Children Affected By AIDS as Challenged Learner in Nepal

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Abstract

Nepal government and non-governmental organization are working in the field of education and focusing to ensure the quality of education with total enrolment of children in school. However, there is lacking to address the children affected by AIDS (CABA) to ensure the education rights and CABA compel to drop out from education. HIV issues are existing since 1988 but government of Nepal developed the policy on education to CABA in 2011; therefore we can analyze the status of government concentration on education to children affected by AIDS. The article is based on field experiences and secondary sources because I have been involving in this field since 1995 and focusing in children affected by AIDS. Stigma and discrimination is the main cause to drop the school by children affected by AIDS and there are no specific strategies to intervene to continue the education of children affected by AIDS. Government of Nepal has program to other children like children with disability or scheduled caste or geographical based but do not have the program to support the children affected by AIDS. Children affected by AIDS have always challenges to face the stigma and discrimination at schools and society which directly affect on their education.

Key words: HIV, Children, and Education

Background

The first case of HIV was recorded in Nepal in 1988. As of 15th July 2014, a total of 25,222 HIV infections have been reported in Nepal, by National Centre for AIDS and STD Control (NCASC, 2014a) and of the total reported HIV/AIDS infections, children (0-19 years) 9.81%. Although reported cases are low, actual HIV/AIDS infection in Nepal is feared to be many times higher. The actual number of adults and children living with HIV/AIDS is presently estimated to be 40,723 and children are 3,282 (NCASC, 2014b).

In Nepal, there is no specific regular program on education and livelihood by government to ensure the rights of children affected by AIDS. However, there are grant specific programs for children affected by AIDS (CABA). For example, Global Fund program on HIV and AIDS is being implemented but it was not able to address condition of children affected by AIDS as the responsible organizations (Ministry of Health, & Save the Children) did not have efficiency to conduct programs from 2010 AD to 2014 AD which was directly affected more than 2200 children affected by AIDS as well as not following their organizational motto of child rights. Stakeholders have put CABA issue to Global Fund
(GF) mission during their many visits to Nepal many times but GF has overlooked CABA and are only listening to development agencies.

Due to social stigma and discrimination, Children Affected by AIDS (CABA) is not able to enroll the school and having inequalities to access on educational benefits. People have misconception on mode of transmission of HIV and it creates the fears among the people to interact with HIV infected or affected people. The misconception also influences in the education sector too. When school management committee comes to know about the HIV status of student or his/her families, school management committee also gives pressure to drop the school. Besides this, society also gives pressure to school management committee to drop the CABA student because of lack of proper knowledge among the society and school management committee about HIV and AIDS.

There are no empirical studies about the children affected by AIDS in Nepal to explore the psycho-social situation and their educational status. However, there is only a study done in selected five districts of Nepal but does not represent the all children affected by AIDS.

**School Enrolment**

In Nepal, there are still challenges to meet the target of school enrolment due to socio-economic and cultural practise. If we see the enrolment among children affected by AIDS (CABA), the study in five districts showed school enrolments among children affected by AIDS (93%) who were aged 12-17 years. However, current school enrolment was among CABA boys (87%) and CABA girls (75%). For instance, children from Dalit community had comparatively lower school enrolment (78 % CABA) (Center for Research on Environment Health and Population Activities [CREHPA], 2009). But, there is no statistical data about the dropout rate among CABA.

**Psycho-social Issues**

In the community, there is still psycho-social problem among the children affected by AIDS and their family members. During my field visit, a PLHA guardian says, “The community knows about my HIV status but I do not want to tell school kids that my children are children of PLHA. So, I have not been to any meeting of parent teacher association. I am unable to raise our concern in school so far”.

The study showed that children infected with HIV are more likely to experience fear and isolation when they are left alone in the house. Within the HIV infected children, more girls (76%) than boys (56%) tend to experience fear and isolation when left alone. The extent of experiencing fear and isolation is high in double orphaned children; much higher among the girls (79%) than in boys (54%). Feeling of fear and isolation increased with increase in education level. Out of 67 CABA boys studying in the primary level, close to two fifths (39%) have expressed of having such feelings, as against 51% and 48% of those studying in the lower secondary and secondary levels respectively (CREHPA, 2009).

**Social Protection System**

There is policy and guideline to protect some specific children to ensure their rights like children with disability, children of scheduled caste but there is no specific policy and law to ensure the rights of children affected by AIDS. There is only grant basis program to provide the services to children affected by AIDS (CABA) in Nepal. However, all CABA do not have right information about organization working in HIV and AIDS. Less than a half (49%), of the CABA, one-tenth (11%) of care-givers of CABA reported that they knew about organization working for HIV/AIDS. Few CABA (13%) have become members of a social organization working in HIV/AIDS sector (CREHPA, 2009).

The majority of CABA children (60%) were unaware about any place where they could find psycho-social support. One-third (32%) of them stated NGO as the place for such support. One-eighth (12%) of CABA respondents cited hospital as a place for psycho-social support (CREHPA, 2009).
Stigma and Discrimination
During my field visit, a mother says, “I talked to the school management committee and they agreed to enroll my child but I felt that it was necessary to inform them of the HIV status of my child. They were supposed to inform me about the progress of my child’s enrolment but they never contacted me thereafter. Then, I admitted my child in another school and did not share my child’s HIV status with the school management”.

The study has shown that the majority of children affected by AIDS (CABA) had experienced discrimination in their life. The common forms of discrimination faced by them were avoidance; insult/descending remark, separation of bed and separation of dining plates and utensils. A higher percentage of girls (39%) have reported about facing discrimination than the boys (34%). Moreover, more HIV infected girls (53%) than counterpart boys (33%) aged 12-18 years have reported of experiencing discrimination. The study has also shown that "Dalit" boys were more likely to experience discrimination than the "Brahmin and Chhetri" boys. This is evident from the fact that 22% of the "Brahmin/Chhetri" boys perceived discrimination as against 35% among "Dalit" boys (CREHPA, 2009).

According to the psychological aspect of the process, the educator must understand the nature, interest, capacities and limitation of child. The sociological aspect implies that the educators must also interpret the endowments of the child in social setting (Aggarwal, 2006). There are different principles of education that it is a lifelong process because each and every movement people is learning the new things and generating the ideas. It is also a bipolar process where educator and learner influence each other.

The functionalist view of education tends to focus on the positive contributions made by education to the maintenance of the social system (Haralambos & Heald, 2006). From the liberal perspective, Education fosters personal development and self-fulfillment. Education encourages the individual to develop his/her mental, physical, emotional and spiritual talents to the full (Haralambos & Heald, 2006). Marxian views "how is the educational system shaped by the economic infrastructure?" Marxian also links between power, ideology, education and the relations of production in capitalist society. Althusser analyzes the education from Marxian perspective that educational system is ultimately shaped by superstructure and therefore it serves interests of the capitalist ruling class (Haralambos & Heald, 2006).

Nepal's Commitment to International Treaties
The Convention on the Rights of the Child places responsibility on the government amongst other issues to ensure that all children have access to primary education irrespective of caste, sex, religion and physical or mental disability.

The education sector in Nepal has witnessed a visible change in educational policies and delivery of services through various interventions. Education for All (EFA) has been a major intervention as part of EFA National Plan of Action (2001 to 2015) in the primary education sub-sector. Government of Nepal (GoN) has made commitments to universalizing primary education (UPE) in Nepal (Ministry of Education and Sports [MoES], 2006).

Nepal is the signatory of Dakar Framework of Action and committed to Education for All by 2015. The Interim Constitution of Nepal- 2006 has made basic education a fundamental right of the people. Each community, as stated in the law, deserves the right to get basic education in their mother tongue. Moreover, Three Year Interim Plan has emphasized on social inclusion and education to all accessing non-formal and formal modalities.

The Dakar Framework of Action has set six major goals and one of the goals is “Ensuring that by 2015 all children, particularly girls, children in difficult circumstance and those belonging to ethnic minorities, have access to complete, free and compulsory primary
education of good quality”. Similarly, Millennium Development Goals (MDGs) has also focused on Education for All by 2015. In line with Dakar Framework of Action and MDGs, major interventions have been implemented to achieve the EFA goals. The Education for All (2004-09), with the long-term objectives of social inclusion, improving access and quality in primary education, is one of the major interventions taken by the government (MoES, 2009).

Nepalese children – particularly girls, children in difficult circumstances and those belonging to ethnic minorities – should have access to complete, free and compulsory primary education of good quality (UNICEF, 2008, as cited in CREHPA, 2009)

**National Response on HIV & AIDS related to Education Sector**

The School Sector Reform Plan (SSRP) commits special provision to curricula, teach education, and delivery systems to reorient frontline providers and make schools responsive to the needs of the People Living with HIV (PLHIV), including orphan and vulnerable children (MoE, 2009). For addressing to CABA, National Centre for AIDS & STD Control (NCASC) has developed the national strategy on HIV & AIDS 2011 – 2012 which also put the key strategies to address the CABAs for accessing the treatment and care, reducing the stigma & discrimination, establishing the social protection, and financial support for livelihood. Beside this, Ministry of Education (MoE) also developed the HIV & AIDS policy which helps to create the enabling environment to CABA in school without discrimination. MoE (2011) has envisioned the following priority areas for actions to mainstream HIV in education sector:

- Improve the curricula of school, technical and vocational education, and higher education by expanding the content on HIV and AIDS and behavior change issues;
- Include the topics of HIV and AIDS in adult, open, alternative and continuous education as well as develop learning resources which are socially and culturally sensitive.
- Enhance the capacity building of MoE staff and school teachers, both at individual and institutional levels for an effective education sector response;
- Establish an effective coordination mechanism with a focal point at MoE and decentralized levels to plan and coordinate a wide range of stakeholders for a multi-sectoral response; and
- Strengthen the monitoring and evaluation system of education sector response to HIV and AIDS at central, district and community levels.

For addressing these issues, Ministry of Education also developed the strategy and policy for the education sector response to HIV & AIDS 2011-2016. There are five priorities to improve curricula by expanding the content on HIV and AIDS and behavior change communication; include HIV & AIDS topic in adult, open, alternative and continues education; enhance capacity building of MoE, school teachers; multi-sectoral response and strengthen the monitoring and evaluation system of education sector response to HIV & AIDS. For responding to HIV & AIDS, there are ten principles guiding the education sector response to HIV and AIDS. National policy on HIV & STI (2011) also stated education sector response to HIV & AIDS through formal and non formal education.

**Conclusion**

Children affected by AIDS (CABA) children are as challenger learner because they are excluded and ranked lower than Dalit in and around the society, societal function, job opportunities, and social benefits at community level. However, government has developed the policy to address the CABA like other challenger learners. Policy emphasized to increase the enrollment of CABA in school without social stigma and discrimination because HIV infected and affected person is taken as lower than Dalit. It is necessary to orient to school management committee and community people about the situation of HIV and AIDS and its implication in real situation because mostly people are unaware about the HIV and AIDS.
and have misconception which force them do inequalities among CABAs.

Sensitization programs focusing on the rights of CABA to education in a discrimination-free environment should be conducted to reduce existing discriminatory practices against CABA students in schools. School children, guardians and teachers should be encouraged to play more pro-active roles to reduce the feeling of isolation and neglect in school environment;

Children orphaned due to AIDS as well as the girl child from a HIV status disclosed family should be given free education up to secondary level in all categories of schools (public and private schools). In addition, the government should provide monetary incentives (scholarships) to CABA in order encourage the caregivers to send their children to school on regular basis.

References


