families, as she told her class that polygamous behaviour caused the spread of HIV/AIDS. She thus seemed oblivious to the possible discrimination and stigmatisation that learners from such families might face.

By implication, the above evidence points to the complex web of emotional challenges that HIV/AIDS educators such as Ellen have to contend with in the implementation of this rather sensitive curriculum.

6.7.2 Some positive implementation encounters

Ellen enjoyed some positive experiences that were related to cognitive and affective dimensions of adapting the AIDS curriculum during her implementation of this curriculum. She had at her disposal opportunities to solicit resources from other people in her vicinity, to improve her teaching. She intimated that she used her initiative to approach the local resource person at the clinic close to her school, for some materials.

As this person had often extended help, Ellen was confident that she would continue to supply her with pamphlets and charts, as well as to provide her with technical assistance through teaching some topics for her. However, one would think that instead of Ellen inviting someone to teach for her, learning how to teach some of the work herself would have been a more sustainable opportunity.

Ellen also acknowledged the availability of considerable knowledge which she sometimes obtained from a resource person at her school. She cited a colleague whose wife was a nurse who gave him valuable information on some AIDS topics, which he, in turn, shared with Ellen at school. Ellen claimed that sometimes the colleague would visit her class to teach some topics for her. Cognitively this added to Ellen's knowledge structures concerning this curriculum.

Another source of positive cognitive encounters that Ellen enjoyed was her experience of clarity when she used the participatory methods of role play and discussion with her pupils and she allowed them to use their vernacular. Although she felt cognitively challenged by a lack of clarity with regard to some curriculum features, Ellen said she experienced a positive sense of active cognitive engagement with her pupils when they used their mother language.

Finally, Ellen experienced cognitive gratification in encounters where she taught those topics that she felt were easy for her. She argued that she understood and performed well in themes that were culturally relevant and with which she was familiar, such as “Child abuse”.

In the ways mentioned above, Ellen seemed to experience cognitive satisfaction from knowledge-related experiences. At the same time she experienced positive affective experiences.

There is evidence from the sub-theme “Positive emotional implementation encounters” which points to Ellen’s positive feelings with the implementation of the AIDS curriculum. She acknowledged feelings of excitement when teaching topics that she was familiar with, and she asserted that these themes made her feel comfortable to teach. This evidence resonates with the positive attitude that Ellen claimed she had towards the AIDS curriculum.

It can be concluded from the evidence on Ellen’s experiences with the implementation of the curriculum that the challenges, opportunities, and strategies that teachers encounter to effect educational change are so complex that they cannot afford to be ignored. Teachers can be mired in complex cognitive and emotional experiences, which may promote or frustrate educational change efforts.

6.8 ELLEN’S SUGGESTIONS FOR IMPROVING PRACTICE

To address the final research question, namely “What do teachers suggest as the ideal ways of improving the implementation of this curriculum?” I explore Ellen’s suggestions thematically.

6.8.1 Transforming implementation proficiency

I conceptualised and categorised the emerging suggestions Ellen offered as “Transforming implementation proficiency” at the teachers’ personal level and at the broader policy levels of curriculum implementation. I explicate the various suggestions below.

6.8.1.1 Enhancement of personal instructional proficiency

It was highlighted in section 6.5.2.1.1 that the learning environment that Ellen created and maintained for her learners in the AIDS lessons was generally out of sync with the pedagogical expectations of the curriculum. Ellen also openly admitted her personal inadequacy in this regard.

Ellen thus admitted that personally she needed to improve the learning environment by modifying her grouping strategies and the organisation of the learners. She also believed that if in future she could take her class outside, to enjoy a more open and free physical space, learners’ interaction with one another would improve, thereby enhancing the quality of the learners’ learning.

Besides improving the organisation of her learners into a learning environment that was appropriate to AIDS lessons, Ellen believed that she and her fellow teachers needed to boost their knowledge of life skills. She also proposed that if teachers could emulate her in personally engaging resource persons to teach their classes and to supply curriculum materials, they could be capacitated to implement the curriculum more proficiently.

6.8.1.2 Policy-level transformation of implementation proficiency

Evidence from interviews conducted with Ellen revealed a lack of curriculum materials that were congruent with the syllabus and a shortage of textbooks for pupils as serious barriers to the implementation of this curriculum. To address this problem, Ellen believed that the Curriculum Development Unit (CDU) should develop and supply sufficient curriculum materials, such as teacher guides, textbooks, and ready-made media kits that are consistent with the written curriculum framework.

The CDU develops school curricula and simply filters them down to teachers, without consulting or involving them in the construction of the curriculum. Ellen

recommended that the Ministry of Education ensure that the CDU invites teachers' inputs in curriculum development at the grassroots level of schools. She argued that if teachers could be consulted on the kind of curriculum materials they deem workable, implementation proficiency could be enhanced.

By implication, Ellen seemed to lobby for a bottom-up approach by policymakers that incorporates teachers in the design of the AIDS curriculum. The idea is that since teachers are familiar with the learning needs of their learners, they are better placed to collaboratively determine the most suitable materials for learners, together with curriculum planners.

Ellen also highlighted inadequate teacher preparation opportunities as a major obstacle to the implementation of the AIDS curriculum. Criticising the Ministry of Education for a lack of concern in this regard, Ellen suggested that increasing the number and frequency of staff development workshops could improve teachers' implementation knowledge and skills. In turn, this could transform implementation proficiency.

Like Stella, Ellen seemed to believe that the current arrangement of generalist primary school teachers teaching the AIDS curriculum tends to weaken its implementation effectiveness. She recommended that AIDS education specialist teacher preparation be introduced in teacher training colleges. She argued that the colleges should offer AIDS education as an area of specialisation. She maintained that specialist teachers with the expertise to handle this delicate curriculum should be deployed in all primary schools in the country.

When high-profile policymakers and implementers in the higher echelons of the education system provide various forms of facilitative implementation support to teachers, they make significant strides towards addressing the critical question of teacher capacitation. Ellen also felt that more supervision and monitoring of the implementation of this curriculum were seriously needed. When support is accompanied by an intensification of pressure to implement from the Ministry of Education, in the form of supervision, much can be realised in the way of enhancing implementation proficiency.

6.9 A SUMMARY OF CHAPTER 6

In Chapter 6 I presented the key findings of the research participant Ellen Kubudirira's understanding and implementation of this curriculum. Some critical personal and contextual factors that played out on her practice and how they framed and shaped her teaching were explicated thematically. The chapter also revealed Ellen's perceptions of her practical experiences with the implementation of this curriculum and provided her suggestions for improved practice. Chapter 7 presents the account of the final case in this case study.

CHAPTER 7

PRESENTATION OF THE DATA

CHARLES JAMBO'S CURRICULUM IMPLEMENTATION

7.1 INTRODUCTION

The presentation of findings on the third and last case of this study is borne out of more or less similar document analysis, lesson observation and interview data analysis procedures employed in the previous cases. For this reason, I need not elaborate on them. As in the previous cases, I shall first describe Charles's biography and his context, and then thematically present the key findings on each research question.

7.2 A PROFILE OF CHARLES

Aged 46 years, Charles Jambo is a fairly tall, thick-set man. Dark in complexion, the jovial teacher has an authoritative voice that tells the story of an energetic, confident teacher.

The middle-aged man teaches one of the Grade 6 classes of Blackridge Primary School. He usually takes either Grade 6 or Grade 7 since he is regarded in high esteem as a competent teacher who prepares pupils for the national Grade 7 examinations and actually produces reputable results.

A holder of an Advanced Level School certificate, Charles graduated as a fully trained teacher from a local teacher training college of high reputation. He is also one of the most actively involved AIDS education teachers entrusted with co-running the school's Aids club. At the request of his school Head, Charles has often attended the very few life skills staff development workshops that were held in his school district. Charles has taught the AIDS curriculum for the 10 years teaching experience that he has accumulated.

An interesting attribute about Charles is his zeal for personal educational furtherance. He had gone into his second year of undergraduate studies with UNISA for a Bachelor of Arts degree, until 2008, when he abandoned the venture as a result of financial problems. He feels dismayed by this mishap and still vows to continue when his first-born daughter completes her university studies.

Besides contributing so immensely to his school's academic well-being in the Midlands Province's Lower Gweru school district, Charles has often carried the school to sporting excellence as its Sports Director.

7.2.1 The context in which Charles Jambo teaches

7.2.2.1 The community

Blackridge Primary School is located near the fifty kilometre peg along the Gweru-Dhimbamiwa road, in the Lower Gweru Rural Area of Makepesi. To a large extent, Blackridge is embedded within a broadly fragile macro-economic context similar to Stella's and Ellen's schools, which are also located in the Midlands Province.

The surrounding community of this school is a rural setting with a population of about 700 000 rural folks of different walks of life. Being a close-knit nuclear settlement, the community populates mainly Ndebele-speaking residents, and a few Shona speaking families. In order to earn a living, these locales from which Blackridge enrolls its pupils, engage in the economic activities of market gardening and fishing, as there is a medium-sized dam nearby. Those folks who are not formally employed live on the above stated economic projects, as well as gold panning and subsistence farming. Residents in formal employment include teachers, Health and Agricultural workers and a few men and women who work in the Gweru city's commercial sectors and manufacturing industries. From the considerable number of well-built brick houses thatched with asbestos sheets that are dotted all over the locality, one would hesitate to classify the community as a poor rural settlement in the sense of the ones that display signs of abject poverty, commonly found in Africa.

Like any other community, Makepesi accommodates people with diverse cultural and religious backgrounds. Most residents belong, to the Christian denomination of the Seventh Day Adventist church. Of interest to note is a clinic next to the local

shopping centre, which provides the residents with health services, including HIV/AIDS preventive and medication programmes.

7.2.2.2 A profile of Blackridge School

Enrolling more than 700 pupils, Blackridge Primary School was founded by its current responsible authority, the Seventh Day Adventist Missionaries, in 1964. The single-session missionary school falls into the category C which represents the poorly-resourced schools. It is under the supervision of the Midlands Provincial Education Directorate whose influence on it is mainly ensuring quality control of the performance in teaching and learning programmes. For infrastructure development and maintenance, and provision of materials and resources, the responsible authority takes charge.

The school has seven classroom blocks built of brick and cement and roofed with corrugated zinc sheets. What shows that Blackridge is a poor school is that it is not being well maintained as the windows and floors were in a general state of disrepair.

Each of the seven blocks houses three rooms for each stream of the Grades 1 to 7 classes. To the western side of the school, there are four large rectangular ablution blocks of pit latrines, three for the learners and one for the staff.

To the immediate left-hand side of the school gate, there is a large rectangular block on whose walls is drawn a big world map, and the inscription, "Administration Offices", appears. In this block are housed the school Head's, Deputy Head's and Teacher-in-Charge's offices. A spectacular feature is a fish pond next to the school's main water tap, between the administration block and the grades one to three classrooms. Generally, this rural school does not have enough textbooks. Six pupils share a textbook. In addition, for the AIDS curriculum there were grossly insufficient materials.

7.2.2.3 The context of Charles's classroom

Situated in the furthest block away from the main gate, Charles's classroom is rather not as large and spacious as urban school classrooms. According to Charles, the reason for this could be that missionaries built the rooms for a very small population

then. Even when renovations were constantly done the same classroom sizes were maintained.

Inside the rectangular room, there is furniture consisting of forty-two single desks and chairs for the forty-two pupils. Each desk has a space for the storage of children's books. Charles organised the seating arrangement of the class into seven groups of six members each, according to the criterion of pupils' mixed ability.

Charles's table and a chair are found in front of the classroom, next to the chalkboard. On the walls, a variety of charts are displayed, including some on HIV/AIDS. Most of the times, the cracked floors in this room are well-polished. The display of children's work under each subject's section is testimonial of the fact that Charles's class is serious with their work.

7.3 A DESCRIPTION OF CHARLES'S LESSON DOCUMENTATION AND TEACHER ARTEFACTS FROM THE WRITTEN CURRICULUM

A detailed description of the teacher artefacts and documents that Charles used importantly provides the reader with a clearer picture of the teacher's conceptualisation of the means by which he would enact this curriculum.

The key teacher artefacts that Charles used to adapt this curriculum and deliver it to learners included the current version of the Grade 6 AIDS syllabus, his teacher-made lesson scheme/plan and a progress record book. From the syllabus and related curriculum materials, Charles pre-specified the curriculum elements which would steer the pedagogical interactions. These included a general aim which focused on "Helping children to gain knowledge and awareness in cultural influences on one's behaviour and to develop a caring attitude to their peers in difficult circumstances." The broad aim was from the topics that Charles had selected and listed for the term. Through a conceptual analysis, Charles broke the topics down into smaller weekly units. From the topics both participatory and non-participatory teaching methods, were selected, indicating the teacher's intention to employ both talking and academic activities. The teaching media that Charles suggested included teacher-made charts, pictorial charts on HIV/AIDS issues from the Ministry of Health, group work cards and flash cards that he would use to facilitate learning.

Charles recorded some scores based on the learners' individual written work into the progress record, to show the performance of the learners in this subject curriculum.

7.4 CHARLES JAMBO'S UNDERSTANDING AND CODIFICATION OF CLASSROOM PRACTICES FROM THE WRITTEN AIDS CURRICULUM

To address the first research question, "How do teachers understand and implement this curriculum?" with respect to the third case of this study, I will describe Charles's symbolic mutation of the curriculum, and his actual teaching practice. Document analysis data from Charles's scheme/plan serves to provide a general picture of his symbolic conceptualisation of lesson delivery and classroom practice of the AIDS curriculum. The findings on Charles's understanding and codification of teaching practice are presented in a table of information and narrative description.

Table 7.1

Data on Charles's symbolic representation of the curriculum

Items	Week												
	1	2	3	4	5	6	7	8	9	10	11	12	13
Theme	0	0	0	0	0	0	0	0	0	0	0	0	0
Topic and Concept(s)	1	1	1	1	1	1	1	1	1	1	1	0	0
Methods													
Discussion	1	0	1	1	1	1	0	1	1	0	0	0	0
Question and Answer	0	0	0	0	0	0	0	0	0	0	0	0	0
Role Play	1	1	1	1	1	1	0	1	1	1	0	0	0
Drama	0	0	0	0	0	0	0	1	0	0	0	0	0
Picture Codes	0	0	0	0	0	0	0	0	0	0	0	0	0
Devil's Advocate	0	0	0	0	0	0	0	0	0	0	0	0	0
Brainstorming	0	0	1	1	0	0	0	1	1	0	0	0	0
Explanation	1	1	0	0	1	0	0	0	0	1	0	0	0
Demonstration	0	0	0	0	0	0	0	0	0	0	0	0	0
Case Studies	0	2	0	4	0	0	0	0	0	1	0	0	0
Values Clarification	0	0	0	0	0	0	0	0	0	0	0	0	0
Futures Wheel	0	0	0	0	0	0	0	0	0	0	0	0	0
Song	0	0	0	0	0	0	0	0	0	0	0	0	0
Dialogues	0	1	0	0	1	1	0	0	0	0	0	0	0
Debate	0	0	0	0	0	0	0	0	0	0	0	0	0
Text book	0	0	0	0	0	0	0	0	0	0	0	0	0
Telling/story narration	0	0	0	0	0	0	0	0	0	0	0	0	0
Life skills													
Decision Making	0	0	0	0	0	0	0	0	0	0	0	0	0
Self-awareness	0	0	0	0	0	0	0	0	0	0	0	0	0
Communication	0	0	0	0	0	0	0	0	0	0	0	0	0
Negotiation	0	0	0	0	0	0	0	0	0	0	0	0	0
Critical thinking	0	0	0	0	0	0	0	0	0	0	0	0	0
Resistance to peer pressure	0	0	0	0	0	0	0	0	0	0	0	0	0
Refusal	0	0	0	0	0	0	0	0	0	0	0	0	0
Self-discipline	0	0	0	0	0	0	0	0	0	0	0	0	0
Empathy	0	0	0	0	0	0	0	0	0	0	0	0	0
Coping with stress	0	0	0	0	0	0	0	0	0	0	0	0	0
Problem solving	0	0	0	0	0	0	0	0	0	0	0	0	0
Social adjustment	0	0	0	0	0	0	0	0	0	0	0	0	0
Interpersonal relationships	0	0	0	0	0	0	0	0	0	0	0	0	0

Findings from Table 7.1 above indicate that generally Charles codified the written AIDS curriculum in a way that represented a much closer approximation of the specifications of the AIDS curriculum than Stella and Ellen. Like Stella, Charles did not stipulate the themes and life skills.

Although Charles conceived the content of this curriculum in terms of topics and concepts and not themes and life skills (as shown by the zeros), he made sense of the curriculum teaching in terms of participatory teaching methodology.

Throughout the whole term, (except in weeks 7, 11, 12 and 13 which he devoted to revision), Charles proposed a considerable variety of participatory teaching methods. It can be inferred from Table 7.1 that the role play and discussion participatory methods predominantly featured in Charles's tentative teaching programme, followed by brainstorming, case study, dialogues and drama. However, Charles excluded the many more participatory methods of Futures Wheel, Devil's advocate, values clarification, picture codes and energisers. By suggesting non-participatory methods such as explanation, Charles seems to have conceptualised the notion of incorporating teaching approaches that also favour exposition of knowledge to his pupils.

From the evidence, it can be inferred that Charles did not understand the AIDS curriculum in terms of content description that incorporates themes as broad ideas from which topics and concepts derive. Neither did he symbolically represent on paper the content dimension of life skills that learners would personalise and explicitly demonstrate during lessons. In his cognitive sense-making endeavours, Charles did not envision codification of any of the popular life skills such as negotiation, communication, self-discipline, peer pressure resistance, etc., which pupils could possibly talk out in the participatory activities he suggested.

It is therefore difficult for one to assume that, at the symbolic level of implementation, once these critical elements have not been codified, the teacher really understands them in a similar sense as envisioned by curriculum developers, and that he or she will employ them with pupils in actual lessons. The possibility of forgetting them cannot be dismissed.

It can also be inferred that, from the prominence Charles accorded the participatory methods, he seemed to be attracted to learner-centred, interactive approaches that favour life skills development, which aspect he anyway did not symbolically propose. Much as he seemed to have acquired a reasonable understanding of the AIDS curriculum as one that centres on learners' active, hands-on-minds-on learning experiences, Charles somehow missed the point of life skills as the real core of this curriculum, at the symbolic level of implementation.

7.4.1 LINKING CHARLES'S CODIFICATION OF CURRICULUM MESSAGES WITH INTERVIEW DATA

For a fuller picture of the way Charles understands the implementation of this curriculum at the symbolic level, his codification of the curriculum messages is presented in conjunction with interview data. Findings are thematically presented.

7.4.1.1 Document analysis theme: Codifying an essentially learner-centred, constructivist, interactive pedagogy with cognitivist and behaviourist undertones.

Document analysis of Charles's scheme/plan produced a broad theme which shows that Charles's planning essentially reflected an essentially learner-centred teaching approach that promotes the teacher's and learners' construction of knowledge as well as the use of interactive, participatory activities. Though limited in number, the participatory methods that Charles suggested dominated the entire term's work.

The teacher repeatedly proposed the participatory methods of role play, discussion, dialogues, brainstorming and case Studies, leaving out other key participatory methods (See Table 7.1). The proposal of these participatory methods, together with statement of some behavioural objectives that carry specific participatory methods, suggests Charles's full awareness of the relevance of interactive, learner-centred approaches to implementing the AIDS curriculum, and his intention to employ them. He re-emphasised the value he placed on participative approaches when he stated:

...So it's very important to include as many activities as possible.

By accentuating the participatory methods every week, Charles seemed to understand mutation of this curriculum to entail teaching-learning processes that allow learners to construct knowledge by themselves. He seemed to conceptualise didactical practices in which learners collaboratively brainstorm issues, construct role play scripts and dialogues, and play-act them. These methods are suitable for learners' collective construction and presentation of reality in the classroom.

Although the pedagogy Charles proposed largely slants towards the interactive teaching approaches, Charles did not seem to lose sight of the incorporation of

teaching methods that support transmission of knowledge to the learners. His proposal of the explanation methods testifies Charles's intention to clarify information to his learners, thereby emphasising the impartation of knowledge and learners' content mastery.

The cognitive undertones in Charles's pedagogy are reflected in his emphasis on learners' mastery of content and repetition of the same topics for some weeks. For example, he listed the topics, "Facts and Myths" and "Care and Support," for three and two consecutive weeks, respectively. A cognitivist approach emphasises the learners' development of the intellect and mental structures, and consolidation of concepts for in-depth understanding of content.

In his conceptualisation of content, Charles's sense-making seemed to lean towards some behaviourist undertones of teaching practice. His scheming/planning involved conceptual analysis of content, into small, teachable learning stimuli for learners to respond to and master incrementally in weekly instalments. In keeping with the suggestion in the syllabus that teachers are encouraged to formulate behavioural, measurable objectives, the behavioural objectives confirm this inclination. They demand the shaping of learning experiences in the learners into desired competences over time, through attainment of specific observable behaviours.

Like Stella and Ellen, Charles did not describe the ideal learning environment in his programme. It can be deduced from the foregoing evidence that generally Charles's tentative term's programme seemed to reflect an interpretation that supports the use of both the interactive and transmission teaching approaches.

7.5 CHARLES'S ACTUAL TEACHING PRACTICE

For the reader to discern the broad patterns that emerged from Charles's actual teaching of this curriculum, he or she needs to get a glimpse of the empirical pedagogical processes and interactions from the fifth lesson that I observed of his teaching, through a detailed narrative description.

Charles introduced the topic with a song, “Nhaka Sandibonde.” Together with their teacher the learners sang the song whose message was, ‘Wife or husband inheritance does not necessarily mean sexual relations for about 3 minutes.

The teacher then declared the purpose of the lesson as being “To learn about those cultural practices that may expose and affect males and females with HIV/AIDS infections.” The class listened attentively as the teacher declared the topic.

He asked the class, “What do you understand by the word culture?” Some of the learners raised their hands and responded to the teacher’s questions during the question-and-answer session. Charles explained and defined the term “culture” after which he went on to ask the learners to tell him certain things that their culture expects females to do for males especially in marriage.

The teacher went round the classroom and picked on those children who raised their hands to respond to questions. To address the lingual challenges of some learners who sat quietly and never attempted at making responses, Charles implored his class to use vernacular where they found it hard to air their views in English. Apparently wary of the need to make the lesson discursive, he gave ample chances to most learners to give their views and even remarked, “Sometimes we do not have correct or wrong answers- all your answers are important.” The question-and-answer session took about 5 minutes.

In a bid to motivate his learners, Charles invited children to applaud for other learners’ contributions. He asked the learners the question, “What are some of the cultural practices which have to do with being male or female that can cause HIV/AIDS in some people?” He wrote down some of the learners’ responses as: (i) a man is expected to give his prostitute money. (ii) a woman he is expected to satisfy her man with sex. (iii) A wife is not supposed to refuse sex at the husband’s demands. Most learners laughed derisively at the responses.

The teacher then disbanded the class into groups and encouraged them to choose whom they preferred to work with. He assigned the groups to tasks as follows:

Group 1: organize a debate on the pros and cons of the cultural practice of wife or husband inheritance. Groups 2 and 3: organize a debate on the subject, “Men should not be opposed to any demand which they make on women.”

Groups 4 and 5: Read the case study, “Sarah is in form two and lives with her brother-in-law, Albert. One day when Sarah’s sister is away, Albert demands that because it is a cultural practice that a younger sister to a man’s wife can be just also a wife, they should share bed together with Albert. Groups 6 and 7: Role Play: A leader of the “VaPositori” religious sect tells a 14 year-old girl in his congregation that he received a vision from heaven that she should be his sixth wife.

The learners freely intermingled with each other from one group to the other to consult on what each group would present. Upon the teacher’s instructions, the group leaders led others in the planning and presentation of group activities.

In groups, the learners discussed and planned their own activities as directed by the teacher, in groups, after which they made their presentations to the class. It was interesting to note that most learners laughed derisively during the presentations and most of the time they were excited and joyously noisy.

For purposes of enhancing active participation, Charles kept encouraging the class to communicate in the vernacular so as to air their views. As expected in a participatory AIDS lesson, Charles allowed the learners to use sexuality terms openly. He also freely used the terms during discussions with pupils. However, he seemed to ignore the possible harm that the discussions from the role play, involving certain types of people e.g. “A polygamist with six wives” could cause on learners who could possibly belong to such types of families. He did not de-role his learners of the labels that had been assigned to them as actors.

The teacher concluded the lesson by consolidating a few situations with learners in an overall discussion which took about 5 minutes. As it involved a wide array of the different participatory and non-participatory teaching methods and activities, this lesson took more than 40 minutes.

In sections 7.5.1 and 7.5.2 an analytical description of Charles’s practice is undertaken, which involves the use of data from lesson observations triangulated with interview data.

7.5.1 Content

7.5.1.1 Lesson observation Theme: Learners' processing and reproduction of knowledge and personalisation of curriculum experiences depicting life skills development.

The proposed content coverage Charles codified, excluded the life skills (although his actual teaching incorporated them), themes as well as the teacher's activities on providing care for the HIV/AIDS infected/affected learners in his class, as recommended by the curriculum specifications.

In Charles's lessons, I observed very little deviation of his teaching from his tentative programme codified in his scheme/plan. In addition, his actual teaching did not radically depart from the pedagogy reflected in his plan. The learner-centred approach combined with the transmission approach that Charles practically demonstrated in the AIDS lessons I observed of him teaching resonate with the teaching philosophy that he orally claimed.

Like Stella and Ellen, Charles did not explicate themes as an essential content aspect to be stressed in AIDS lessons. Much as I had thought that at some points of each of his lessons, Charles would explicitly pinpoint to his class the themes subsuming the week's topics and concepts, he never did that. While during interviews, the teacher rightly conceived of themes as broad ideas from which topics and concepts derived, he never exposed them to his class for them to form a broad idea of what they were learning about. For example, when learners learnt about the topic, "Sex and sexuality", they would not gain the broad idea of "Human growth and development", as the overarching idea from which the specific facts about this topic came.

Evidence from the lessons that I observed revealed that Charles placed a premium on the impartation of factual knowledge to his learners. Consistent with his sense-making of content in terms of topics and concepts, Charles ran through his programme by setting his learners onto academic tasks in which they generated and reproduced knowledge together with their teacher, and by themselves.

This pre-occupation was evident in a number of ways. Mostly in the early stages of the lessons, learners gave verbal responses to Charles's oral questions during

question-and-answer sessions. The teacher wrote the learners' oral responses on the chalkboard and encouraged learners to make notes in their jotters and books. In the first lesson, learners and their teacher literally processed and reproduced knowledge, in the context of the exclusively didactic explanation, question-and-answer approach. In this lesson learners hardly embarked on participatory activities that could involve them in social interactive learning as expected in AIDS lessons. Rather they concentrated on group and individual written tasks set by the teacher.

In striking contrast to the above approach which favours learners' content mastery and knowledge impartation by the teacher, most lessons also focused on the learner-centred approach. In four of the five lessons I observed, I saw Charles's teaching being dominated by the use of a reasonably wide selection of the participatory methods of role plays, case studies, song, dialogues and letters to donors. In these activities there was far less of the processing of factual knowledge and much more of the processing of life skills. Learners only did written work in small stints but concentrated more on the collective, interactive personalisation of HIV/AIDS issues through acting out and discussing them in the above stated methods. The persuasion to stress content impartation only re-surfaced at moments when Charles recapitulated the participatory methods and related activities with main points which he jotted onto the chalk board and also asked his class to write notes.

Interestingly, within the context of the interactive approach, Charles disregarded verbal explication of life skills to his learners as they undertook participatory activities, in which several of them were depicted. However, intrinsically, the participatory methods practically tapped a wide range of life skills such as communication, negotiation, self-awareness, self-discipline and etc.

As much as Charles's epistemology seemed to embrace life skills as integral to this curriculum, in practice his teaching resonated with it. He claimed that he espoused learner-centred approaches that equip learners with life skills and further expressed a somewhat transcendental conception of life skills development in learners. His zealous claim of the possibility to develop in learners "life skills that go beyond the ability to live intelligently in a world of HIV/AIDS to the ability to confront general life competently" is consistent with his emphasis on them.

In the interview, Charles argued that participatory methods were meant to capture learners' attention, and to cater for their unique interests and differences. He did not seem to understand and accentuate their core value of serving as vehicles for tapping life skills in learners.

Despite the fact that Charles's teaching seemed to underplay the content dimension of themes, it actually incorporated more of the activities that promoted the life skills. It included the application of learner-centred, interactive teaching methods that embraced to a reasonable extent, learners' mastery of knowledge, and to a greater extent, learners' personalisation and internalisation of HIV/AIDS issues through active involvement in discursive tasks.

Furthermore, most lessons that I observed displayed the teacher's fairly balanced conception of the interactive participatory and the didactic transmission approaches, with the former taking greater precedence. The lessons stressed both content mastery and life skills. In the interview, Charles confirmed his epistemological thinking which seemed to inform this pattern when he said:

Yeah, both. I think children mastered the content, which is quite important as well, but more importantly, life skills. So I think I would say both, the mastery of content and the enhancement of life skills.

In light of the close fit that exists between Charles's pedagogy reflected in his scheme/plans and his actual teaching of this curriculum, it can be concluded that the teacher's teaching emphasised the development of life skills. His approach radically differed from Stella's and Ellen's largely transmission-oriented pedagogy. It is now to the detailed description of Charles's pedagogy that I turn.

7.5.2 Pedagogy

7.5.2.1 The learning environment

7.5.2.1.1 Lesson observation Theme: A free, unrestricted, physical learning space

Using the traditional grouping approach of organising learners into working units, Charles initially worked with the class as a whole group, disbanded it into smaller units for collective tasks and regrouped the learners to the initial formation. He effectuated a much freer, much more open physical learning environment than Stella and Ellen. In the indoor lessons, Charles created free working spaces in the classroom, moved his pupils out of their desks and spread them all over some open classroom spaces where they could freely process the learning tasks. Flexible deployment of pupils into small sizeable groups for the execution of learning tasks in abundant space took the semblance of the facilitation organisation of learners as per curriculum conventions. In some of his lessons, I followed Charles and his class which he took outside to organise their tasks for presentations in unrestricted open spaces, after briefing them on their respective interactive activities.

It was visibly evident that this pattern of organising the environment was in congruence with this teacher's claim that he usually created a free, unrestricted physical working space where all children could see or participate in activities in AIDS lessons. On this, he stated thus:

Yah, I think there were quite a number of pupils...and they had enough space to, maybe do their activities, everyone could see during our report backs, what the others were doing.

In addition to a conducive physical learning space, the psychosocial atmosphere also constitutes conditions under which the teaching-learning practices and processes in AIDS lessons occur. It is to the psychosocial dimension of the pedagogic aspect of the learning environment which was theorised in this investigation that I now draw the reader's attention. I thus explore this issue through the theme:

7.5.2.1.2 Lesson observation Theme: Open, free and unrestricted interactional and transactional patterns, in a sound psychosocial environment.

In resonance with his epistemological claims described in section 7.5.2.1.1 Charles practically created and maintained a free, open and unrestricted learning environment in which he and the pupils enjoyed a healthy rapport. It was evident from the freedom that the learners enjoyed to express their views that Charles attempted at implementing the facilitation strategy of fostering, sound interpersonal relationships among the lesson participants. Pedagogically, Charles encouraged the promotion of a sound relationship of trust and understanding with his learners in the AIDS lessons I observed of his teaching. I thought that at times the approach tended to drive some pupils into licentiousness since during one of the outdoor lessons, Charles had to caution two boys who wanted to fight. Charles seemed to be too democratic to inculcate discipline in those pupils who, in their childlike nature, wanted to draw others attention unnecessarily.

An important feature that emerged in this context was the freedom of expression of emotions that Charles nurtured in the lessons. Just as in Stella's class, some pupils enjoyed the liberty to giggle and laugh and joyously draw one another's attention to issues of excitement in the presentations, unconstrained by the call for discipline from their teacher. Unlike Ellen, Charles did not unnecessarily 'guillotine' his pupils from whatever activities they engaged in except when he drew their attention to points of importance.

It was also interesting to note that pupils' interaction with their teacher reflected Charles's willingness to as much as possible, bring every child to focus on activities, with him acting as facilitator. He stood in front of the classroom, at a strategic position where he accosted all pupils to actively participate, in a fashion reminiscent of the facilitation approach recommended by the curriculum. What he did not conceptualise at such points of the lessons was the need to institute a horse-shoe formation and to orally de-role the usual classroom roles of "teacher", "group leader" or "class monitor", for everybody to become an equal participant in the activities. In this regard, he did not visualise the potential political dynamics that could show in lessons where the participants worked on unequal power terms. Further corroborating this pattern was his delegation of power and authority to group leaders

whose normal classroom roles had not been temporarily stripped of them for the facilitation purposes.

Charles also promoted a sound teacher-learner interaction by freely mixing and intermingling with learners. He shared views with learners, gave them guidance, as well as fostered healthy social relationships among learners, whom he allowed to freely communicate and share ideas with members from different groups. In this way the class experienced cognitive encounters in a free, usually informal atmosphere, mostly in the lessons involving role play, dialogues and case studies.

Thus, visibly evident in the lessons were the cognitive activities to which both the teacher and learners earnestly committed themselves. Charles could be seen busy trying to think out and select activities from the meagre curriculum materials, perusing for information from books and setting tasks for his learners on the chalk board. He also set himself into the intellectual undertaking of guiding pupils during the construction of their scripts for discursive presentation to the class. Conversely, his pupils collaboratively completed written tasks as well as worked out scripts and set up strategies for presenting to the class in as best ways as possible, their role plays and related participatory activities.

In the process, Charles encouraged pupils to freely express their opinions, and to respect others' perceptions. He even allowed them to use vernacular. I heard him saying:

Sometimes we do not have wrong or totally correct answers. In AIDS lessons, all your answers are important.

Thus by trying to accommodate various learners' views, following a somewhat constructivist thinking, Charles apparently interpreted the role of teacher as facilitator and moderator of knowledge. Indeed, Charles confirmed this teaching-learning transactional pattern when he categorically intimated that:

...What I am talking about here is a situation where the teacher, may be tries to..., to..., what can I say? To ... to be the fountain of knowledge, telling the children everything, then later on asking them to write. I, I, I prefer a situation where teacher and pupils share ideas because this is a common problem which is affecting everyone.

By implication, the teacher as cognitive sense-maker, read and understood the processing of teaching and learning activities as transactions best adapted to informal psychosocial conditions in which classrooms serve as venues for deliberating freely on HIV/AIDS issues. By escaping from the role of 'the fountain of knowledge', Charles seemed to underscore the opinionative nature of this curriculum. He seemed to respect the idea that teachers and pupils as policy actors intersubjectively engage in the assignation of meanings to an enigmatic curriculum, whose policy messages are subject to multiple interpretations.

Another concern about the learning environment, which emerged in the study relates to the teacher's sensitivity to language usage that could potentially cause psychological harm to learners. Although Charles nurtured an enabling learning environment, he did not seem to be clearly cognisant of the need to check and act on language usage that could fuel discrimination and stigmatisation among learners. As was the case with Ellen, Charles was insensitive to the language usage. For example in the lesson when some pupils acted out on a polygamous religious leader who was exposed to HIV/AIDS infection risk, Charles did not check whether or not some pupils in his class could belong to such families. On probing him further on this matter, the teacher intimated that in his lessons no one used such psychologically threatening language, and that, if there was any, since his pupils lived and learned together with some infected mates, they would not take offence. As well, Charles freely used sexuality terms and allowed pupils to do so. On this matter, he intimated that if used in English language, the terms were easy but caused problems if used in vernacular.

7.5.2.2 Teaching methods

7.5.2.2.1 Lesson observation Theme: Essentially participatory methods complemented by some non-participatory methods.

Charles used the participatory methods of role plays, case studies, dialogues, debates and letters to engage learners in social interactive learning activities where they processed ideas and issues. Consequently, pupils actively engaged in personalising experiences by the facilitation approach of acting out and discursively

communicating core messages contained in the topics on HIV/AIDS, in a much less academic, but more of an informal, social-interpersonal-relations fashion. The teacher complemented the interactive approach with the explanation, question and answer and the lecture methods to impart factual knowledge to his learners. Charles articulated the aforementioned teaching strategies in the context of a philosophy which he verbally expressed in interviews, thematically couched thus:

A pragmatist, constructivist, learner-centred epistemology with cognitivist and behaviourist undertones, stressing both knowledge and life skills development.

By combining the participatory and non-participatory teaching approaches, Charles incorporated life skills development and subject matter mastery in his teaching. It thus emerged that in four of the five lessons I observed of Charles's teaching, the interactive, participatory teaching approach took precedence over the transmission, non-participatory teaching methodology. It is however interesting to note that despite his positive response to the curriculum and its implementation requirements, Charles expressed a negative attitude towards it during interviews.

During interviews, Charles provided evidence suggesting that he strongly held a pragmatic conception of the AIDS curriculum. The epistemological claim was confirmed in his actual teaching through placing a high premium on the use of a variety of activities for learners who learned in a free, relaxed psychosocial atmosphere. He espoused a pragmatic understanding whereby learner-centred teaching strategies are employed to equip learners with life skills through collaborative social learning activities, which skills they ultimately apply to solving HIV/AIDS problems in real life situations. By emphasising varied participatory methods, his pragmatic conception translated into AIDS lessons that suggested a platform for the teachers and learners' construction and generation of knowledge.

Underscoring the role of participatory methods as central to learners' understanding of issues, and the implementation of the whole curriculum, Charles visualised the possibility and promise of the therapeutic service to which teachers can put participatory methods, when dealing with HIV/AIDS vulnerable learners. For him, if used in a friendly environment that conduces trust relationships, the role plays,

drama, dialogues, case studies and debates can help HIV/AIDS infected or affected learners to forget about their problems.

Charles further argued that when learners engage in collaborative construction of ideas in a free learning environment with minimal interruption in their learning attempts by the teacher, successful implementation of this curriculum can occur. According to him effective implementation could occur if the teacher took precautions to avoid teaching techniques that may fuel psychological harm in learners.

Evidence also pointed to cognitive undertones expressed in this teacher's contention about ideal ways of teaching this curriculum. He conceived of learners' cognitive growth and general intellectual actualisation as one of the central roles of the AIDS curriculum. Charles did not idealise learners' mental growth exclusively in terms of equipping learners with factual knowledge. By setting store in the use of a good number of participatory methods, though silent about life skills in lessons, he seemed to respect the development of the skills, unconsciously.

Finally, in concurrence with Charles's epistemology, the behaviourist undertones depicted in his actual pedagogy are amplified in his verbal sentiments. He argued that he conducted a conceptual analysis of content by breaking down the work into teachable units "so that they could be taught in thirty minutes lessons." Hence, in keeping with the behaviourist approach, Charles adopted the idea and actual practice in lessons, of designing and organising content and activities into weekly chunks of learning stimuli learners would engage with in successive instalments of thirty minutes. A similar strategy was adopted by Stella and Ellen.

Generally, it can be concluded that, Charles's epistemology practically translated into a pedagogy that portrayed pragmatic, cognitivist, as well as learner-centred teaching approaches.

In summary, the foregoing evidence on Charles's understanding and implementation of the AIDS curriculum generally underpins his personal adaptation as an individual sense-maker operating in his classroom. In the next section I address the second research question, on what and how personal and contextual factors were playing out on Charles as he was implementing this curriculum. I am guided by my contention that a myriad of human-generated factors, both endogenous and

exogenous to Charles explain his practice, and that the decisions and actions of other people elsewhere shaped and framed Charles's mutation of, and response to policy in certain ways.

7.6 SOME PERSONAL AND CONTEXTUAL FACTORS THAT PLAYED OUT ON CHARLES'S PRACTICE

7.6.1 PERSONAL FACTORS

7.6.1.1 Teacher implementation characteristics

In the interviews, Charles's expression of teachers' and his negative attitudes towards this curriculum invited a discrepant analysis (Merriam, 2009). Charles's expression of a negative attitude towards the curriculum disconfirmed my expectation of his expression of a positive attitude, granted his considerably positive response to the curriculum's actual teaching specifications. Upon probing him further during extended interviews and member checking, Charles maintained that despite the fact that he implemented this curriculum as expected by its specifications, he perceived this curriculum to be an additional burden to him. He felt that teaching this curriculum added more teaching responsibilities to him as an already hard-pressed examination subjects' class teacher. This sentiment was also shared by Stella. The pressure of work that he and fellow teachers experienced caused uncommitted, hurried and haphazard scheming and planning, and the production of a superficial and insufficiently developed tentative programme for their classes. The ill-conceived and insufficiently developed scheme/plans often became very difficult to operationalise into teaching practice.

Clearly illustrating the impact of his negative attitude towards the AIDS curriculum on his personal commitment to its enactment, Charles remarked:

Yah, my approach towards the subject, my understanding of the subject, my attitude towards the subject, do you like the subject or it's just, hah, one of those subjects which has to be done? If it is like that then it's going to affect

your performance, you are not going to give yourself to it whole-heartedly. So the attitude of the teacher affects,..., my attitude affects the way I teach.

From the above remark, it can be inferred that Charles simply taught this curriculum from compulsion, not intrinsic need. Further confirming his poor commitment to the curriculum was Charles's relegation to the periphery and the resultant superficial scheming of the curriculum, "just to produce a working document because it is needed." By implication, Charles believed he marginalised this curriculum by giving it a 'half-hearted' commitment, preparing for its teaching in such a manner that produced scheme/plans that served as mere official formality.

He simply devalued this curriculum in preference for, and emphasis on the examinable subjects, namely English, Mathematics, Shona/Ndebele and General Paper. On further probing him, Charles blamed his personal attitude towards this curriculum on the learners' attitude, implying that the learners' general indifference to this curriculum 'contagiously' influenced his level of commitment to its implementation. In the literature, the idea of the AIDS curriculum as highly emotional and attitudinal is not new.

Besides Charles's negative attitude towards the curriculum, his inadequate knowledge of the content and pedagogy of the curriculum played out on his implementation. Thus though it applied to all the three participants in unique ways, inadequate knowledge emerged as a common personal attribute they shared in relation to this curriculum.

Due to inadequate knowledge and lack of competence to teach this curriculum, Charles skipped some of the topics. Admitting his tendency towards teacher isolation, Charles blamed himself for his complacency of shunning collegial consultation with fellow teachers. According to him, this isolation perpetuated his working knowledge deficiency for implementing the curriculum. The teacher intimated that his lack of in-depth understanding of the curriculum often caused perennial production of "shallow schemes" over the years. It also adversely affected his ability to understand the curriculum, resulting in a hazy grasp of life skills, and oversight in stating the content aspect of caring for his HIV/AIDS vulnerable pupils.

A typical case clearly demonstrating Charles's inability to clearly comprehend some curriculum guidelines was that in his oral explanation of the pedagogical issues of this curriculum, he confused the activities with methods. Most probably unconsciously, Charles used the participatory methods which he conceived as activities without realising that the activities he engaged in with pupils, such as role plays, dialogues and case studies are actually described as participatory methods by the curriculum planners. This is a practical case in which, at the classroom level of curriculum implementation, the issue of language could impact teachers' interpretation of policy messages described in semantics whose meanings they perceive in a conceptually different manner.

Charles attributed his limited ability to interpret the syllabus to his inadequate pre-service teacher preparation. As a result, there were poor quality lesson preparation and delivery in certain topics. Difficulties in tackling some perceived hard-to-teach topics emerged as a curriculum implementation challenge which Charles ascribed to his lack of 'fingertip knowledge.'

Associated with Charles's knowledge-related and attitudinal personal attributes was what he perceived as a rigid, stereotypical adherence to historically entrenched teaching epistemologies which caused him to resist educational change. The teacher argued that it had taken him too long to undergo a paradigm shift regarding the implementation of this curriculum, owing to his propensity to stick to 'the old school.' At the inception of new curricula, the problematic of change leaders' exertion of greater efforts on structural aspects of the school systems rather than effecting a change in teachers' ways of practice (so-called cultural change) has been widely documented in literature (Fullan, 2001:37).

7.6.2 CONTEXTUAL FACTORS

7.6.2.1 Deficient teacher capacitation

Research evidence from interviews with Charles revealed that deficient teacher capacitation hamstrung his change efforts. According to Charles, the inadequacy of resources and materials such as syllabus copies, textbooks and teachers' guides presented him with difficulties in implementing this curriculum. He intimated that the

limited resources, coupled with lack of knowledge tended to incapacitate teachers from effective implementation. Charles blamed the Ministry of Education and CDU for their failure to provide teachers with the curriculum materials for use as this resulted in hurried, haphazard scheming into which little thought was put.

Charles bemoaned the insufficient availability of syllabus copies and back-up curriculum materials as causes of his partial and unintegrated understanding of the curriculum guidelines. He thought he experienced information deficiency. In his school, the absence of teacher learning opportunities and activities such as demonstration lessons exacerbated his knowledge deficiency. The teacher believed that the Ministry of Higher and Tertiary Education contributed to the enormity of the knowledge defect by continuing to provide poor teacher training towards the AIDS curriculum.

Regarding the provision of in-service teacher preparation, Charles argued that the few irregular staff development sessions held in his school district were usually ineffective. They equipped teachers with piecemeal, incoherent content and working knowledge. On this note he said:

When we attend those life skills workshops...you see the problem is you are called once, next time another group is called. So I think they should be continuous, these life skills workshops, there should be continuity, development. If you did stage 1, say for example, you should go to the next phase so that you develop a more comprehensive knowledge of the subject.

Whereas in the literature the value of providing continuing professional teacher development programmes (CPTD) as platforms for collaborative teacher learning has been emphasised (Coburn and Stein, 2006:30; Edwards, 2012:26; Steyn, 2011:160), for Charles the teacher capacitating implementation tool is scant. By implication, the scarcity of the workshops narrows any chances for the establishment of teacher learning infrastructures that could ultimately evolve into communities of practice.

Charles believed that time constraints added to the enormity of deficient teacher capacitation in his implementation of the AIDS curriculum. According to Charles, although the thirty minutes teaching time for the day was adequate for him, the

paucity of time for lesson preparation made him sometimes omit some key curriculum elements due to hurried scheme/planning. While I had thought that most of Charles's lessons exceeded the allocated thirty minutes because the time was too short, for him it was not much of teaching time shortage as it was about thorough preparation and the ability to manage the lesson time and lesson progression.

7.6.2.2 Community's indifferent attitude to the curriculum and general HIV/AIDS activities

A general observation I made during my visit to Charles's school was its location within the context of a community with the potential for a high level of HIV/AIDS awareness. The presence of male circumcision awareness posters and unused male and female condoms placed at strategic points were testimonial indicators of this awareness. I also learnt that some of Charles's pupils had recently been circumcised. Research evidence from Charles indicates that contrary to this scenario, some key members of the community exhibited an indifferent attitude towards the AIDS curriculum. Taking a conservative stance to respect their religious and cultural beliefs, religious leaders criticised some of the curriculum content that they thought was alien to their purposes. According to Charles, this action resulted in teachers' censorship of some of the content as a response to the resistance.

Similarly, some parents displayed indifference to HIV/AIDS preventive campaigns in their community by denying their male children permission to get circumcised, citing respect for their religious affiliation. Underlining his personal perception about Christianity, Charles saw self-contradiction in the case of parents who resisted this practice when in actual fact, in the Bible, people used to be circumcised. On this note, this teacher said he was further perturbed by the ripple effect of the parents' attitudes on their children, who in turn could exhibit similar attitudes in AIDS lessons. When parental attitudes cascaded down to learners, this scenario tended to adversely affect his teaching by non-participation of learners in the lessons.

From the above evidence, it can be hypothesised that the precarious and emotive nature of the curriculum as policy to which parents react in certain ways can complicate teachers' practices. This matter cannot be underestimated. In the literature, community and parental attitudes towards teaching the youth about HIV/AIDS have been documented as a crucial implementation factor playing out on

teachers' implementation efforts (Lesko et al., 2010:826; Wood and Hillman, 2008:30).

7.6.2.3 Learner attitudes

Like Stella and Ellen, Charles cited learners' negative attitudes as an affront to their participation in lessons. For him, some of the HIV/AIDS infected or affected learners seemed to be reluctant to participate actively in lessons on account of their personal circumstances and psychological conditions.

A practical case Charles said he once contended with was an HIV positive learner in his class whose parents were also HIV infected. The learner's lack of involvement in both AIDS lessons and special HIV/AIDS-related activities such as the World AIDS Day, has often led to Charles's despondency in, and a "half-hearted" commitment to the implementation of this curriculum, whose teaching he did just to "get it through."

The emotional precariousness of this curriculum and the demands made on the teacher's resilience in the face of the paradoxes he or she as a cognitive sense-maker has to contend with when mediating HIV/AIDS preventive interventions constitutes part of my theoretical framework. I advance the contention that as a policy actor who is embedded within a complex community with various policy players whose actions and decisions filter his or her practice, the teacher encounters a plethora of complex implementation dynamics.

7.6.2.4 Some policy-related implementation dynamics

Evidence from interviews with Charles revealed what I theorised as policy-related implementation dynamics at the macro and micro levels of policy implementation, which played out on his practice.

7.6.2.4.1 Macro-level policy-related implementation dynamics.

As in the cases of Stella and Ellen, Charles observed that the Ministry of Education and CDU instituted a slapdash adoption of an ill-conceived and ill-developed syllabus with inadequate back-up instructional materials. This served as an impediment to successful implementation of this curriculum. For Charles, the Ministry's failure to institute forward planning in the production and dissemination of curriculum materials inhibited classroom practice. Serving as a factor that tended to

frustrate effective implementation of the curriculum, the hasty adoption of the curriculum presented Charles and his colleagues with difficulties in operationalising some of the curriculum's guidelines into practical teaching-learning processes.

In addition, the Ministry's premature adoption of the curriculum without well-trained teachers in place to teach it exacerbated the implementation challenges. In this vein, findings have already highlighted Charles's concern over his receipt of poor pre-service teacher training towards the teaching of this curriculum. Coupled with the foregoing anomalies, the Ministry's failure to provide implementation resource materials set Charles into wondering how he was expected to implement the curriculum.

7.6.2.4.2 Micro-level policy related implementation dynamics.

At the school level, the school Head at Charles's school adversely contributed to the curriculum's implementation. From what Charles said, it can be discerned that the school Head's negative attitude towards this curriculum culminated in his relegation of the innovation to the periphery, and its neglect. He intimated thus:

Right, you go down, you come to the school level, the Heads are there. They themselves, they don't know much about the subject, so they don't care much about how poorly or well it is done...

Along with the Head's negative attitude shown by "not caring much" about the effectiveness of this curriculum was what Charles perceived as the little knowledge the Head possessed about this curriculum. This had implications on the extent to which as a local change leader, the school Head provided teachers with the facilitative implementation support of guidance and technical assistance. Charles believed that his school Head was so unknowledgeable about the curriculum that her exertion of implementation pressure on teachers by way of supervision and monitoring remained remote. The teacher testified that such lack of guidance has often allowed him and fellow teachers "to get away" with superficial planning and teaching.

What further inhibited effective implementation was the school's rigid staffing policy that tended to discourage Charles from serious application to the AIDS curriculum. By confining him permanently to examination classes, thereby rendering him part of

the unchangeable examination class personnel, this policy tended to promote in him laxity in the teaching of this curriculum. As Charles indicated, teachers who teach classes that take the Grade 7 national examinations do not normally receive pressure to teach the AIDS curriculum, and therefore, by concentrating their energies on examinable subjects, they tend to trivialise and marginalise the curriculum.

The above findings point to the extent to which the influence of change leaders at macro-and micro levels of policy implementation filtered down to Charles as an individual cognitive sense-maker engaging in classroom practices. By virtue of their decisions and actions in their respective offices, the leaders impacted in complex ways, the manner in which Charles's adapted and enacted this curriculum.

7.6.2.5 Characteristics of the curriculum

According to Charles, the characteristics of the curriculum emerged as a key contextual factor that played out on his cognitive sense-making and classroom practice. Charles testified that the AIDS curriculum is characterised by complexity. Understanding the AIDS curriculum as a uniquely delicate and extraordinary innovation that differs from the ordinary Mathematics and English school curricula, Charles thought that it should be approached with extra caution. For him, what renders this curriculum complex is the fact that it is psychologically sensitive to the learners. For its complexity that arises from the pedagogy, Charles contends that this curriculum requires of a teacher, thorough reading and internalisation.

Despite its complexity, Charles expressed some positive properties about this curriculum. He indicated that he found the curriculum framework generally clear, provided it was supplemented with back-up curriculum materials for simplification and clarification of the curriculum specifications. Generally most of the topics appeared clear to the teacher, but were only problematic when it came to their organisation. Charles perceived the repetition of the same topics across consecutive grades as confusing and apparently redundant. This caused difficulty for him to differentiate content matter for Grades 6 and 7, as it appeared one would be dealing with the same thing. It seems plausible to attribute Charles's hazy understanding of some of the curriculum elements to the knowledge deficiency problem. This knowledge challenge speaks back to his lack of clarity. Indeed, when he raised the

issue of clarity during the interviews, Charles admitted that his understanding of the curriculum could be at fault. He could not clearly discern that, as enjoined by the curriculum specifications, repetition of the same topic occurs concentrically through the different grades, with the content increasing in scope and degree of complexity as one proceeds from one grade to the next.

Another curriculum feature that illustrated lack of clarity of this curriculum in Charles's terms was the student assessment procedures. For Charles, the obscurity in the description of how exactly one would assess a student's progress during AIDS lessons, particularly those involving exclusively role plays and other participatory activities rendered this issue enigmatic. Charles considered it fuzzy to assess the life skills, but much clearer to evaluate factual knowledge which is done through the traditional and familiar practice of marking pupils' written tasks.

The above evidence seems to signify the complexity that might arise from the gap in the assignation of meaning to the same policy messages between those who designed policy and those who mutate and implement it in specific use-setting realities. As an objective external facticity, when viewed through the phenomenological-adaptation and Honig's model and cognitive sense-making lenses, the prescriptions of policy have to be subjectivised by the user and incorporated into his or her mental structures, and translated into practice. I contend that such processes occur with the teacher, in the context of the impact of other people's decisions, actions and behaviours in the classroom and elsewhere outside of it. By the same token, literature has detailed various kinds of experiences teachers undergo in the educational change process, by way of challenges, barriers and opportunities and the subsequent strategies they adopt to cope (De Lange and Stuart, 2008:129; Helleve *et al.*, 2009:197,198; Lesko *et al.*, 2010:826,827; Mugimu and Nabbada, 2010:4; Oluga *et al.*, 2010:376; Theron, 2008:89; UNESCO, 2011:17; Wood and Daniels, 2008:164). It is in the next section where I explore these issues to address the fourth research question, "What are teachers' practical experiences in the implementation of this curriculum, and how do they cope with them?" I employ the theme, "Teacher implementation encounters," to fulfil this task.

7.7 TEACHER IMPLEMENTATION ENCOUNTERS

7.7.1 Some negative cognitive experiences

Interview data indicate that during his contact with the curriculum, Charles experienced implementation challenges of a cognitive nature as he dealt with the content of the curriculum. He found it difficult to articulate content in lessons in the absence of back-up curriculum materials for clarifying and simplifying guidelines into practical teaching.

In addition, owing to the pressure to share the very few syllabus copies in the school, Charles had to intellectually grapple with hurriedly conceptualising guidelines into lesson scheme/plans every beginning of a new school term. According to Charles, his possession of skeletal content knowledge sometimes made him run dry of subject matter during lessons, resulting in poor lesson preparation and presentation. He stated thus:

Yes, I...I..think, I have to be honest. I think I was not well-prepared, but I was surprised with the way the content came from the children. Otherwise at times I would feel so empty, I would feel so empty, run out of the actual thing, but the children, the way they were participating, they would come out with ideas, some of which even surprised me as a teacher.

From Charles's sentiments above, what emerged as apparent was a logical connection between his epistemological posture of accepting children's views and their inputs (which practically manifested in lessons), and his concern about the need to possess more than adequate content knowledge. By implication, when he encountered content deficiency, Charles seemingly coped by taking on board some learners' ideas to add to the scant content he possessed. This was evident in some of his lessons in which he turned some of the learners' responses he had noted on the board into questions the learners answered during written work.

It is thus fascinating to note that, despite the potential sense of cognitive discomfort Charles experienced from his scant content knowledge, he endorsed into actual practice, the conception he held, of "teacher as moderator", and, not "the fountain of knowledge." This he did by valuing his pupils' contribution to knowledge.

Further aggravating his negative experiences with the content and pedagogy of the curriculum was the non-availability of textbooks and teachers' guides. Non-availability of informative textbooks compromised Charles's clarity and depth of comprehension of the curriculum, and disabled him from appropriately interpreting the syllabus and "breaking down matter into teachable units for the grade taught."

To cope with the challenges, Charles compensated for the knowledge deficiency and non-availability of curriculum materials by consulting colleagues for information and technical assistance, and acquiring supplementary materials such as pamphlets and posters from the local Ministry of Health officers, respectively. By implication, since for Charles the possession of insufficient knowledge induced a sense of intellectual incompetence in his lessons, the need to be equipped with above-board content knowledge and relevant curriculum materials could not be overemphasised.

Since interviews revealed an admixture of what I conceptualised as negative and positive cognitive and emotional encounters, it is incumbent upon me to describe positive encounters Charles had with the implementation of this curriculum.

7.7.2 Some positive implementation encounters

Evidence revealed a number of positive encounters that appeal to the cognition and affect of a teacher as cognitive sense-maker. In his adaptation of content, Charles experienced the cognitive experience of being able to address the themes, although he did not propose them in his scheme/plans. This served as a potential source of intellectual gratification. By being able to effectuate the life skills in his lessons, Charles accomplished an activity that could provide a sense of gratification concerned with intellectual faculties, although he did not suggest them in his plans.

For successfully using participatory methodology in most of his lessons, Charles said he was happy. Nevertheless, one is persuaded to question whether Charles clearly understood the meaning of life skills in the sense of curriculum developers, given the fuzziness with which he conceptually linked life skills with participatory methods, during our interview discussions. It has been established in section 7.5.1.1 that Charles confused methods for activities, and held conceptions of the functions of the methods that ran counter to those of the curriculum planners.

Yet again when it appeared a distant phenomenon with Stella and Ellen ever getting directly engaged with the content dimension of caring for HIV/AIDS infected and affected pupils in one's class, with Charles it was an immediate responsibility he claimed he practically undertook. In this way, his ability to do this served as a positive encounter relevant to both his mental and emotional faculties.

Generally, Charles enjoyed experiences of teaching practice concerned with the cognitive dimension of sense-making, from his ability to conduct all his lessons according to plan, in as best a way as he understood the way the curriculum is implemented.

Finally, a source of positive experiences of the cognitive faculty type was the presence of some forms of facilitative teacher implementation support. Charles enjoyed the availability of support from Health personnel in the form of content knowledge and curriculum materials. Charles also cited the advantage at his disposal, of the opportunity to consult pre-service and recently qualified teachers in his school for technical assistance, information and resources. Such an opportunity could possibly nourish the teacher cognitively.

Based on the findings of the interviews described above, it can be inferred that the experiences a teacher has with the implementation of a curriculum are a complex issue, defined by a wide range of personal and contextual factors. These factors impact a teacher's practices and experiences within a systemic context in which various policy actors in the classroom and elsewhere contribute to them in complex ways, both positively and negatively.

7.8 CHARLES'S SUGGESTIONS FOR IMPROVING PRACTICE

With reference to the case of Charles, I address the last research question of this study, "What do teachers suggest as the ideal ways of improving the implementation of the AIDS curriculum?" I attempt this task by exploring the theme, "*Transforming implementation proficiency*," at the personal and broader policy levels into which I categorised Charles's suggestions.

7.8.1 Transforming implementation proficiency

7.8.1.1 Enhancement of personal implementation proficiency

In the previous section it emerged that Charles thought that although he implemented this curriculum in the best way he understood it, he felt his teaching fell far short of the curriculum's specifications. Against this background, he offered suggestions for his and fellow teachers' improvement of proficiency.

Probably due to the perceived superficiality with which he felt he taught this curriculum, Charles found thorough preparation and improved acquisition of content knowledge to be some of the critical ways of enhancing his teaching proficiency. In view of the inadequacy of knowledge and curriculum materials, Charles proposed consultation and collaboration with Health personnel in the areas of content and materials, as ideal ways of boosting his knowledge. From a pedagogical perspective, Charles thought that if he and his fellow teachers could use appropriate "child-friendly" that is, learner-centred teaching methods in simple, communicable language suitable for the grades taught, that would improve teaching.

Time constraints also emerged as a crucial area Charles thought should be addressed. Charles admitted that he and fellow teachers used the time allocated for the AIDS lessons for "doing corrections" in other subjects. For him, the neglect of this curriculum could be redressed by using supervision to compel teachers to accord the curriculum its full time slot and to magnify its importance. Placing much blame on the school Head for lack of supervision of the curriculum, Charles felt frequent supervision and monitoring could spur teachers into serious commitment to the curriculum, and into a search for more information about its implementation.

7.8.1.2 Policy-level transformation of implementation proficiency

Evidence from interviews with Charles revealed that the paucity of curriculum materials and related implementation resources emerged as key challenges that hamstrung his meaningful implementation of this curriculum. Charles felt that the Ministry of Education and schools had the influence to make a difference.

According to Charles, for the Ministry of Education to ensure quality implementation, it needed to take the decisive stride of transforming the provision and quality of

instructional technology towards teacher capacitation. He advocated the provision of attractive curriculum materials that strongly appeal to the various forms of sensory stimulation in AIDS learners, such as colourful magazines and comics. Materials that contain varied activities and illustrations would “eliminate fear of this subject” besides motivating children to learn.

Charles also considered the need for the Ministry of Education’s provision of varied educational, instructional media and technology such as DVDs and radio broadcasts to reduce the monotony arising from the traditional teaching conventions. By implication, Charles’s contribution illustrates at this point, the innovativeness teachers as cognitive sense-makers can display when adapting a new curriculum. Here is a classical case of ideas that Charles believes are meant for effectuating a paradigm shift from tried and tested modes to the mechanics of teaching AIDS curricula that incorporate the most recent mechanical and electronic devices.

Allied to the above issue is the need for the Ministry to equip schools with resource materials for teachers to access adequate information and working knowledge. Charles suggested that, by doing this, the Ministry could enhance teachers’ implementation proficiency. Charles suggested that the above measure could be accompanied with concerted steps to improve the pre-service training in colleges towards this curriculum. One would want to assert that the production of more knowledgeable teachers could add value to this noble project.

At the macro-level of policy implementation, Charles felt that it was imperative for the Ministry of Education to regularise and intensify staff development workshops as a measure to capacitate serving teachers to implement. Such collaborative teacher learning platforms could thus enable teachers to access more “literature” and ideas for the ultimate improvement of planning and teaching. The teacher argued that, if such workshops included Health personnel as resource persons, they could allow the injection of more useful ideas in the content of the curriculum.

In view of Charles’s suggestions, it is interesting to note how important it is for policymakers to create teacher learning infrastructures that could ultimately evolve into communities of practice emphasised in this thesis.

In addition, the issue of getting teachers capacitated with more knowledgeable partners (resource persons) at school level was proposed by Charles as an effective leverage for “empowering” teachers with implementation proficiency. Charles suggested that in schools, if teachers were provided with more curriculum materials and resource persons, they could learn more technical know-how for effecting change. He believed the Ministry of Education should play a facilitative role to ensure schools get this support.

Redressing the national examination policy to accommodate the AIDS curriculum in the national Grade 7 examination General Paper emerged from Charles as a critical area the Ministry of Education should undertake. For Charles, such a move could compel teachers to magnify the value of the curriculum and teach it more seriously.

Finally, an area Charles considered worth redressing, following non-supervision of this curriculum by school Heads was to intensify its supervision and monitoring by the school administrators. Charles suggested that the administrators needed to improve their attitude and commitment towards this curriculum.

Charles offered the foregoing suggestions against the backdrop of some personal and contextual issues that impacted his individual cognitive sense-making and mutating this curriculum in his own subjective way. Phenomenologically, on the basis of his personal epistemology, he adapted this curriculum and experienced its implementation within a social world with various policy actors in different places, some of whose decisions and actions played out on him.

7.9 A SYNTHESIS OF FINDINGS: COMPARING AND CONTRASTING CASES

7.9.1 Teachers’ understanding and implementation of the curriculum

Evidence from the study revealed similarities in Stella’s and Ellen’s epistemologies which generally reflected an essentially cognitivist approach with behaviourist undertones. On the contrary, Charles’s epistemology espoused a learner-centred, interactive, constructivist pedagogy with cognitivist and behaviourist undertones.

At the symbolic level, Charles’s codification of a learner-centred teaching approach resembled Ellen’s codification of a negligible sensibility of the interactive pedagogy.

Stella's scheme almost absolutely suggested the cognitivist approach. This is shown by her emphasis on content mastery and intellectual actualisation of learners reflected in her lesson scheme/plans. Her teaching would be predicated on the didactic, transmission approach, with a strong emphasis on factual knowledge.

Whereas Stella's and Charles's actual teaching were closely consistent with their tentatively codified pedagogies and verbal epistemologies, Ellen's actual practice radically departed from them. Although Ellen used the AIDS syllabus copy to produce her scheme/plan, in which she articulated some of the key features of the interactive approach, she did not teach in the way she had conceptualised classroom practice on paper. Rather, she regressed to the traditional mode of instruction applied in ordinary subject curricula. Stella's and Ellen's teaching thus assumed very negligible participatory strategies, which were heavily dominated by the didactic, transmission approaches whereby learners engaged more with knowledge than discursive activities.

By contrast Charles effected a reasonably balanced application of both the two broad teaching approaches, with the interactive approach dominating. Although, he seemed to be cognitively unconscious of the intrinsic occurrence of life skills in his lessons, Charles's teaching approaches practically depicted them.

Findings of this study revealed that there were differences in the learning environment nurtured by the participants. Although Stella exposed her learners to a very limited physical learning environment, like Charles, she created and maintained a free psychosocial learning atmosphere reminiscent of the facilitation mode of teaching AIDS lessons. Ellen's learning environment was too closed and restricted in both the physical and psychosocial dimensions.

Differences were noted in the participants' perceptions of the content dimension of caring for the HIV/AIDS infected/affected pupils in their classrooms. While Stella and Ellen professed little attention in the area, Charles gave a response which suggested his sensitivity towards this responsibility, by purportedly offering the vulnerable groups psychological support and protection from discrimination and stigmatisation.

Finally, it can be inferred from the data that in all the three participants' teaching there existed a logical relationship between their pedagogies and articulation of

content. Stella's and Ellen's predominantly didactic transmission approaches which entailed the explanation, question-and-answer methods resonated with the resultant knowledge impartation processes. Correspondingly, Charles's learner-centred, constructivist, interactive approach which involved the use of several participatory methods was consistent with learners' discursive encounters with content, in the manner of life skills development.

It can therefore be concluded that generally all the three participants understood and implemented the AIDS curriculum in ways inconsistent with most of the curriculum specifications. Although the way Charles implemented the curriculum seemed to reflect much closer approximations of the specifications of the curriculum it displayed critical limitations. In a pronounced way Stella and Ellen displayed an understanding of the implementation of this curriculum in the traditional, didactic mode applicable with mainstream curricula.

Understandably, Stella and Ellen employed the teacher-centred transmission-oriented pedagogy and struggled with the recommended learner-centred one, granted the fact that they operated in a parent Third World environment where instruction is deeply entrenched in the teacher-centred approach. Teachers have always been struggling to evolve to the "fashionable, postmodern participatory approach because of a socio-cultural cosmology that favours the teacher-centred pedagogy (Guthrie, 2013: 129-132; Tabulawa, 2013:8-9) and due to lack of resources for effecting the learner-centred pedagogy (Tabulawa, 2013:8).

7.9.2 SOME PERSONAL AND CONTEXTUAL FACTORS THAT PLAYED OUT ON PARTICIPANTS

7.9.2.1 Personal factors

7.9.2.1.1 Teacher implementation characteristics

Evidence across the cases revealed that personal knowledge deficiency of teachers in respect of this curriculum was one of the key challenges in the implementation of this curriculum. All the participants intimated that they possessed inadequate knowledge of the content and pedagogy of the curriculum.

They ascribed this problem to their inadequate pre-and in-service teacher preparation. Charles expressed a more pronounced concern of his lack of depth of understanding of the curriculum as a serious personal inadequacy which tended to debilitate his change efforts.

Some teachers' attitudes towards this curriculum emerged as a common challenge among the participants, which impacted their commitment in certain ways. While the other participants expressed a negative attitude, Ellen claimed that despite her insufficient knowledge of the curriculum, she had an intrinsic interest in teaching it. In striking contrast with Stella and Charles, Ellen expressed a self-actualising attitude as she said she envisaged possibilities of undertaking professional furtherance in the teaching of this curriculum.

7.9.2.2 CONTEXTUAL FACTORS

7.9.2.2.1 Deficient teacher capacitation

All the three participants expressed that a lack of resources, materials and teacher professional development opportunities as well as time constraints were impediments to their change efforts. However, their areas of concern differed. For example, unlike Ellen and Charles who at least accessed and used the syllabus copy for planning, Stella did not. Similarly, where Stella and Ellen perceived the issue of time constraints in terms of shortage of lesson teaching time, Charles viewed it in the light of inadequate time for preparing work.

Common among the participants' views were the learners' negative attitudes towards this curriculum. Learners' passive participation in lessons as a result of negative feelings towards this subject caused feelings of despondency among the teachers. A contrasting attitudinal problem was recorded in the case of Charles, whose change efforts were hamstrung by the local community's indifferent attitude towards the general subject about HIV/AIDS and the actual content of the curriculum.

7.9.2.2.2 Some policy-related matters

Failure to develop, produce and disseminate a sufficiently developed curriculum by the Ministry of Education and CDU was perceived by all the participants as a serious

stumbling block in their teaching and planning in varied ways. The participants attributed their conceptual implementation problems to the Ministry of Education and CDU's slapdash adoption of an ill-conceived and developed curriculum, in the absence of the necessary back-up materials. Allied to this issue was the participants' general feeling that the Ministry contributed negatively by not supplying teachers with facilitative support of various kinds. The participants also expressed the common sentiment that, teachers' trivialisation and marginalisation of this curriculum emanated from the Ministry of Education's flawed policy on examining this subject. They felt that by not affording it adequate examination space in the primary school subject curricula, it became susceptible to neglect by teachers.

In addition, Stella intimated that the Ministry of Education needed to revisit the policy that defines the language of instruction granted that all the participants faced problems communicating with learners as a result of the learners' limitations in expressing themselves in English. Although the problem also occurred in their classes, prompting them to allow learners to use their vernacular, Ellen and Charles did not voice the concern in terms of transformation of policy on the medium of instruction to be used in teaching the AIDS curriculum.

While Stella and Ellen mentioned the absence of teacher capacitation facilities in the form of materials and professional development of serving teachers at the meso-level as a negative contextual teacher implementation factor, Charles did not refer to this, except at the micro-level. At the school level, the participants felt that schools were not adequately supervising implementation, affording staff development opportunities to teachers and supplying them with materials. It was only Stella who raised the need to revitalise the school's subject committees as leverage for teachers to treat the AIDS curriculum seriously.

7.9.2.2.3 Characteristics of the curriculum

The complexity and clarity of this curriculum emerged from all participants as a constraining contextual factor that played out on them as they implemented the AIDS curriculum. Although all of them spoke about conceptual difficulties engendered by the description of this curriculum in contrasting ways, the most commonly pronounced areas of concern included lack of clarity of student assessment and the

articulation of content. Ellen's views suggested a greater intensity of the problem of clarity, as in her claim of possessing a '50%' understanding of the curriculum.

7.9.3 TEACHER IMPLEMENTATION ENCOUNTERS

Findings of the study revealed a host of positive and negative experiences all participants underwent in different ways in their respective school contexts. Generally, in practice, participants experienced difficulty in interpreting and teaching the curriculum to expectation. While Stella and Ellen admitted the negative experiences, Charles maintained that he experienced satisfaction with the adaptation of the curriculum. Stella's sentiments were more intense, as she felt that the teaching of the curriculum was in itself, an additional burden. Participants were dissatisfied with the paucity of fundamentally important curriculum materials for planning and teaching.

Together with Ellen and Stella, Charles enjoyed the opportunity to consult health workers and acquire some materials and knowledge. Ellen enjoyed assistance with the teaching of her lessons from the local resource persons. All the participants were positive about the presence of young teachers whom they consulted for latest ideas on implementing this curriculum. Stella experienced gratification from the presence of an AIDS club in her school.

In the lessons all participants did not display sensitivity to language that could potentially cause psychological harm to the learners. Whereas Stella admitted the complexity that goes with dealing with this matter, her counterparts were uncertain about the manifestation of this phenomenon. However, all participants experienced negative encounters with the topics on sex and sexuality, in different ways.

Finally, unlike Stella, Ellen and Charles grappled with the emotional experience of dealing with psychological problems that some of the HIV/AIDS infected and affected learners exhibited in his classroom.

7.9.4 SUGGESTIONS FOR IMPROVING PRACTICE

The suggestions offered by all the participants for improving the implementation of this curriculum were meant for radical transformation of teacher proficiency through some measures they thought should be taken, starting from them as individuals to the other stakeholders.

The need for improving practice in the area of the appropriate learning environment, and to earn more knowledge was expressed by Stella and Ellen. Charles shared with them the sentiment on the personal improvement in knowledge possession, but added the dimension of the need to always use child-centred teaching methods. Unlike Stella and Ellen, he did not propose the idea of being more resourceful, but rather suggested that there be consultation and collaboration between teachers and Health personnel on the teaching of this curriculum.

Evidence shows that all participants valued the need for the Ministry of Education to provide various forms of support, and to transform the educational media and technology. Stella and Charles suggested the inception of radio broad casts, but Charles added the idea of a DVD, comics and magazines. Ellen's proposal of the media was restricted to paper-type of materials. While Stella and Ellen felt the need for introducing the idea of specialisation in the teaching of this curriculum, whereby solely, specialist teachers should teach the curriculum, Charles did not conceive of this measure. An outstanding observation Stella made was the need for all schools to revitalise the school subject committees so as to compel teachers to implement the AIDS curriculum more seriously. Ellen added the unique strategy of the Ministry of Education's need to involve teachers in the construction of the AIDS curriculum as a way of school improvement.

7.10 A SUMMARY OF CHAPTER 7

Chapter 7 has provided findings on Charles's account and the main findings of this study thematically. Findings of the three cases have been presented in detail. Similarities and dissimilarities of key findings of the cases were also highlighted. In the next Chapter, discussion of findings follows.

CHAPTER 8

DISCUSSION OF FINDINGS

8.1 INTRODUCTION

In the three previous chapters the findings of this study were presented. This chapter deals with the discussion of findings. I attempt to provide a broad picture of the findings through a thematic discussion of the main findings, in broad brush strokes. In conjunction with the literature review, a critical appraisal of the key issues in the results of the study is undertaken within the theoretical framework of the phenomenological-adaptation and Honig's "policy, people, places" and cognitive sense-making model that informs this study.

8.2 THEME: SOME EPISTEMOLOGICAL/PEDAGOGICAL ISSUES

Evidence in this study shows that the different ways in which teachers displayed an understanding and implementation of the curriculum represented their personal subjective interpretations of the policy messages. In terms of cognitive sense-making, the teachers exhibited different interpretations of the same curriculum policy message (Spillane *et al.*, 2006:52). Marsh (2009:105) and Tarr *et al.* (2010:7) offer the view that although policy may expect teachers to faithfully implement the curriculum, they unavoidably mutate or adapt it the way they personally interpret and understand it, in accord with their local institutional or classroom use-setting realities (Berman, 1981:260; Helleve *et al.*, 2009:191; Mapolisa *et al.*, 2006:47). This view is supported by evidence in this study, in which, on the basis of the meanings they ascribed to the curriculum messages, as cognitive sense-makers, teachers applied the curriculum in modified versions.

8.3 DISCUSSION OF THEMES

A distinctive feature that underlines the subjective interpretations of this curriculum that was displayed by the teachers is the philosophical groundings upon which the

teachers' pedagogies and teaching practice were anchored. In order to address the research question, "How do teachers understand and implement this curriculum?" the issues are discussed hereunder.

8.3.1 Theme: Stella and Ellen displayed an essentially cognitivist approach with behaviourist undertones and Ellen displayed minimal learner-centred strategies.

There is evidence in this study that at the symbolic level of implementation, Stella and Ellen portrayed an understanding of the implementation of the curriculum in terms of a pragmatic, cognitivist approach with behaviourist undertones. On the contrary, Ellen's codification reflected minimal interactive, learner-centred teaching. Whereas at the symbolic level Ellen had conceptualised practice largely reminiscent of a cognitivist approach that slightly incorporated the learner-centred interactive approach, her actual teaching practice radically departed from her proposed approach and leaned towards the didactic, transmission approach. Despite having codified practice in a slight sensibility of interactive, participatory strategies, Ellen reverted to the adaptive approach by abandoning interactive teaching practices. She seemed to have been compelled to this pedagogic turn by the learners' needs and what Berman (1981:260) calls use-setting realities. This evidence suggests that in curriculum policy implementation, there is the inevitability of teachers' tendency towards mutation of written thoughts into actual practice that differs from the initially conceptualised symbolical representations. This tendency is a phenomenon which has contributed to the age-old policy-practice disjuncture.

Unlike Ellen whose oral epistemological claims and codification of teaching practice contradicted her actual teaching, Stella demonstrated a pedagogical approach that corresponded with her verbal philosophical views and translated into her actual teaching practice. However in most of Ellen's and Stella's lessons, the combination of a few participatory and non-participatory methods was used, predominantly for the development of knowledge rather than life skills in the learners.

Thus their teaching assumed the didactic, transmission approach. This evidence contradicts with the view that the learner-centred, interactive approach that engages the learners in participatory learning experiences is the most appropriate strategy in the implementation of HIV/AIDS educational programmes (MOESC, 2009:17; Okore,

2009:30; UNESCO, 2005:210). It also contravenes the specification that HIV/AIDS educators should focus on both content mastery and the development of life skills through the use of participatory methods (MOESC, 2003:8; UNAIDS, 2009:11).

8.3.2 Theme: Charles's planning and teaching reflected an essentially cognitivist, constructivist, learner-centred, interactive approach

Charles accordingly articulated an essentially learner-centred, constructivist, interactive approach in which learners and the teacher, and learners by themselves collaboratively constructed and generated knowledge through participatory methods. This evidence illustrates some semblance of the enactive approach to educational change whereby mutual involvement in knowledge construction occurred among Charles's learners and between himself and the learners (Afdal, 2006:335; Behm, 2009:6; Kennedy, Chan and Fok, 2011:43; Mc Cowan, 2008:87). It also supports the contention that the interactive, participatory approaches are most suitable for allowing learners to personalise and internalise HIV/AIDS issues experientially, through discursive activities in social, interactive settings (MOESC, 2003:9; Okore, 2009:27). However, it is important to recognise the fact that in developing countries, teachers operate in a broad parent environment in which teacher-centred approaches predominate and have been used for imparting revelatory knowledge for time immemorial (Guthrie, 2013:122). Therefore along with participatory methods about which some scholars are sceptical, teacher-centred approaches are also important.

8.3.3 Stella's and Ellen's actual teaching was transmission-oriented

Interestingly, Stella's and Ellen's actual practices both assumed the didactic, transmission approach with a cognitivist focus on content impartation and mastery, at the exclusion of life skills. With reference to the AIDS curriculum specification that demands teachers to strike a healthy balance between knowledge impartation and life skills development (MoESC, 2009:16; UNAIDS, 2009:11), findings on Stella's and Ellen's practices do not support Barret *et al's*. (2007:11) insight that the inception of life skills arises from the realisation that information about HIV/AIDS alone cannot promote behaviour change in learners. The teachers' minimal use of the interactive participatory in preference for the didactic, transmission approach contradicts with Chisholm and Leyendecker's (2008:197) contention that in learner-

centred approaches (applied in the AIDS curriculum) knowledge is not transmitted but is constructed in the mind of the learner. At best it defeats the goal of nurturing the development of the child-in-totality enshrined in the coherent domains approach which is applicable to the school HIV/AIDS programmes (Barret *et al.*, 2007:10; MOESC, 2003:8), and at worst it represents a narrowly-focused, reductionist perspective to implementing this curriculum. It is mainly through life skills development that a holistic focus of teaching and learning is practicalised, for the cognitive, social, emotional and psychological development of the child (Barret *et al.*, 2007:10), and for enabling the pupils to develop attitudes, experience fear arousal and behaviour change for them to adjust successfully in the HIV/AIDS world.

Curriculum adaptation as part of cognitive sense-making is the hallmark of teacher implementation practice, but when teachers engage it in an unrecognisable configuration (Huntley, 2005:42) which is reducible to ineffective student learning, it can be an impediment to the foregoing potential gains that pupils could accrue in Stella's and Ellen's classes. Thus from Stella's and Ellen's didactic, transmission approaches, there looms large the possibility of equipping pupils with an unintegrated, amorphous structure of competencies in this complex HIV/AIDS world.

On the contrary, Charles's use of the learner-centred, interactive participatory approach along with the transmission strategy demonstrates his conceptualisation of the possibility to straddle the dichotomy between these competing pedagogies. By essentially focusing on both transmitting knowledge to pupils and developing interpersonal skills in them, Charles displayed the idea of melding the pedagogies in such a manner that could enable pupils to personalise and internalise situations, simultaneously acquiring knowledge.

8.3.4 The learning environment and didactical transactions

A critical pedagogical feature that emerged in this study concerns the kind of learning environment teachers created and nurtured in their lessons, and the subsequent teaching-learning transactions.

8.3.4.1 Theme: Stella and Charles effectuated an open, free and unrestricted environment, and Ellen, a closed, restrictive learning environment.

Findings of this study support the view that the facilitation method which is appropriate in HIV/AIDS lessons summons an open, free and spacious physical learning environment. Within the unlimited physical space must prevail a free, unrestricted psychosocial environment that allows learners to express themselves freely and act out and discuss situations in social interactive teaching-learning transactions (Stuart, 2010:51; UNESCO, 2005:221). Charles and Stella seemed to have been sensitive to this requirement of the curriculum as their learners had the opportunity to freely engage in cognitive activities and share views in the context of a psychosocial environment that was punctuated with unrestricted expression of social and emotional relationships. This finding is consistent with the sound and open relationships in HIV/AIDS lessons that were valued and embraced by teachers in the study in some Eastern and Southern African schools (Stuart, 2010:53).

Although the learning environment Stella effectuated was generally as free as the one Charles nurtured, the psychological atmospheres that all the teachers in this study afforded their classes exhibited power differentials between themselves and their learners and among the learners. However, in Stella's and Charles's classes the phenomenon was much less intense.

Contrary to interpersonal relations based on equitable power distribution and mutual trust and respect among class participants (Stuart, 2010:55; UNAIDS, 2005:221), these power dynamics glaringly revealed themselves in Ellen's class. Assuming a complete antidote to the more relaxed physical and psychosocial spaces in the other classes, Ellen's class epitomised a restricted, tense atmosphere that was inimical to the free expression of cognitive opinions and emotions by the learners. It was quite difficult for learners to freely engage in discursive discourses in the context in which the teacher and her learners identified in hierarchical as opposed to equitable pedagogical relationships.

8.3.5 Theme: Pedagogical issues in relation to content and teaching methods

Presumably informed by their epistemological and pedagogical frameworks, teachers basically conceptualised the content of the curriculum in terms of topics and

concepts. Ellen further conceived of themes as an integral content element. As cognitive sense-makers, teachers ultimately produced their codifications of practice *apropos* their unique personal interpretations and meanings of 'what' to teach to pupils. There is evidence in this study that although all teachers did not explicate life skills in their plans, their pedagogical practices with learners seemed to be congruent with the subsequent thrust they placed on the content. Stella's cognitivist, pragmatic approach resonated with her factual knowledge focus, as did Ellen's teaching practice that had been slightly codified as interactive, ultimately eventuated into a transmission-oriented, content impartation turn.

Similarly, Charles's epistemology and actual pedagogy which took the learner-centred orientation translated into a focus on both content mastery and life skills development, although he had not explicated the latter content aspect. The fact that in each one's unique way, teachers came up with modified teaching practice versions peculiar to their subjective meanings and classroom situations about what and how best to teach this curriculum confirms the adaptation approach that was displayed in this study. It illustrates the endowment of the adaptive approach to the teacher with the voluntary capacity to reconstruct or reconstitute curriculum policy in the way one makes sense of and understands it (Helleve *et al.*, 2009:191; Mapolisa *et al.*, 2006:47; Marsh, 2009:105; Tarr *et al.*, 2010:7).

For example in the face of lack of syllabus copies in her school, Stella used her personal initiative and the obsolete *Let's Talk* text book to conceive of a scheme/plan. She seems to have analogously made sense of the utilization of role plays and discussion methods on the basis of her old knowledge structures gained from the inadequate pre-and in-service teacher preparation she underwent. In the same vein, the teachers' omission of some curriculum elements in their planning and teaching further re-affirms their propensity to mutate policy subjectively. Conversely, Stella's and Ellen's recourse to the traditional, didactic, transmission-oriented instructional strategies seems to support Spillane *et al.*'s (2006:48) cognitive sense-making scheme which recognises the teachers' unavoidable tendency to reconceptualise policy according to their existing mental frames of reference about a new curriculum.

The results of this study also indicate that as cognitive sense-makers, teachers chose their independent teaching strategies on the basis of the learners' interests, levels of cognition and unique differences together with the socio-cultural contexts in which they (teachers) operated. Consequently, on account of their unique socio-cultural settings, teachers practised selective teaching of content. The teachers intimated that their choice of content was thus influenced by its acceptability or unacceptability by the parents and the community. Specifically, sexuality topics were seen by the teachers as being susceptible to cultural censorship, and induced in them a feeling of discomfort. The evidence is consistent with Helleves *et al.*'s (2009:191) study in some South African schools which confirmed that the adaptation of the curriculum by teachers fundamentally hinged on the teachers' subjective, interpretive preferences of what to teach in the HIV/AIDS programmes, but with reservations on the socio-cultural community's value systems. It is similar to findings of Weber and Gripper's (2010:29) study in some South African schools in which parents' censoring of some HIV/AIDS education content that the parents and the broader community considered to be cultural taboo led to selective teaching.

Similarly, in this study, teachers experienced a difficulty and a lack of understanding of some of the guidelines and participatory methods and could not easily operationalise the specifications of the curriculum into practice. This resulted in the selective adaptation of the content of this curriculum. In concurrence with Bhana's (2009:166) contention that teachers are usually reluctant to use some participatory methods in HIV/AIDS lessons due to ignorance and lack of clarity, teachers in this study were not so keen to use many of them.

Among the curriculum content dimensions that the teachers in this study omitted was the caring for their HIV/AIDS infected or affected learners. Stella admitted absolute ignorance on this matter. Although Ellen and Charles claimed that they played this role by offering psychological support to these vulnerable learners in their classes, they did not describe the caring aspects of helping children to take their medication and teaching them healthy habits infected that the learners should live, as enjoined by the AIDS curriculum (Okore, 2009:24). This evidence concurs with the observation made by HEAIDS (2010:69) of some South African teachers who had planned for this content aspect and merely played the roles of giving the HIV/AIDS infected or affected learners' unconditional acceptance, creating a warm

environment and empathising with them. These flaws could be linked to teachers' inadequate knowledge which was reported in this study.

Positive as these examples of caring seemed to be for both the above cases, it appears that the caring dimension of administering medication or helping the learners to do so remains a very precarious pastoral responsibility for teachers. In this study, the teachers' failure to conceptualise and exercise their pastoral roles fully could be linked to the inadequate knowledge the teachers pointed out. It seems to speak to the overwhelming professional responsibilities that generalist teachers, especially in Zimbabwe have to contend with, in the light of their multifarious roles of teacher, counsellor, community leader (MoESC, 2009:14).

On the basis of analysis of the data, it can be argued that by excluding some of the curriculum elements teachers did not realise that they produced pedagogic scripts that left out critically important HIV/AIDS issues, and that operated in their classrooms to sustain discourses that silenced those issues. This negates the claim that it is only in classrooms that learners will have the opportunity to discuss freely, a wide array of HIV/AIDS issues away from their homes where they may find it difficult to do so (MoESC, 2009:8). Most importantly, the evidence confirms superficial attention teachers paid to this curriculum.

8.3.6 Theme: Teachers' classes embraced the processing and reproduction of content, with Ellen legitimating and endorsing knowledge

In this study there was evidence that teachers and learners in some classes engaged in didactic transactions that promoted the processing and reproduction of knowledge in a regurgitative fashion. By adopting the traditional, didactic, transmission-oriented pedagogy applicable to ordinary school curricula, Stella and Ellen departed from the required interactive participatory methodology. Their application of non-participatory methods contradicted with the spirit of the learner-centred approach applicable to the HIV/AIDS lessons which, according to Froyd and Simpson (2009:4) treats learners as co-constructors of knowledge. Although Charles and his class processed and reproduced knowledge, they did this through social interactive, constructivist strategies which potentially prompted learners to actively and critically engage with learning tasks. As UNESCO (2005:228) noted, exclusive use of the transmission approach is untenable with HIV/AIDS lessons as it

hinders learners from taking control of their learning. In addition, Ellen steered the processing and reproduction of content knowledge which she legitimated as axiomatic truths that the pupils should not question. Rather than respecting the opinions and knowledge pupils had brought into the lessons without being judgemental (MoESC, 2009:9), Ellen arbitrarily imposed her perceived truths about issues on her learners.

I contend that in the first place, regurgitative academic learning cannot effectuate behavioural change in learners. Secondly, the imposition of knowledge as truths runs counter to the rhetoric and spirit of the constructivist text that informs this curriculum, and negates critical thinking that forms part of life skills development in the learners. Rather than defining knowledge in terms of the teacher's personal narrative, it is imperative that the teacher works as facilitator and moderator of learning and knowledge (MoESC, 2009:17; UNAIDS, 2005:8).

When contrasted with Stella and Ellen, Charles's emphasis on the use of the interactive, participatory teaching approach suggests that he was more fairly well-appraised of the curriculum's expectations. However, perhaps owing to his lack of depth of understanding which he admittedly acknowledged in the interviews, Charles's practice was superficial. There was glaring evidence that collaborative, social interactive learning processes were attempted in an environment which potentially fuelled stigmatisation and discrimination among pupils. Charles's oversight of sensitivities to language usage could thus be detrimental to his well-meaning intention to encourage unity of purpose and intolerance to discrimination and stigmatisation among his pupils.

Finally, in light of the teachers' adaptation of the AIDS curriculum in ways that conceptually differed to curriculum developers' specifications, it can be concluded that the adaptation perspective is central to educational change. It will be remembered that in section 3.1 conceptualised two meanings of teachers' understanding of the curriculum in terms of their personal subjective interpretation of curriculum policy and how well they understand or think they understand it. Evidence from this study regarding the second meaning shows that teachers did not comprehend how the curriculum should be implemented. Thus superficial implementation persisted in the classes, even in the case of Charles whose

response to the curriculum policy was generally positive. It is to the discussion of some of the factors that could explain how teachers understood and implemented this curriculum that I now draw the attention of the reader.

8.3.7 SOME PERSONAL AND CONTEXTUAL FACTORS THAT PLAYED OUT ON TEACHERS' IMPLEMENTATION EFFORTS

8.3.7.1 Theme: teacher implementation characteristics

An exploration of personal and contextual factors that played out on teachers is based on the research question, "What and how are personal and contextual factors playing out on teachers as they are implementing this curriculum?"

Kelly's (2007:70), Mugimu and Nabbada's (2010:9), Ntaote's (2011:94) and UNESCO's (2011:18) observation that inadequacy of teachers' knowledge and skills has often hindered successful implementation of school HIV/AIDS educational programmes is supported as teachers in this study felt that their superficial implementation of this curriculum arose from inadequate knowledge of content and the associated teaching skills. The evidence also buttresses Theron's (2008:30) claim that the superficial delivery of HIV/AIDS prevention education by teachers stems from a lack of capacity to deliver the curricula meaningfully. It also stands in dissonance with findings of the studies conducted in some schools in the US by Deutschlander (2010:444) and by Van Rooyen and Van den Berg (2009:99) in some South African schools, which portrayed a more positive picture. In these studies, teachers who had received or continued to receive adequate working knowledge and skills reported greater motivation and confidence to teach HIV/AIDS programmes.

The knowledge deficiency could be linked to pre- and in-service inadequate teacher preparation the teachers reported in the interviews. Inadequate teacher preparation may suggest that policymakers mandate teachers to implement the AIDS curriculum to standard specifications without equipping them with the necessary capacity. This scenario runs counter to Altrichter's (2009:8) and Onyango's (2009:39) contention that teachers are likely to be more capable of effecting educational change meaningfully if they are provided with concrete, how-to-do possibilities and steps.

It is thus inconceivable to expect teachers to mediate HIV/AIDS preventive interventions effectively in the dearth of the necessary knowledge and skills that enable them to respond to the many demands placed on them in this curriculum.

In this study, teachers' attitudes towards the curriculum emerged as an endogenous implementation factor that explained their understanding and implementation of this curriculum. Whereas Ellen expressed a positive attitude towards the curriculum on account of her personal experiences with the pandemic, Stella and Charles expressed a negative attitude. Stella and Charles attributed their lack of commitment to the implementation of this curriculum to their negative feelings towards it, perceiving it as an additional burden to their already existing work overload. By implication, Ellen's positive attitudes suggest that given adequate support, she could engage in more meaningful change efforts than Stella and Charles. Although Stella and Charles claimed that they had negative attitudes towards this curriculum, in the lessons I observed, all the participants seemed to seriously apply themselves amidst the adversities they cited. The findings on Stella's and Charles's negative attitudes resonate with the findings from Lesko *et al.*'s (2010:826) study in some South African schools in which some teachers expressed a dislike of the HIV/AIDS curriculum.

Stella's and Charles's negative attitudes could be linked to their awareness of the change leaders' own lack of commitment and support, and more importantly, in the case of Charles, to the broader community's indifferent attitudes to the curriculum. In any case, why would these teachers bother themselves with the curriculum when those people who should exemplarily lead in its implementation were themselves indifferent?

From the foregoing evidence, the extent to which policy actors in the school and elsewhere can impact teachers' efforts as negatively as to fuel implementation despondency cannot be underestimated. While the negative responses towards this policy by the other players may not be an excuse for individual teachers' own efforts, it is evidential that teachers may also make misgivings for their own lack of commitment on that basis.

8.3.7.2 Theme: Deficient teacher capacitation

For their success, HIV/AIDS educational programmes require teachers who are capacitated appropriately in a variety of aspects. The contrary to the dire need for paying attention to teacher capacitation towards their implementation of the programmes is its inadequacy (UNAIDS, 2009:11).

This observation is supported by the findings of this study in which teachers expressed deficient teacher capacitation in the forms of knowledge, supervision and resources and materials, as a serious impediment to their change efforts. Thus teachers' receipt of inadequate facilitative teacher implementation support in the above dimensions was identified by the teachers as a key challenge. This suggests that they strived to translate those pedagogies they had conceptualised into practice in the context of deficient teacher capacitation identified in research (Buthelezi, 2008:109; UNAIDS, 2009:11; Van Rooyen and Van den Berg, 2009:99).

To think that there can be any adaptation of a curriculum that assumes closer approximation to its designers' specifications in the absence of a syllabus copy and related materials as was the case with Stella in this study, is rather unrealistic. Nor is it comprehensible to imagine that the cognitive sense-making processes of teachers can ever evolve to higher landscapes of implementation competency in the paucity of collaborative teacher learning opportunities that the teachers highlighted. Edwards (2012:26) and Steyn (2011:160) place importance on the availability of continuing professional teacher development programmes (CTPDs) as useful collaborative teacher learning platforms where teachers could share the tacit knowledge and skills. On the contrary in this study teachers reported the non-existence or irregular, superficial application of CTPDs in their school districts. Under such circumstances, the prospects of the few, irregular staff development programmes ever evolving into up-close teacher communities of practice for teachers to develop common understandings that congeal into concrete, institutionalised modes of practices (Coburn and Stein, 2006:61; Spillane *et al.*, 2006 :57) remain bleak.

In this study, teachers seemed to be conscious of the fact that successful implementation of the curriculum and effective student learning could not occur in the paucity of teacher capacitation, as clearly captured in their words:

Stella stated:

So if they don't supply us with-eh- resources like syllabuses, teachers' guides and textbooks, what can I do as a teacher?

Ellen said:

I wish I had enough resources to teach because as of now I'll just teach whatever comes into my mind even though the syllabus is there, but at times it doesn't guide me..., it doesn't put me in the right direction to teach ...so at times I'll just chip in with the knowledge that I know.

Charles said:

Yah, I. I think we need to make sure schools are equipped with syllabi, schools are equipped with resource materials, teachers are well-trained, well-trained and they have got enough knowledge. And supervisors take the subject seriously...

From the foregoing evidence one can conclude that there seemed to be a tension between policymakers' and change leaders' obligation to provide teachers with the necessary facilitative teacher implementation support, and their own autocratic, implementation-as-directed-mentality of mandating teachers to implement a new curriculum for which they lacked support. Zimbabwe's centralised curriculum implementation strategy employs the generic seat of curriculum development whereby all school curricula are designed by national curriculum designers at a central office namely CDU, whose education programmes are compulsorily taught throughout the country. On that score, the possibility of a general neglect of the policy by change leaders speaks to the sentiments that the teachers raised in this study that those in the top echelons of the education system never come down to schools to offer support such as supervision. Why change leaders flounder in this area in the implementation of this curriculum can be an uncharted terrain that justifies future research.

8.3.7.3 Theme: Some policy-related implementation dynamics

Findings of this study re-affirmed the enormity of the contribution of macro-, meso- and micro-level policy implementation dynamics on the participating teachers' classroom practices in their different school contexts.

Literature emphasises the importance of broad policy frames, and decisions and actions of certain policy actors at governmental level as key HIV/AIDS curriculum policy change leverages that frame and shape teachers' practices (Panchaud and Poncet, 2004:8). In the same vein, teachers in this study seemed to suggest that by not providing teachers with adequate curriculum materials and supervision, the Ministry of Education lacked a water-tight policy framework for providing teachers with the necessary facilitative implementation support. Consequently, their action of not supporting teachers filtered down to teachers negatively, hindering their implementation efforts. The superficial understanding of the content and pedagogy of the curriculum that arose from the rudimentary knowledge that they possessed and the inadequacy of curriculum materials which could further enhance their clarity of the guidelines resulted in teachers skipping some critical curriculum elements. Obviously, the potential curriculum deterioration that could occur from such curriculum policy 'adulteration' cannot be overemphasised.

The findings contradict with Panchaud and Poncet's (2004:8) assertion that at macro-level of policy, those countries whose national HIV/AIDS curriculum policy frameworks were clearly committed to supporting HIV/AIDS teachers with materials and resources stood a better chance of successfully implementing the HIV/AIDS curricula. The evidence can be linked with Hillman and Wood's (2008:40) observation that Ministries of Education for most Third World countries lack enduring policy frameworks that ensure the provision of HIV/AIDS educators with resources and curriculum materials.

Contrary to UNAIDS's (2009:8) and UNESCO's (2011:17) contention that at the meso-level, inspectors and school Heads should provide support and guidance to HIV/AIDS educators, in this study teachers reported non-existence of such support. By not supervising teachers and giving them technical assistance as well as creating collaborative teacher learning opportunities, these change leaders seemed to abdicate themselves of their responsibility, leaving teachers to their own devices.

In this study, there was evidence of the presence of school policy-related issues that negatively and positively impacted Stella's and Ellen's practices, at their respective schools. Negating the critical point Buthelezi (2008:112) and Smith (2008:166) makes that a school principal who creates a school culture that values an educational change is likely to propel the staff into its success, the poor school tone Stella reported tended to create an environment that potentially discouraged serious commitment to the implementation of this curriculum by the teachers.

At Ellen's school the school's policy which mandated teachers to embrace the provision of psychological support and protection of learners from stigmatisation and discrimination in their planning had the potency to create context spaces in which teachers could re-examine their implementation roles. It could thus nurture in teachers the spirit of reflexivity and a self-searching and more humane approach to the curriculum advocated by Wood and Theron (2008:16).

Ministry of Education's policy on teachers' workload and associated staffing, and allocation of teaching time emerged as complex implementation dynamics that the teachers raised in this study. Teachers generally felt that the policy that mandates teachers to teach all subjects imposed work overload on them, given the time constraints arising from an already oversubscribed school curriculum. The evidence confirms UNAIDS's (2009:11) observation that education systems put multiple demands on teachers, leading to unrealistic expectations, and UNESCO's (2005:203) claim that owing to the overcrowded existing school curricula, there tends to be insufficient time for HIV/AIDS education in schools. It also resonates with HEAIDS's (2010:23) and Hordzi's (2009:330) observation that teachers have often complained of the HIV/AIDS curriculum as an additional load to their work, leading to its marginalisation. It was thus not surprising for teachers to engage in selective teaching in the face of these operational constraints, which change leaders ignored.

There was evidence in this study that teachers bemoaned the provision of an inadequately developed curriculum to them to implement by the Ministry of Education and CDU. The 'ill-developed' curriculum presented the problem of clarity and complexity to teachers. This evidence could be linked to the policymakers' non-involvement of teachers in the development of materials and teaching approaches (Baxen and Breidlid, 2009:18; De Lange and Stuart, 2008:130; UNAIDS, 2009:7).

The findings contradict with Mishra's (2009:54) and UNESCO's (2011:42) encouraging observation whereby Zambian teachers were actively involved in collaborative development of the HIV/AIDS curriculum materials together with health workers and training experts. Whereas grassroots involvement of teachers in curriculum construction has the promise of elevating their cognitive sense-making to a higher level of an in-depth understanding of a curriculum they themselves crafted, their capacity to do so has always been a contentious matter. In addition, the policy-designer policy interpretation gap could possibly be bridged by staff development sessions which teachers reported as scarce in their schools.

Emerging as an important implementation factor that played out on teachers' implementation efforts was the Ministry of Education's policy on the medium of instruction that Stella raised in this study. Generally it was evident in the lessons I observed of teachers' teaching that teachers were sensitive to the limitations the English language imposed on their learners' participation, resulting in them permitting learners to switch over to their vernacular. They also took exception with the open use of sexuality terms. The evidence supports Hill's (2006:66) contention that language is central to the effectiveness with which policy actors (teachers and learners) make sense of policy messages.

Finally, the Ministry of Education's policy resulting in non-examination of the AIDS curriculum was articulated by teachers in this study as a cause of teachers' lack of commitment to the implementation of this curriculum. It is plausible to link the non-examination of this curriculum to teachers' relegation and general neglect of the curriculum, granted the fact that they perceived it as an additional burden to the work overload they experienced.

8.3.7.4 Theme: learner/stakeholder attributes

Results of this study indicate that some stakeholders' personal attributes played out on teachers' change efforts. Teachers expressed that the negative attitudes towards the learning of this curriculum by the HIV/AIDS infected or affected learners and their subsequent passive participation in the lessons caused teacher despondency.

Ellen shared the similar sentiment that a deficient use of English by her learners served as a barrier to teacher-learner communication in AIDS lessons, which also

contributed to teacher despondency and instructional difficulties. These findings concur with findings of studies undertaken by Helleve *et al.* (2009:62) in some South African schools which linked students' mental maturity and readiness with their amount of participation in HIV/AIDS classes. The findings of this study are consistent with same above stated study which revealed that learners' deficiency in using the English language imposed teacher-learner communication problems in the HIV/AIDS discourses. The role played by the language in which curriculum policy messages are described cannot be overemphasised, granted the fact that different actors make sense of them in semantically and conceptually different ways (Hill, 2008:67).

The literature supports the notion that if learners exhibit negative attitudes towards a curriculum this in turn negatively affects the teacher's teaching efforts (Mapolisa *et al.*, 2006:49). It can be argued that some teachers' unflinching adherence to traditional transmission pedagogy in this study can only do more in entrenching the learners' negative feelings towards learning about HIV/AIDS. Rather, by their child-centredness, social interactive participatory approaches, if properly applied by the teachers could transform learners' attitudes.

Finally, Charles expressed that the indifferent attitude that the broader community exhibited towards the locally-organised HIV/AIDS programmes in general, and the AIDS curriculum in particular, were a barrier to teachers' implementation efforts. The evidence shares a similarity with findings of a study in some US schools by Lesko *et al.* (2010:826) in which the community showed its resistance to school HIV/AIDS programmes for their use of 'unacceptable' sexuality language terms by instituting litigation against teachers. It also re-affirms Wood and Hillman's (2008:30) concern about the pressures HIV/AIDS educators often confront from the community's resistance to certain subjects that conflict with its cultural or religious practices, norms and values.

Thus the resultant selective teaching teachers are often pressured into, in their bid to teach children according to policy expectation, at the same time having to respect the community's demands of propriety cannot be underestimated. All too often, they are entrapped between the horns of a dilemma.

8.3.7.5 Theme: Characteristics of the curriculum

In this study, the clarity and complexity of the curriculum regarding its content description and implementation demands emerged as key issues that shaped and framed teachers' work. In contrast to Helleve *et al.*'s (2009:62) view that the question on the clarity and complexity of HIV/AIDS educational programmes is contingent upon the specificity of the guidelines, there was evidence of conceptual difficulties that emanated from complex and unclear curriculum descriptions and operational demands imposed on teachers in this study.

All teachers conceived of the curriculum as difficult. Stella perceived it as a-too-scientific-to-be-handled-by-a-generalist-teacher-curriculum, while Charles viewed it as a delicate curriculum demanding a teacher's meticulous intellectual application and "extra" caution to avoid psychological harm on the pupils. Ellen perceived it as a difficult curriculum of which she found 50% clear. Correspondingly, evidence from this study suggests that the language usage of the curriculum contributed to the challenges that teachers faced regarding the clarity and complexity of this curriculum in different ways. For seemingly semantic reasons, Ellen displayed a mix-up of the topics and concepts and misunderstood the functions of participatory methods, while Charles confused the methods with activities and mistook life skills for participatory methods during interviews. Stella could not discern the conceptual link between certain curriculum elements. Blignaut's (2007:12) observation of clarity and complexity problems teachers faced in the implementation of C2005 owing to language terms that did not clearly convey policy messages to them, and Hill's (2006:66) language scheme which accentuates variations in the way different policy actors respond to policy in their cognitive sense-making are thus supported by the above evidence. The findings thus generally portrayed that the conceptualisation of certain curriculum guidelines by teachers tended to manifest in ways that semantically differed from those of the designers.

The evidence could also be linked with De Lange and Stuart's (2008:130) claim that teachers are usually estranged by HIV/AIDS curricula because theories and models informing the pedagogies of these programmes are usually derived from foreign countries. It could also be connected with Baxen and Breidlid's (2009:19) contention

that biomedical discourses, together with the social dimensions of the school HIV/AIDS programmes still remain alien to teachers' pedagogic scripts.

What seems to further deepen the clarity and complexity problematic is the demand for teachers to shift from their entrenched traditional pedagogical practices to the new paradigm of participatory methodology which is relatively new and with which the teachers are unfamiliar (De Lange and Stuart, 2008:130). Confirming this phenomenon as difficult, Charles intimated that although he tried his best to adapt the interactive approach, the nostalgic propensity to stick to the "old school" tended to stifle his receptiveness to educational change. In addition, the teachers expressed their obligation to teach sexuality topics as a complex matter that led to selective teaching of content, in concurrence with Helleve *et al.*'s (2009:56) and Lesko *et al.*'s (2010:826) observations that HIV/AIDS educators had to contend with such similar challenges in some South African schools.

One could argue that the above evidence warrants periodic teacher social learning infrastructures where policy actors from different places converged and cross-pollinated ideas to clarify policy messages to teachers to obtain a common understanding of the best practices. On the contrary, the absence of such structures and the limited staff development the teachers reported in this study suggests a prevalent pattern in which policy actors do not create porous social learning and interaction boundaries across the multi-level system, and with teachers, to make some breakthroughs for clarification of policy. Consequently, the omission of some key curriculum elements by the teachers cannot be surprising.

8.3.8 THEME: TEACHER IMPLEMENTATION ENCOUNTERS

A discussion of this theme seeks to address the research question, "What are teachers' practical experiences with the implementation of this curriculum?" On account of their inadequacy of knowledge of the curriculum due to inadequate pre- and in-service teacher preparation, teachers in this study experienced a number of conceptual constraints as they implemented this curriculum. This supports the observation that lack of capacity is a serious problematic that has often hamstrung

school HIV/AIDS education interventions for teachers (De Lange and Stuart, 2008:129; Theron, 2008:30; UNAIDS, 2011:18).

Teachers reported difficulties interpreting and operationalising certain participatory methods, life skills and themes into teaching due to perceived lack of clarity of the elements. Consequently, they coped by skipping some of the topics and elements they found difficult, and engaging in irregular teaching of the curriculum. This tended towards superficial classroom practice and ineffective student learning. In addition, teachers' confrontation with the curriculum engendered challenging cognitive sense-making experiences of grappling with the intellectual tasks of rephrasing questions and allowing pupils to use vernacular owing to their deficiency in the use of English language. The latter strategy posed the danger of distorting the meanings of policy messages, as is implied in Hill's (2006:66) language perspective which traces variations in the way different policymakers enact policy, to the cognitive sense-making processes they engage in.

The inadequacy of curriculum materials compounded teachers' negative cognitive encounters by imposing on them a sense of cognitive discomfort. For instance, Charles at times ran out of content during lessons, owing to his use of a few curriculum materials with scant information. Thus some of the coping strategies teachers employed in their unique school contexts to attain some form of "homeostasis" included consulting resource persons, using personal intuition and improvisation of materials to conduct teaching. These findings share similarities with findings of a study undertaken by Van Rooyen and Van den Berg (2009:99) which revealed that HIV/AIDS educators who were not adequately trained and supported with resources experienced serious implementation problems.

It was also established in this study that teachers expressed a sense of uncertainty about some of the curriculum elements due to the perceived knowledge vacuum and associated teacher isolation emanating from the inadequate teacher learning infrastructures such as staff development workshops. This scenario contradicts with the importance that Steyn (2011:162) places on the value of teacher learning opportunities when he proffers the view that collaborating teachers can utilise their strength and complement each other, thereby broadening their perspectives. Additionally, teacher learning opportunities that promote some interface between

policy designers and teachers could also go some way towards attaining the kind of mutual adaptation, i.e. negotiation of meanings and trade-offs between designers and teachers (Marsh, 2009:105), that results in teachers' applications which are closer to policy prescriptions.

Confirming Fullan's (2001:1) assertion that, "Change is a double-edged sword, on the one side, exhilaration, risk-taking, excitement, improvements, energising, on the other side, fear, anxiety, loss, danger, panic", findings of this study established an admixture of positive and negative affective experiences teachers grappled with as they enacted this curriculum. Positive experiences included a sense of satisfaction from being able to teach those topics perceived as easy and to use some of the participatory methods well, making use of available resource persons to solicit resources and technical assistance and the presence of some potentially useful HIV/AIDS education infrastructures at a school.

Further, the negative encounters underlined the emotional precariousness of this curriculum which was evidenced by practical situations in which Ellen and Charles grappled with HIV/AIDS infected or affected learners' emotional problems with some resolve despite lack of capacity to handle such delicate psychological issues. Ellen and Charles claimed that they demonstrated a humane heart by sympathising and empathising with the pupils and protecting them against discrimination and stigmatisation, respectively. This evidence supports Wood and Theron's (2008:14) view that in the midst of challenges, HIV/AIDS educators need to be more reflexive, resilient and humane. It further illustrates how the demands of the curriculum could easily engender role ambivalence in teachers in terms of their personal and professional identities. On the one hand, *acting in loco parentis*, Ellen and Charles had to contend with handling the pastoral role of offering pupils psychological support, and on the other, execute their professional role of teaching. Yet again, in the context of lack of capacity and resources, such efforts could be compellingly difficult.

In this study, the daunting emotional experiences that teachers faced arose from dealing with language sensitivities which ultimately manifested in selective teaching of content. Teachers seemed to be responsive to the deeply embedded cultural norms and values of the communities in which they served by avoiding explicit use of

sexuality terms, which they conceived of as contravening the community's culture. This supports Kincheloe's (2008:8) view that teachers should be wary of the demands of propriety of the community in which their schools are located, and Baxen and Breidlid's (2008:18) view that HIV/AIDS and sexuality issues represent a widely contested knowledge area that invokes collision of ideas and emotions.

In this regard, the teachers were exposed to the tension between their obligation to impart the content as expected by policy designers, and the compulsion to respect the cultural scripts of the community. Thus as teachers operated in their classrooms to steer the discourses on HIV/AIDS issues with their learners, their encounters with the curriculum illustrated the extent to which the complex web of human-generated variables could impact their change efforts. Thus policy actors in their different places and spheres of influence expected teachers to mediate the interventions of the AIDS curriculum according to set expectations. However, findings of this study suggest that these policy actors did not seem to realise the fact that their unsupportive responses to this life-and-death curriculum could also contribute to the implementation challenges that the teachers confronted.

8.3.9 THEME: TRANSFORMING IMPLEMENTATION PROFICIENCY

To address the research question, "What do teachers suggest as the ideal ways of enhancing the implementation of this curriculum?" a discussion of themes on this matter ensues.

In this study, participants offered a wide range of suggestions that reflected the general notion of transforming proficiency in the implementation of this curriculum on personal and policy levels. In the context of the conceptual and operational challenges and opportunities that they experienced during teaching, and their perceptions of the curriculum, teachers felt that on a personal level, the improvement of knowledge and teaching skills would contribute towards transforming proficiency in the teaching of this curriculum. This evidence concurs with the general observation that for teachers to make meaningful interventions of HIV/AIDS educational programmes, they should possess the necessary knowledge and skills (Van Rooyen and Van den Berg, 2009:99). It is only when teachers are well armed

with the requisite intellectual capacity that they can be more resourceful as Stella and Ellen suggested, and that they can navigate possibilities of consultation and collaborative sharing of teaching ideas with others, as Charles intimated. Charles's proposal of the teachers' need to work collaboratively with health workers for content knowledge could go some way towards ameliorating the complexity of the curriculum caused by the biomedical discourse with which teachers are unfamiliar. It also concurs with the crucial development where in most sub-Saharan countries health workers have served as a supportive, incentivising asset to teachers as HIV/AIDS knowledge resource persons (UNESCO, 2011:16).

Supporting the view that it is imperative to provide facilitative support to teachers in various forms (UNAIDS, 2009:8; UNESCO, 2011:17; Van Rooyen and Van den Berg, 2009:98) there is evidence in this study that all participants expressed this proposal in the interviews. Facilitative support which incorporates a transformation of educational media and technology which teachers proposed in this study is the hallmark of the enhancement of teacher capacitation. The findings are similar to those revealed in the study conducted by Van Rooyen and Van den Berg (2009:96), in which the availability of physical resources for the teaching of school HIV/AIDS programmes induced willingness in teachers to implement, provided they were capacitated with knowledge.

Stella and Ellen suggested that the Ministry of Education should introduce specialisation in the teaching of this curriculum. They felt that specialist teachers should be trained to exclusively teach it. The teachers seemed to perceive specialisation as a means of equipping teachers with in-depth content and pedagogical knowledge and skills towards the effective implementation of the curriculum. The multifarious roles that the teachers in this study said they performed of counsellor, community leader, manager and educator were documented in the literature (MoESC, 2009:14). They seemed to further justify the suggestion that the teachers made, of specialisation so as to reduce work overload that they reported in this study. However, the question remains as to whether it is not incumbent upon every school teacher to have some knowledge about this precarious curriculum.

Along with all teachers' proposal for the Ministry of Education to intensify staff development workshops was Stella's suggestion that schools should revitalise the

existing school subject committees. A leaf could be taken from the work of the US New York City Department of Education's Office of School Wellness Programmes which according to Walcott (2012: xviii) provide professional development for teachers on HIV/AIDS education in the form of refresher courses. Stella's suggestion could foster enduring infrastructures that render the AIDS curriculum more important and make teachers pay more serious attention to it.

A suggestion that Ellen offered that the Ministry of Education needs to involve grassroots teacher participation in the construction of the AIDS curriculum and related materials supports Mishra's (2009:54) and UNESCO's (2011:42) observation that in Zambia, teachers were involved in the curriculum-making process to produce school HIV/AIDS manuals. The gains that accrue from teachers' understanding of a curriculum which they themselves crafted cannot be underestimated, while at the same time the capacity of teachers to handle the curriculum-making task is yet another challenge.

From the evidence in this study, it appears that the suggestions teachers offered above were foregrounded in their confirmation of the various ways in which they perceived the impact of decisions and actions of policy actors (people) elsewhere in the multi-level social and educational system. The policy actors' ways of responding to this policy framed and shaped teachers' classroom practices. By highlighting their personal and other stakeholders' attributes in relation to this curriculum as well as the challenges and opportunities they faced from these policy actors' influences, teachers illuminated how the seemingly invisible but crucial web of interactions among various actors could constellate to frame and shape their curriculum adaptation.

It was thus evidential that the Ministry of Education, CDU, district education inspectors and school Heads' decisions and actions of non-provision of teacher facilitative support confirmed a scenario in which different policy actors seemed to operate in conceptually distant, uncoordinated worlds of practice of policy regarding this curriculum. Consequently, the picture portrayed in this study suggests a situation whereby, contrary to collaborative engagement with policy, different groups of actors confined within their own boundaries of practice continued with business as usual, leaving teachers to their own devices.

8.4 A SUMMARY OF CHAPTER 8

I have discussed the findings of this study thematically, to address the research questions and objectives set. A description of the findings included nuanced articulation of the key findings in conjunction with relevant literature, which I believe illustrate my achievement of the objectives. Thus I have been able to establish how teachers understood and implemented this curriculum, the personal and contextual factors that played out on their practices, their practical experiences with the curriculum and suggestions of the ideal ways of strengthening its teaching. On the basis of the evidence, I propose a conceptual strategy for enhancing the implementation of this curriculum and spell out the implications of the findings for policy and practice in the next chapter.

CHAPTER 9

IMPLICATIONS OF THE STUDY FOR POLICY AND PRACTICE

9.1 INTRODUCTION

On the basis of the main findings identified in this chapter, implications of this study for policy and practice are described. This is done in the light of the four research objectives the study sought to address presented hereunder:

- 1) To establish how teachers understand and implement this curriculum.
- 2) To establish what and how some personal and contextual factors are playing out on teachers as they are implementing this curriculum.
- 3) To determine teachers' experiences with the implementation of this curriculum.
- 4) To determine teachers' suggestions of the ideal ways of implementing this curriculum and
- 5) To suggest a conceptual strategy for improving the implementation of the AIDS curriculum

It should be appreciated that the immensity of the contribution of this study towards a better understanding of teacher implementation of the AIDS curriculum is explicable in terms of the knowledge gap that I identified before the outset of this study. Not much in-depth, nuanced information was known on teachers' adaptation of and experiences with this curriculum as well as their perspectives of aetiological issues that framed and shaped their change efforts prior to my attempt at this study. With this caveat in mind I now describe the implications of this study.

9.2 THE MAIN FINDINGS AND CONCLUSIONS

9.2.1 Teachers' adaptation of the curriculum

The main finding in this study is that teachers understood and implemented this curriculum relative to their subjective interpretations of the policy messages but in a superficial manner. Except Charles whose understanding and implementation

displayed a considerably close approximation to the expected interactive, participatory pedagogy, Stella's and Ellen's configurations and practices deviated from the specifications of the curriculum and assumed the traditional, transmission-oriented, didactic approach. In Spillane *et al.*'s (2006:55) terms teachers perceived and enacted the curriculum goals of the AIDS curriculum as those that addressed peripheral, superficial educational change. Thus it can be concluded that inevitably, teachers' understanding and enactment of the AIDS curriculum was based on their personal epistemological scripts and voluntary capacity to modify policy to their local use-setting realities. Furthermore, it can be concluded that teachers faced conceptual difficulties with comprehending the demands of the curriculum, resulting in its superficial implementation. The implication of this finding is that educational change leaders should recognise the fact that there is the inevitability of curriculum mutation during teacher implementation of a curriculum. Consequently they should treat curriculum adaptation as a normal, acceptable curricular feature, but which must fall within a recognisable zone of configuration (Huntley, 2005:42). It further implies that change leaders must appraise teachers of the expected teaching approaches through CPTDs in forms of staff development workshops and more effective pre- and in-service teacher preparation proposed by the participants in this study to mitigate superficiality of implementation.

9.2.2 TEACHER IMPLEMENTATION CHARACTERISTICS

A key finding which satisfies the research objective of establishing what and how personal and contextual factors are playing out on teachers includes the teacher implementation characteristics of teachers' inadequate knowledge of the curriculum and negative attitudes towards the curriculum. Except Ellen who expressed a positive attitude, Stella and Charles expressed a negative attitude and lack of commitment to the curriculum. It can thus be concluded that teachers' inadequate knowledge and the intellectual capacity to implement this curriculum, as well as Stella's and Charles's negative attitudes possibly contributed to their superficial implementation of the policy. Teachers' inadequate knowledge of the curriculum suggests that teachers implemented this curriculum through trial and error or trial and success. The implication of this result is that if this anomaly pervades the rest of

the schools in the district, it potentially threatens the curriculum with cumulative curriculum deterioration. It is therefore incumbent upon the Ministry of Higher and Tertiary Education and Ministry of Education to provide effective, adequate pre- and in-service teacher preparation towards the curriculum, respectively.

Regarding teachers' negative attitudes and lack of commitment, it implies that besides providing teachers with adequate capacitation in terms of knowledge, resources and materials, it is more fruitful to seriously commit them by making the curriculum examinable as suggested by the teachers in this study.

9.2.3 DEFICIENT TEACHER CAPACITATION

Another major finding was deficient teacher capacitation which tended to hinder teachers' efforts in the educational change. The paucity of curriculum materials coupled with lack of knowledge-related facilitative implementation support tended to compromise teachers' zeal and commitment to implement this curriculum. The implication of this finding is that at the macro-level, meso-level and micro-level, policy actors in different positions of policy implementation influence should adopt a comprehensive approach to teacher capacitation in all forms of facilitative implementation support and pressure, ranging from materials to staff development to supervision and monitoring, as suggested by this study's participants.

9.2.4 SOME POLICY-RELATED IMPLEMENTATION DYNAMICS

Another key finding concerned some policy-related issues that played out on teachers. At the macro-level of policy formulation and implementation, the Ministry of Education and CDU policy actors' decisions and actions of non-provision of teacher support in terms of materials and teaching time and pressure filtered down to teachers' daily operations. This negatively influenced the responses of teachers to policy in complex ways. At the meso-level and micro-level, District Education Officers', inspectors' and school Heads' general lack of commitment and non-provision of support and pressure also dampened some teachers' attitudes and commitment to educational change. The implication of this result is that teacher

despondency which could loom large in most schools warrants intervention by change leaders by establishing teacher learning infrastructures, allocating more teaching time perhaps through using full-time specialist teachers and supervision.

The Ministry of Education's policy on examination which trivialised examining of the AIDS curriculum was perceived by teachers as a way of marginalising and relegating this curriculum. The implication of this finding is that this curriculum policy could suffer if most teachers in the school district continued to treat it as unimportant for its non-examination. In order to improve practice, the Ministry could consider giving it sufficient examination space in the Grade 7 national examinations as proposed by the participating teachers. This could compel teachers to take the curriculum seriously.

9.2.5 SOME STAKEHOLDERS' PERSONAL ATTRIBUTES

Another key finding was that the negative attitude that learners displayed towards this curriculum and their lack of maturity and learning readiness which Ellen cited tended to cause teacher despondency towards implementing the AIDS curriculum. The indifferent parents' attitude towards the curriculum's content and general HIV/AIDS issues which Charles reported also tended to hinder successful implementation of the curriculum. Consequently, selective teaching was undertaken, most particularly in the case of Charles who said that he operated in a socio-culturally volatile community. The need to capacitate teachers with the knowledge and skills to handle such precarious curriculum policy matters cannot be overemphasised.

9.2.6 CHARACTERISTICS OF THE CURRICULUM

Another major finding of this study is that teachers experienced difficulties translating the curriculum's guidelines into practical teaching due to its complexity and lack of clarity.

It is thus concluded that consequently, (a) superficial and ineffective teaching prevailed in the three classes (b) irregular and/or non-teaching as well as skipping of

some topics occurred. The participants' reports seem to suggest that the language in which the curriculum policy messages were described was one of the key problems that contributed to their conceptual difficulties in comprehending the curriculum. Semantic challenges led to Charles's misconception of some of the curriculum elements, and to Stella's inability to discern the conceptual linkages between some curriculum features, and to Ellen's misunderstanding of the functions of participatory methods. Here were practical cases in which, at the classroom level of curriculum implementation, the issue of language could impact teachers' interpretation of policy messages described in semantics whose meanings they perceive in a conceptually different manner. These were thus classic cases in which, owing to some unprecedented exogenous factors that may play out on teachers, such as the characteristics of the curriculum, those meanings espoused by authors of policy can inextricably transform into new classroom interpretations.

The implication of this finding is that change leaders should establish teacher professional development communities in the way of CPTD platforms in order to create teacher learning infrastructures that may ultimately evolve to COPs at school, district and provincial levels. Such platforms can create spaces for teachers to meet and share tacit knowledge and technically assist one another towards a common understanding and clarification of curriculum guidelines. The finding also implies that establishing and maintaining teacher learning infrastructures in which macro-policy change leaders periodically interface with teachers at certain policy deliberation venues can go some way towards narrowing the policy designer-teacher working knowledge gap.

9.2.7 TEACHER IMPLEMENTATION ENCOUNTERS

Another major finding was that teachers experienced serious conceptual challenges from the acute shortage of curriculum materials, resulting in for instance, Charles running out of content and all of them skipping some topics due to a lack of information. Skipping of lessons and topics seems to have been caused by the paucity of materials such as textbooks and the general lack of supervision reported by the participants in this study. This scenario could contribute to curriculum

deterioration. It necessitates that the Ministry of Education provides sufficient curriculum materials to schools as suggested by participants in this study.

A key finding involved teachers' negative experiences when dealing with topics that invoked sensitive language usage. Consequently there was selective teaching of content. This negatively impacts successful policy enactment. The implication is that more continued teacher preparation to equip teachers with cognitive and emotional intelligence to handle such precarious issues is quintessential for effective practice.

Another important finding is that teachers encountered some positive experiences with the implementation of the curriculum. These experiences ranged from teachers' ability to understand and handle some curriculum aspects, to utilising some potentially useful teacher learning infrastructures at school, to the availability of resource persons whom they consulted for technical assistance and curriculum materials. Here were some unusual cases in which certain policy actors both inside schools (such as student teachers and recently qualified teachers) and interestingly, those with an interest in the AIDS curriculum but were not educators (Health workers) responded to the policy positively.

The implication of this finding is that the Ministry of Education should intensify CPTDs while school Heads can capitalise on revitalising the operations of existing teacher learning infrastructures (subject school committees) and strengthen relationships with Health personnel and any other willing community actors interested in assisting teachers, to drive teachers towards collaborative work.

It can thus be concluded that overall, an understanding of current teacher implementation of Zimbabwe's primary school AIDS curriculum based on data from the three teachers is explicable in terms of teachers' epistemological scripts, conceptual and operational challenges and opportunities and related implementation dynamics. An important lesson to be learnt from the findings of this study is that educational change is primarily contingent upon how a teacher as cognitive sense-maker conceptualises policy, and responds to it in the context of personal and exogenous antecedents. Inherent in this lesson is the fact that by their non-involvement and non-provision of support and pressure to teachers, change leaders and policy actors operating in their various places of work in relation to the AIDS

curriculum seemed to be oblivious of the gap between policy and practical classroom realities. Apparently, in their implementation-as-directed mode of thinking they seemed to believe that once they mandated policy, desired outcomes would automatically materialise in classrooms. They seemed to ignore how various implementation factors could play out on teachers' practical experiences with this curriculum, and frame and shape their response to policy.

9.2.8 CONCLUDING INSIGHTS: SITUATING THE FINDINGS IN HONIG'S MODEL AND COGNITION

To extend our understanding of the implementation of this curriculum, I situate the main findings of this study in Honig's model and cognition as the theoretical foundation of this thesis that I developed.

A key finding in this study is that teachers understood and implemented this curriculum relative to their subjective interpretations of the policy, but superficially. In terms of Honig's model and cognition, phenomenologically, as the central change agents operating at local sites, teachers made sense of this curriculum policy and enacted it the way they thought it is done. They adapted the written policy drawing on policy messages that had been conceived and described by other policy actors, the CDU, and, as is what it should be, reconfigured the policy into modified versions in their uniquely different classrooms. This underscores the inevitable process of mutation and the attendant intellectual activities that a teacher engages in when making sense of a curriculum, resulting in a teacher's subjective interpretation of the curriculum policy.

The fact that teachers adapted the policy superficially at their local sites explains how decisively the "place" element in terms of physical and professional distance between designers and teachers, works to impact teachers' interpretation of policy. It can be learnt that in this study since curriculum designers simply cascaded this sensitive curriculum policy down from their distant places to teachers for them to use without interfacing with them, possibilities of "distant-zone configurations" (Huntley, 2005:40) and conceptual constraints with the policy become apparent. The decision of simply mandating curriculum policy, expecting teachers to implement it to

specification in a one-size-fits all sensibility is discordant with the assertion that I make from my theorisation that a complex interplay of unpredictable issues constellate to shape teachers' work.

A key finding in this study which played out on teachers' work was teacher personal attributes such as a lack of working knowledge of the curriculum, negative attitudes and lack of commitment. Probably because educational change leaders did not assist teachers to evolve teacher implementation characteristics in relation to this sensitive curriculum policy, teachers conceived of the policy messages as complex and unclear. Change leaders failed to understand the notion that curriculum implementation is a social learning process in which they needed to effect a reculturing of educational change in teachers, that is altered beliefs, attitudes, and use of the new materials (Fullan, 2001:37), before or as they implemented the curriculum over time.

In concurrence with Honig's model and cognition that emphasises the critical influence of the context in which teachers implement policy, findings in this study revealed several contextual factors that combined with teachers' personal attributes to influence their work. In this study change leaders simply asked teachers who were operating within a broad parent social environment of a developing country (Zimbabwe), whose teaching assumptions are deeply entrenched in the traditional, formalist teacher-centred pedagogy (Guthrie, 2013:129-132; Tabulawa, 2013:13), to implement a new curriculum using the learner-centred pedagogy. By asking teachers to do this in an already teacher-centred curriculum environment without capacitating them to transcend the traditional to the new pedagogy, change leaders were not mindful of the unpredictable myriad of complex implementation dynamics that teachers would confront at their respective local sites. It was not surprising that teachers experienced conceptual and operational constraints.

Another key finding from this study is that, in a negligible sense, teachers encountered positive implementation experiences from the implementation support that they received from health workers in the form of curriculum materials. In terms of Honig's model, this scenario illustrates the need for curriculum managers to exploit the actions of play actors outside the school as an assert that presents itself within the systemic web of social interactions among various stakeholders whose

collaborative contributions can alleviate challenges that HIV/AIDS teachers often face.

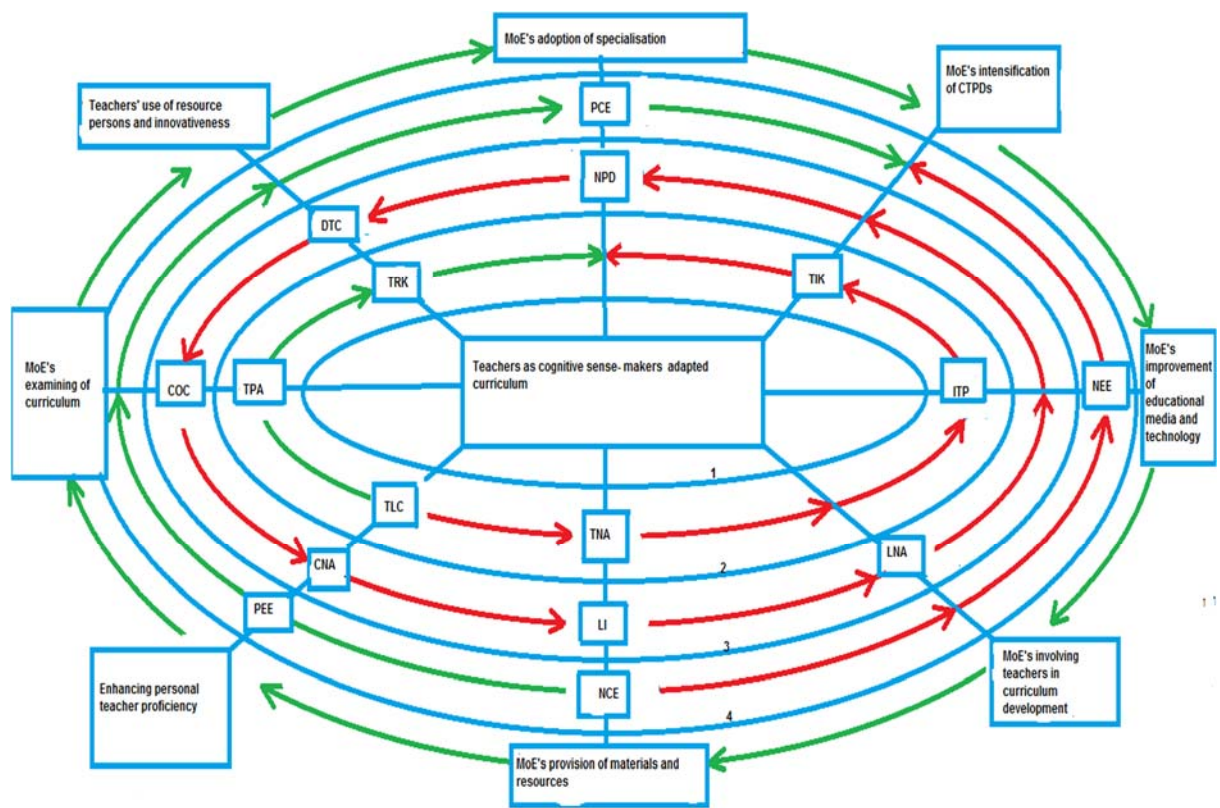
It emerged as a key finding in this study that teachers encountered negative implementation experiences engendered by the pressure to observe the socio-cultural demands of propriety of the communities in which their schools were embedded, resulting in selective teaching of content. In the case of Charles where parents displayed indifference to this emotion-laden policy, this contributed to a volatile cultural environment. Here is a case that illustrates the role that the actions of other play actors outside the school play as key stakeholders within the systemic web of social interactions, to frame and shape HIV/AIDS teachers' cognitive sense-making of this sensitive policy.

The above situation was exacerbated by the fact that educational change leaders did not capacitate teachers with the working knowledge and skills for them to contend with the challenges of teaching about AIDS in an unsupportive and culturally conservative environment. The MoE, CDU, school Heads and other key actors who possibly could have been engaging with teachers in CPTDs in their schools and bringing various other stakeholders together in staff development workshops to appraise them of the demands of this sensitive policy did not do so. They could possibly engage a systemic approach that I theorised from Honig's model, to bring all stakeholders together for deliberation in order to strike a common understanding of this sensitive curriculum policy, thereby disabusing one another of some cultural prejudices that could stand in the way of AIDS teachers' work.

I contend that this study revealed empirical evidence that confirms the possibility of understanding teacher implementation of the AIDS curriculum in terms of a systemic interplay of a myriad of complex personal and contextual factors that constellated to frame and shape teachers' work. A key lesson to learn from this study is that teacher implementation of a sensitive curriculum policy such as AIDS is characterised by a host of unpredictable factors researchers should continue to probe.

9.3 RECOMMENDATIONS FOR A CONCEPTUAL STRATEGY TO GUIDE FUTURE INTERVENTION

In order to improve teacher implementation of Zimbabwe’s primary school AIDS curriculum, a conceptual strategy constructed from the key findings of this study is suggested. Hereunder is the strategy which is visually represented on an educational change wheel in figure 9.1.



Key

Circle 1 :Personal factors

Circle 2 :Contextual factors

Circle 3 :Teachers implementation encounters

Circle 4 :Suggestions for improvement

Figure 9.1 : An educational change wheel depicting a conceptual strategy

9.3.1 CHANGE WHEEL EXPLAINED

The theme in the box at the centre of the wheel shows that as cognitive sense-makers, teachers mutated and enacted the curriculum according to their personal subjective interpretations and contextual use setting realities, thereby displaying their unique resultant practices.

Generally, the arrows that go in the clockwise direction inside the circles represent positive influences of various issues on teachers' change efforts, while those going in the anticlockwise direction depict negative influences. Represented round the circumference of Circle 1, one teacher's positive attitude (TPA) towards the curriculum and teachers' rudimentary knowledge (TRK) were personal factors that positively influenced teachers' practices. Teachers' lack of commitment (TLC), teachers' negative attitudes (TNA), inadequate teacher preparation (ITP) and teachers' lack of knowledge (TLK) are the personal factors, that is teacher implementation characteristics that had negative influences. Round the circumference of Circle 2, contextual factors, namely characteristics of the curriculum (COC), community's negative attitudes (CNA), learners' negative attitudes (LNA), learners' immaturity (LI), negative policy-related implementation dynamics (NPD) deficient teacher capacitation (DTC) all negatively influenced teachers' practices. Round the circumference of Circle 3, the teacher implementation encounters that tended to fuel successful change included positive cognitive encounters (PCE) and positive emotional encounters (PEE). Negative cognitive encounters (NCE) and negative emotional encounters (NEE) militated against teachers' change efforts.

I contend that for the occurrence of any meaningful intervention to improve practice of this policy, change leaders, policy makers and educators from the Ministry of Education and CDU can make reference to a conceptual strategy that depicts research-based evidence as a robust theoretical platform from which to glean insights to develop effective intervention strategies. The conceptual strategy depicts nuanced and in-depth information from teachers themselves regarding those human-generated personal and contextual factors that played out on their experiences with the implementation of this curriculum. From this corpus of baseline information change leaders, policymakers and educators can draw theoretical insights for making decisions to improve practice, The conceptual strategy concretely highlights

factors that tended to promote and/or immobilise successful teacher implementation efforts as teachers practically came into contact with this curriculum. A knowledge of these issues can empower the change leaders with broad ideas to make well-informed decisions for implementing interventions to strengthen the implementation of this curriculum, which are based on theoretically grounded evidence.

9.4 LIMITATIONS OF THE STUDY.

This case study covers very small samples of schools and teachers from a potentially large number of participants in this inquiry. Consequently, the negligible sample places limitations on generalisation of the findings to a larger population of schools in the district, as well as render it difficult to claim representativeness of the findings. By virtue of its being qualitative, it was not the intention of the study to generalise. However, the task of excavating in-depth, nuanced information in order to better understand the central phenomenon warranted this approach. Despite the foregoing limitation, I contend that the findings could still be transferable to analogous contexts. In addition, the methodological triangulation employed in this study could strengthen the study's usefulness and transferability to other similar settings.

9.5 SUGGESTIONS FOR FURTHER STUDIES

Besides the conceptual strategy that is proposed as a set of nuanced ideas in this study, investigating the issue of provision of facilitative teacher support can be done with a wide array of policy actors in order to improve practice. The research could include larger samples of schools, educational and community institutions and participants to capture a broader corpus of information for a bigger picture of teacher implementation of this curriculum.

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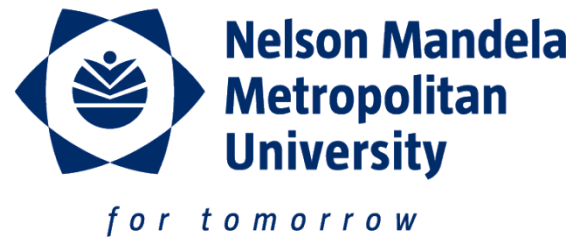
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APPENDIX A: ETHICAL APPROVAL LETTER FROM REC-H



FACULTY OF EDUCATION

Tel . +27 (0)41 504 2125

Fax. +27 (0)41 504 9383

3 September 2012

Mr S Musingarabwi / Prof S Blignaut

Education Faculty

NMMU

Dear Mr Musingarabwi / Prof Blignaut

UNDERSTANDING CURRENT TEACHER IMPLEMENTATION OF ZIMBABWE'S PRIMARY SCHOOL AIDS CURRICULUM: A CASE STUDY

Your above-entitled application for ethics approval was approved by the Faculty Research, Technology and Innovation Committee of Education (ERTIC) meeting on 16 August 2012.

We take pleasure in informing you that the application was approved by the Committee.

The ethics clearance reference number is **H12-EDU-CPD-021**.

We wish you well with the project. Please inform your co-investigators of the outcome, and convey our best wishes.

Yours sincerely

A handwritten signature in black ink, appearing to read "J. Elliott-Gentry", written over a white rectangular area.

Ms J Elliott-Gentry -Secretary: ERTIC

APPENDIX B: APPLICATION FOR PERMISSION FROM MINISTRY OF EDUCATION,
SPORT, ARTS AND CULTURE TO CONDUCT A RESEARCH

20/08/2012

THE PERMANENT SECRETARY: MINISTRY OF EDUCATION, SPORTS, ATR AND
CULTURE

Dear Sir/Madam

Re: Application to conduct a study in the Midlands Province

**Topic: Understanding current teacher implementation of Zimbabwe's Primary School
AIDS curriculum: A Case Study.**

I am a PHD- Education student at the Nelson Mandela Metropolitan University (NMMU) who is currently employed as a lecturer at Joshua Mqabuko Nkomo Polytechnic. I am asking for your permission to conduct a research on [Education- Curriculum Studies] under the supervision of Prof. S Bignaut in three primary schools, one rural and two urban, in the Midlands Province. Involving three grade six teachers as participants, this study will meet the requirements of the Research Ethics Committee (Human) of the NMMU.

Permission will be sought from the teachers prior to their participation in the research. Only those who consent will participate. All information collected will be treated in strictest confidence and neither the school nor individual teachers will be identifiable in any reports that are written. Participants may withdraw from the study at any time without penalty. The role of the school is voluntary and the School Principal may decide to withdraw the school's participation at any time without penalty.

Thank you for your co-operation in advance.

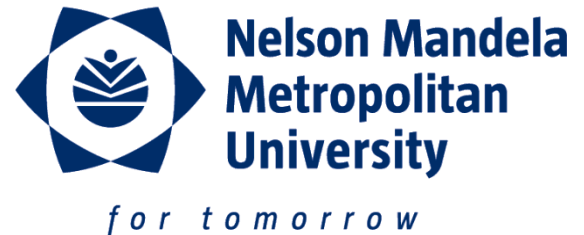
Yours faithfully

Starlin Musingarabwi

APPENDIX C: APPLICATION FOR PERMISSION FROM THE PROVINCIAL EDUCATION DIRECTOR: MIDLANDS PROVINCE TO CONDUCT A RESEARCH

• PO Box 77000 • NelsonMandelaMetropolitanUniversity

20/08/2012



THE PROVINCIAL EDUCATION DIRECTOR: MIDLANDS PROVINCE

Dear Sir/Madam

Re: Application to conduct a study in your Province

Topic :Understanding current teacher implementation of Zimbabwe's Primary School AIDS curriculum: A Case Study.

I am a PHD- Education student at the Nelson Mandela Metropolitan University (NMMU) who is currently employed as a lecturer at Joshua Mqabuko Nkomo Polytechnic. I am asking for your permission to conduct a research in your province in [Education- Curriculum Studies] on the abovestated topic, under the supervision of Prof. S Bignaut. I intend to conduct the study in three primary schools, one in the Gweru rural school district and two in the Gweru urban school district. The Ministry of Education, Sport, Arts and Culture has given approval to approach schools for my research. A copy of their approval is contained with this letter. Involving grade six teachers as participants, this study will meet the requirements of the Research Ethics Committee (Human) of the NMMU.

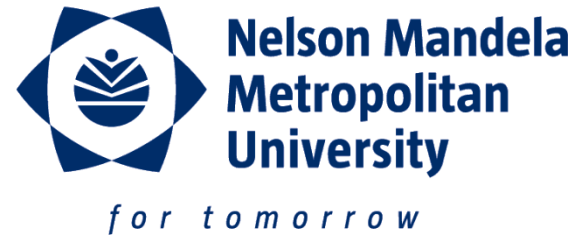
Permission will be sought from the teachers prior to their participation in the research. Only those who consent will participate. All information collected will be treated in strictest confidence and neither the school nor individual teachers will be identifiable in any reports that are written. Participants may withdraw from the study at any time without penalty.

Thank you for your co-operation in advance.

Yours faithfully

Starlin Musingarabwi

APPENDIX D: APPLICATION FOR PERMISSION FROM THE SCHOOL PRINCIPALS TO
CONDUCT A RESEARCH



• PO Box 77000 • NelsonMandelaMetropolitanUniversity

20/08/2012

Re: Application to conduct a study in your school

**Topic: Understanding current teacher implementation of Zimbabwe's Primary School
AIDS curriculum: A Case Study.**

My name is Starlin Musingarabwi, and I am a PHD- Education student at the Nelson Mandela Metropolitan University (NMMU) who is currently employed as a lecturer at Joshua Mqabuko Nkomo Polytechnic. I am asking for your permission to conduct research on the above stated topic under the supervision of Professor Sylvan Blignaut, Faculty of Education, NMMU, and Professor Bill Holderness, Faculty of Education, NMMU. The Ministry of Education, Sport and Culture and the Provincial Education Directorate have given approval to approach schools for my research. Copies of their approval are contained with this letter. I invite you to consider taking part in this research. This study will meet the requirements of the Research Ethics Committee (Human) of the NMMU.

Permission will be sought from the teachers prior to their participation in the research. Only those who consent will participate. All information collected will be treated in the strictest confidence and neither the school nor individual teachers will be identifiable in any reports that are written. Participants may withdraw from the study at any time without penalty. The role of the school is voluntary and the School Principal may decide to withdraw the school's participation at any time without penalty.

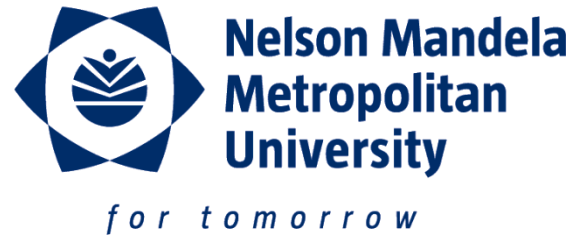
Thank you for your co-operation in advance.

Yours faithfully

Starlin Musingarabwi

APPENDIX E: APPLICATION FOR PERMISSION FROM
TEACHERS TO CONDUCT A RESEARCH

• PO Box 77000 • Nelson Mandela Metropolitan University



20/08/2012

Dear Sir/Madam

Re: Application to conduct a study with you in your classroom

My name is Starlin Musingarabwi and I am a PHD- Education student at the Nelson Mandela Metropolitan University in South Africa who is currently employed as a lecturer at Joshua Mqabuko Nkomo Polytechnic. I am writing to ask for your permission to conduct a study entitled "Understanding current teacher implementation of Zimbabwe's primary school AIDS curriculum: A case study," with you.

The purpose of this study is to explore and understand how grade 6 teachers understand and implement this curriculum. I am collecting data from three grade 6 teachers in three sampled schools. The data collected will be transcribed and saved in computer files which are labelled with pseudonyms, to protect the confidentiality of participants. Effectively, your name and the school will not be identifiable with the written or taped information in any way.

I employ document analysis, lesson observations and interviews to collect data from you. I intend to conduct a document analysis of your AIDS scheme/plan to analyse how you interpret and enact this curriculum. This document analysis will be followed by three interviews with you, which take each about forty-five minutes, as a follow up to discuss your scheme/plan. Your role is thus to give me your views, which, with your permission, I audiotape.

Please be assured that the information you supply through any of the above instruments will be treated in the strictest confidentiality. In addition, you are free to withdraw from this study at any time without penalty.

Thank you in advance for your co-operation.

Yours faithfully

Starlin Musingarabwi (Mr)

APPENDIX F: DOCUMENT ANALYSIS PROTOCOL

Week 1			Week 2			Week 3		
Description of:	Criteria	Reflective Notes	Description of:	Criteria	Reflective Notes	Description of:	Criteria	Reflective Notes
Content			Content			Content		
Teaching methods			Teaching methods			Teaching methods		
Life Skills			Life Skills			Life Skills		
Week 4			Week 5			Week 6		
Description of:	Criteria	Reflective Notes	Description of:	Criteria	Reflective Notes	Description of:	Criteria	Reflective Notes
Content			Content			Content		
Teaching methods			Teaching methods			Teaching methods		
Life Skills			Life Skills			Life Skills		
Week 7			Week 8			Week 9		
Description of:	Criteria	Reflective Notes	Description of:	Criteria	Reflective Notes	Description of:	Criteria	Reflective Notes
Content			Content			Content		
Teaching Methods			Teaching Methods			Teaching Methods		
Life Skills			Life Skills			Life Skills		
Week 10			Week 11			Week 12		
Description of:	Criteria	Reflective Notes	Description of:	Criteria	Reflective Notes	Description of:	Criteria	Reflective Notes
Content			Content			Content		
Teaching Methods			Teaching Methods			Teaching Methods		Reflective Notes
Life Skills			Life Skills			Life Skills		

APPENDIX G: LESSON OBSERVATION PROTOCOL FOR THE TEACHERS

Teacher name----- Gender: ----- Lesson number-----

Teaching Experience in years: -----

Teaching experience in years, of teaching AIDS curriculum: -----

Date-----

School Site Code----- Number of children-----

Age range of children-----

Duration of observation: -----

Introduction

My name is Starlin Musingarabwi and I am a PHD-Education student from Nelson Mandela Metropolitan University, South Africa. I am conducting a study on teacher implementation of Zimbabwe's primary school AIDS curriculum. The purpose of this study is to explore and understand how grade 6 teachers understand and implement the primary school AIDS curriculum. I will collect data from 3 grade 6 teachers in three schools around Gweru Urban and Lower Gweru Rural areas. To protect the confidentiality of the participants, I will transcribe all the data I collected from you and save it into computer files which are labelled with pseudonyms. Consequently your name and school will not be identifiable with the written information materials.

As well, you are free to withdraw from this study at any time without penalty. Thus, in the understanding that you consented to this study by signing the consent form, I am asking for your permission to see you teaching the AIDS curriculum, while I record the process in field notes.

Please feel free to ask me anything that is not clear to you.

Description of the setting:

Description of the grouping	Reflective notes
Description of teaching methods	Reflective notes
Description of teacher sensitivities to language usage	
Detailed description of materials used	Reflective notes
Detailed description of children's activities	Reflective notes
Detailed description of Skills	Reflective notes
Detailed description of interactions	Reflective notes

General Comments

I thank you for your co-operation and participation in this study. Please be assured that the information you provided will be treated in the strictest confidentiality, and that in future lesson observations, this assurance will be maintained.

APPENDIX H: POST-DOCUMENT ANALYSIS INTERVIEW SCHEDULE

Project: Understanding current teacher implementation of Zimbabwe’s primary school AIDS curriculum: A case study.

Time of interview: -----

Date: -----

Place: -----

Interviewer: -----

Interviewee: -----

Position of interviewee: -----

Gender of interviewee: -----

Position of interviewee: -----

Interviewee’s teaching experience: -----

Introduction

My name is Starlin Musingarabwi and I am a PHD-Education student from Nelson Mandela Metropolitan University, South Africa. I am conducting a study on teacher implementation of Zimbabwe’s primary school AIDS curriculum. As you may recall, I asked for a copy of your scheme/plan in my initial visit. I collected the data from the copy using the data analysis instrument which you retained. Today I intend to hold a brief interview with you as a follow up to your scheme/planning to share views. If I may repeat, the purpose of this study is to explore and understand how grade 6 teachers understand and implement the primary school AIDS curriculum. I will collect data from 3 grade 6 teachers in three schools around Gweru Urban and Gweru Rural Resettlement area. To protect the confidentiality of the participants, I will transcribe all the data I collected from you and serve it into computer files which are labelled with pseudonyms. Consequently your name and school will not be identifiable with the written information materials.

As well, you are free to withdraw from this study at any time without penalty. Thus, in the understanding that you consented to this study by signing the consent form , I am asking for permission to audiotape your responses. If you are agreed, now we may begin the session.

Please feel free to ask me anything that is not clear to you.

Questions

- 1. You scheme/planned your term’s work the way you did. Now, tell me as much as you can, how do you understand the way it is done to scheme/plan and prepare to implement the AIDS curriculum? ---

Possible probes: How did you produce this scheme for your class? Tell me more.

2. What factors do you think influence the way you scheme/plan?/ Who do you think contribute to the way you scheme/plan? How? Why? What about you, how do you yourself contribute to the way you scheme/plan this curriculum?

3. Your AIDS curriculum scheme/plan includes/excludes caring for the infected children as one of your key roles as an HIV/AIDS educator. I would ask you to shed more light on your performance of the roles.

Possible probes: What are some of the roles? How do you cope with them? What could be some factors that may enable you to perform the roles of an HIV/AIDS educator? What could be those factors that disable you from performing the roles? Tell me more.

4. Your scheme/plan includes/excludes themes, life skills and participatory teaching methods. I would ask you to shed light on how and why this is the case.

Possible probes: Why? What could be the factors influencing your exclusion/inclusion of these elements in your scheme/plan?

5. What do you picture as the ideal way of preparing HIV/AIDS prevention programmes for your class? How could this be enhanced?

6. If you have anything additional to say about our topic, you are free to do so.

I thank you for your co-operation and participation in this study. Please be assured that the information you provided will be treated in the strictest confidentiality, and that in future interviews this assurance will be maintained

APPENDIX I: POST LESSON OBSERVATION INTERVIEW SCHEDULE FOR TEACHERS

Project: Understanding current teacher implementation of Zimbabwe’s primary school AIDS curriculum: A case study.

Time of interview: -----

Date: -----

Place: -----

Interviewer: -----

Interviewee: -----

Position of interviewee: -----

Gender of interviewee: -----

Position of interviewee: -----

Interviewee’s teaching experience: -----

Introduction

My name is Starlin Musingarabwi and I am a PHD-Education student from Nelson Mandela Metropolitan University, South Africa. I am conducting a study on teacher implementation of Zimbabwe’s primary school AIDS curriculum. The purpose of this study is to explore and understand how grade 6 teachers understand and implement the primary school AIDS curriculum. Now I intend to hold a brief interview with you as a follow up to your lesson delivery to share views. I will collect data from 3 grade 6 teachers in three schools around Gweru Urban and Gweru East Rural Resettlement areas. To protect the confidentiality of the participants, I will transcribe all the data I collected from you and serve it into computer files which are labelled with pseudonyms. Consequently your name and school will not be identifiable with the written information materials.

As well, you are free to withdraw from this study at any time without penalty. Thus, in the understanding that you consented to this study by signing the consent form , I am asking for permission to audiotape your responses. If you are agreed, now we may begin the session.

Please feel free to ask me anything that is not clear to you.

Questions

1. You conducted the AIDS lessons the way you did. Now, tell me as much as you can , how you understand to be the way lesson delivery is done to implement this curriculum.

Possible Probes: How? Why do you mean? Tell me more.

2. What factors do you think could contribute to the way you teach this curriculum?

Possible Probes: Who do you think in some way contributes to the way you understand and teach the way you do? How/ Why? What of you as an individual? How do you think you fared in delivering the lessons? Why? Substantiate.

3. To what extent do you think your lesson included/excluded the following issues: a) use of language that touched on sensitive issues that could affect HIV/AIDS infected or affected children? b) use of participatory methods? c) development of life skills?

Possible probes.

What could be the cause of the inclusion/exclusion of the aspects? Who could possibly contribute to the way you taught your lessons? How? Tell me more.

4. How best do you think you could have taught your lesson-----

5. If you have anything additional to say about our topic, you are free to do so.

I thank you for your co-operation and participation in this study. Please be assured that the information you provided will be treated in the strictest confidentiality, and that in future interviews this assurance will be maintained.

APPENDIX J: INTERVIEW SCHEDULE FOR TEACHERS ON OVERALL IMPLEMENTATION OF THE CURRICULUM

Project: Understanding current teacher implementation of Zimbabwe’s primary school AIDS curriculum: A case study.

Time of interview: -----

Date: -----

Place: -----

Interviewer: -----

Interviewee: -----

Position of interviewer: -----

Gender of interviewer: -----

Position of interviewee: -----

Gender of interviewee: -----

Interviewee’s teaching experience: -----

Introduction

My name is Starlin Musingarabwi and I am a PHD-Education student from Nelson Mandela Metropolitan University, South Africa. I am conducting a study on teacher implementation of Zimbabwe’s primary school AIDS curriculum. The purpose of this study is to explore and understand how grade 6 teachers understand and implement the primary school AIDS curriculum. I will collect data from 3 grade 6 teachers in three schools around Gweru Urban and Lower Gweru Rural areas through semi-structured interviews. The interviews should take about one hour. To protect the confidentiality of the interviewees, I will transcribe all the data I collected from you and serve it into computer files which are labelled with pseudonyms. Consequently your name and school will not be identifiable with the written information materials.

As well, you are free to withdraw from this study at any time without penalty. Hence, in the understanding that you consented to this study by signing the consent form , I ask for permission to audiotape your responses. If you are agreed, now we may begin the session.

Please feel free to ask to ask me anything that is not clear to you.

Questions

1. Tell me as much as you can what you see as your picture of your individual way of implementing the AIDS curriculum.

Possible probes: How? Why/ Tell me more.

2. Personally what do you perceive as factors that influence your understanding of how to implement the AIDS syllabus?

Possible Probes: In what ways? Who do you think contributes to your understanding of how to implement it? What of you as an individual, how do you yourself contribute to your understanding how to implement it? Why?

3. Personally, what factors do you think influence the way you implement this syllabus?

Possible Probes: Who do you think contributes to the way you implement this syllabus? In what ways? What of you as an individual, how do you yourself contribute to the way you implement this syllabus? Why? Substantiate.

4. How clear do you find the following elements of the AIDS curriculum?

a) content:-----

b) teaching methods:-----

c) assessment of students work: -----

Possible Probes: What factors do you think influence your finding the elements clear/not clear? How? Why?

What strategies have you used to better understand the aspects you do not find clear to you?

What results have your strategies above , yielded then?-----

5. What do you perceive as major challenges confronting you personally, in your implementation of this curriculum?

Possible probes: What factors could be contributing to these challenges? How? Why? Who could be contributing to the challenges?-----

What strategies have you used to address the challenges above? What results have the strategies yielded then?

6. What are some of the positive influences at your disposal that can help you to understand how to implement this curriculum?

Possible probes: How effective are these influences? Tell me more.

7. What are some of the positive influences at your disposal that can help you to implement this curriculum in the best way possible?

Possible probes: How effective are these influences? Tell me more.

8. What do you perceive as some of the barriers that stand in your way in implementing this curriculum in the best way possible?

Possible probes: How? Tell me more. -----

9. What strategies have you used to address the challenges you mentioned above? What results have such strategies yielded then?-----

10. If you have anything to add you are free to do so.

11. Tell me of anyone who can give me more information on this subject.

I thank you for your co-operation and participation in this study. Please be assured that the information you provided will be treated in the strictest confidentiality, and that in future interviews this assurance will be maintained.