Addressing educational access and retention of orphaned and vulnerable children in high HIV prevalence communities in rural Malawi: a flexible approach to learning

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This thesis draws on research carried out for the three-country research project ‘Strengthening Open and Flexible learning for Increased access to Education’ (SOFIE), funded by the UK Government Department for International Development (DFID) and the UK Economics and Social Research Council (ESRC) Joint Scheme, Grant No. RES-167-25-0217. The project was led by Professor Pat Pridmore in collaboration with Chris Yates, both of the Institute of Education, University of London. Co-researchers included Dr. Thabiso Nyabanyaba (Institute of Education, National University of Lesotho), Dr. Ephraim Mhlanga (South African Institute for Distance Education) and Dr. Matthew Jukes (Graduate School of Education at Harvard University) and myself (Centre for Educational Research and Training, University of Malawi). I was the co-researcher responsible for research conducted in Malawi.

I hereby declare that, except where explicit attribution is made, the work presented in this thesis is entirely my own.

Catherine M. Jere

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Abstract

In Malawi, where a policy of Free Primary Education has been in place for more than fifteen years, relatively few children have never attended school. However, despite high initial enrolments, primary education in Malawi is inefficient, with high dropout and low completion rates. Against a context of underlying poverty, research suggests that many of the children in Malawi denied adequate access to education are those orphaned or made vulnerable by HIV/AIDS. Evidence from Malawi and neighbouring countries indicates that not enough is being done in schools to support vulnerable children in the context of HIV/AIDS and that a powerful argument can be made for new, more flexible models of formal schooling that reach out to young people who face educational exclusion.

This doctoral study was part of a wider, three-year collaborative research project working in high HIV prevalence countries to address issues of educational access. It used a sequential, mixed methods design to examine the extent to which a more flexible model of formal schooling that integrates open and distance learning (ODL) strategies with face-to-face teaching and psychosocial support can improve educational access and retention of orphaned and other vulnerable children in rural Malawi. This study identifies and explores household, school and peer-related factors that influence the access and retention of children affected by HIV/AIDS, and confirm the very limited support provided by primary schools. These findings were used to contextualise and inform the development of a school-based intervention to implement a flexible model of schooling; thereafter trialed in 20 sampled schools in two selected districts in Malawi.

This doctoral study demonstrates the potential of flexible learning to enhance learning experiences, bring psychosocial benefits and help improve retention of vulnerable pupils in primary schools in high HIV prevalence communities in rural Malawi, with important, positive spill-over effects to pupils at risk of dropout. It also argues that effective innovation requires strategies to create an enabling environment and promote an inclusive philosophy within schools. Further insights were drawn from the perspectives of actors on the benefits, shortfalls and outcomes of the intervention, as well as the successes and challenges of the implementation process. A synthesis and discussion of the empirical findings in relation to the wider literature explores the possibilities for introducing more flexible modes of educational delivery and support within formal schooling.
DEDICATION

For my mother and mother-in-law:
two wonderful women, sorely missed.
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**Acronyms and Abbreviations**

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<tr>
<td>AGSP</td>
<td>Ambassador’s Girls Support Project</td>
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<tr>
<td>AIDS</td>
<td>Acquired Immuno-Deficiency Syndrome</td>
</tr>
<tr>
<td>ARV</td>
<td>Anti-retrovirals</td>
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<tr>
<td>CBE</td>
<td>Complementary Basic Education</td>
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<tr>
<td>CBO</td>
<td>Community Based Organisation</td>
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<tr>
<td>CCfE</td>
<td>Commonwealth Consortium for Education</td>
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<tr>
<td>CRECCOM</td>
<td>Creative Association for Community Mobilisation</td>
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<tr>
<td>DFID</td>
<td>Department for International Development</td>
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<tr>
<td>EMIS</td>
<td>Educational Management Information Systems</td>
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<tr>
<td>FAWEMA</td>
<td>Forum for African Women Educationalists in Malawi</td>
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<tr>
<td>FGD</td>
<td>Focus Group Discussion</td>
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<td>FPE</td>
<td>Free Primary Education</td>
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<tr>
<td>GER</td>
<td>Gross Enrolment Ratio</td>
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<td>GPI</td>
<td>Gender Parity Index</td>
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<tr>
<td>GVH</td>
<td>Group Village Headman</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immuno-Virus</td>
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<tr>
<td>HAS</td>
<td>Health Surveillance Assistant</td>
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<tr>
<td>HIS</td>
<td>Integrated Household Survey</td>
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<tr>
<td>MOEST</td>
<td>Ministry of Education, Science and Technology</td>
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<tr>
<td>MDHS</td>
<td>Malawi Demographic Health Survey</td>
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<tr>
<td>MICS</td>
<td>Multiple Indicator Cluster Survey</td>
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<tr>
<td>NAC</td>
<td>National Aids Commission</td>
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<tr>
<td>NGO</td>
<td>Non-Governmental Organisation</td>
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<tr>
<td>NSO</td>
<td>National Statistics Office</td>
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<tr>
<td>ODFL</td>
<td>Open, Distance and Flexible Learning</td>
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<td>OVC</td>
<td>Orphans and Vulnerable Children</td>
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<tr>
<td>PEA</td>
<td>Primary Education Advisor</td>
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<tr>
<td>PTA</td>
<td>Parent-Teacher Association</td>
</tr>
<tr>
<td>RSA</td>
<td>Republic of South Africa</td>
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<tr>
<td>SADC</td>
<td>Southern Africa Development Community</td>
</tr>
<tr>
<td>SHN</td>
<td>School Health and Nutrition</td>
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<tr>
<td>SMC</td>
<td>School Management Committee</td>
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<tr>
<td>SWO</td>
<td>Social Welfare Officer</td>
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<tr>
<td>SSA</td>
<td>Sub-Saharan Africa</td>
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<tr>
<td>STAR</td>
<td>Supportive Teachers, Assets and Resilience</td>
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<tr>
<td>TA</td>
<td>Traditional Authority</td>
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<tr>
<td>TDC</td>
<td>Teacher Development Centre</td>
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<tr>
<td>VCT</td>
<td>Voluntary Counselling and Testing</td>
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<td>WFP</td>
<td>World Food Programme</td>
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## Local usage

<table>
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<th>Term</th>
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<td>Anamasiye</td>
<td>Orphaned children</td>
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<tr>
<td>Anasuzulidwa</td>
<td>Release of a surviving spouse to their home village and to re-marry</td>
</tr>
<tr>
<td>Chokolo</td>
<td>Widow inheritance, usually by deceased man’s brother</td>
</tr>
<tr>
<td>Chidyamakanda</td>
<td>Sugar daddy</td>
</tr>
<tr>
<td>Dambo</td>
<td>Water-logged land bordering rivers – used for growing crops</td>
</tr>
<tr>
<td>Ganyu</td>
<td>Casual hired labour for money or food (piece work)</td>
</tr>
<tr>
<td>Kaunjika</td>
<td>Second-hand clothes, usually shipped in bales from overseas</td>
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<tr>
<td>Lobola</td>
<td>Dowry (bride price)</td>
</tr>
<tr>
<td>Mwana geni</td>
<td>Small scale business/vending, done by children</td>
</tr>
<tr>
<td>Phala</td>
<td>Porridge made from maize and soya</td>
</tr>
<tr>
<td>Olimbiktsa</td>
<td>One who motivates/encourages and provides support</td>
</tr>
<tr>
<td>Ulowoka</td>
<td>Patri-local settlement of family within a matrilineal tradition</td>
</tr>
<tr>
<td>Umunthu</td>
<td>Spirit of humanity, togetherness</td>
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Part I: Framing the Study

CHAPTER ONE: INTRODUCTION

1.1 CHAPTER OVERVIEW

This thesis identifies barriers to learning faced by orphaned and vulnerable children in high HIV prevalence communities in rural Malawi, and explores the potential of a flexible model of schooling to mitigate those barriers, strengthen and support access to learning and improve retention of vulnerable children. To do so, it focusing on one particular model of schooling – the SOFIE model - that integrates open, distance and flexible learning (ODFL) strategies in formal schooling, within a framework of psychosocial support and community action.

This first chapter provides background and context to the study. It presents the problem statement and rationale and key research questions, the theoretical underpinning and approach used, and the significance and limitations of the research. The chapter finishes with a short discussion regarding the problematic use of language and definitions when working with vulnerable children in HIV/AIDS settings.

1.2 BACKGROUND AND CONTEXT

1.2.1 Study Background

This study was part of a wider, collaborative research project – the SOFIE\(^1\) project - which aimed to support and strengthen open, distance and flexible learning (ODFL) systems and structures to increase access to education for young people living in high HIV prevalence countries in the Southern African Development Community (SADC). It sought to do this through the development, implementation and evaluation of a more flexible model of education to complement and enrich formal schooling. Fieldwork was carried out in Malawi and Lesotho. I carried out my doctoral research in my capacity as the member of the SOFIE Project research team responsible for all aspects of project design, adaptation and trial of the SOFIE model, fieldwork, evaluation and analysis in Malawi.

The purpose of this doctoral study was (i) to explore factors influencing the educational access of children made vulnerable by HIV/AIDS in rural Malawi and identify support provided by primary schools, and (ii) to use this knowledge to contextualise and inform the development, trial and evaluation of a school-based model

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1 ‘Strengthening Open and Flexible learning for Increased access to Education’. The project was funded by a Joint DFID-ESRC Scheme and led by the Institute of Education in collaboration with the South African Institute for Distance Education (SAIDE), University of Malawi and University of Lesotho.
of flexible learning in schools in two high HIV-prevalence districts. This intervention was designed to improve access to learning and reduce dropout and repetition of orphaned and vulnerable pupils in communities affected by HIV/AIDS.

1.2.2 Context
Malawi is a small, landlocked country in sub-Saharan Africa (SSA), with a population of just over 13 million. Over 85% of the population is found in rural areas (NSO, 2009a). Currently ranked 170 in the Human Development Index (UNDP, 2013), over a third of the population (39%) is categorised as ‘poor’ and just over a fifth (21%) described as ‘ultra-poor’ (NSO, 2009a). Although there have been notable improvements over the last decade, poor health and social indicators continue to characterise poverty in the country: low literacy levels, food insecurity and malnutrition, a high infant and under-five mortality rate, and a life expectancy at birth of 54.8 years\(^2\) (UNDP, 2013). Adult literacy rates are 81% for men and 68% for women, reflecting historical gender disparities in educational access and attainment (NSO and ORC Macro, 2011).

In 1994, Malawi was one of the first countries in SSA to introduce Free Primary Education (FPE). This marked the culmination of earlier efforts – largely donor-driven - in the phased roll-out school fees abolishment, but also the fulfillment of the political agenda of the then newly-elected democratic government (Chimombo, 2007). Extending free primary schooling to all children saw a sudden, massive increase in enrolment,\(^3\) largely sustained by subsequent initiatives undertaken by the Ministry of Education, international development agencies and non-governmental organisations (NGOs) to support FPE and girls’ education (Chisamya et al., 2012). With increased enrolments came lasting challenges for the quality of education in Malawi. According to the National Education Sector Plan (MoEST, 2008b), such challenges include:

- Shortfall and poor deployment of qualified teachers
- Inadequate and inferior physical infrastructure, including classrooms and toilets
- Inadequate teaching and learning materials
- Poor monitoring and supervisory systems
- Poor participation of school committees and the wider community in school management
- Poor access and retention of children from vulnerable groups, and
- The negative impact of HIV/AIDS.

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\(^2\) Life expectancy has increased, up from 37.5 years reported in the 2004 MDHS. Likely reasons suggested for this increase include a reduction in under-five and infant mortality rates and widespread access to anti-retroviral drugs.

\(^3\) In the 1994/5 academic year the number of children enrolled in primary schools by 62% from 1.8 million to almost 3 million, Al-Samarrai and Zaman (2007).
Malawi has been severely affected by the legacy of HIV/AIDS. Although the national HIV prevalence in adults (15 to 49 years) has stabilised and declined in recent years, it remains high, at approximately 11%\(^4\) (NSO and ICF Macro, 2011). The epidemic has affected all sectors of Malawian society. Social services have struggled to cope: poor health and morbidity have impacted heavily on both the supply and demand for services, including education (Moleni and Ndalama, 2004; NAC, 2004). Many households have been affected by the loss of breadwinners and care-givers, and communities severely overstretched to support large numbers of orphaned children. However, progress has been made in the provision of antiretroviral therapy (ART), resulting in reduced rates of AIDS mortality (Government of Malawi, 2012).

It is estimated that 13% of children under age 18 are orphaned, having lost one or both parents and of these, 45% are estimated to result from AIDS-related deaths. Nationally, 3% of children are double orphans, having lost both parents (NSO and UNICEF, 2007; NSO and ICF Macro, 2011). A large number of children are also socially or economically vulnerable, mainly due to chronic illness of one or both parents or other adult household members (MoGCS, 2003). The 2010 Malawi Demographic Health Survey (MDHS) includes – for the first time - a measure for such vulnerability and estimates that an additional 6% of children under age 18 can be considered vulnerable. The chances of children being orphaned or vulnerable increase with age; whilst 15% of children age 5 to 9 are categorised as orphans and/or vulnerable (OVC), this rises to 25% of children age 10 to 14, and almost a third (31%) of those age 15 to 17 years (NSO and ICF Macro, 2011).

1.3 **Problem statement and rationale**

In the last twenty years Malawi has made significant progress towards the Millennium Development Goal (MDG) of achieving Universal Primary Education (UPE). However, impressive gains in enrolments since the introduction of FPE have been undermined by a persistent pattern of high repetition and dropout. Thus, large numbers of children are denied access in its broadest sense (see Chapter 2). Whilst addressing issues of both the supply and quality of educational provision is critical in improving educational access, it is recognised that various socio-cultural and economic factors also thwart initiatives to retain children in school. Hidden, indirect and opportunity costs of schooling remain high for many households in Malawi and it is still children from the poorer and more vulnerable sections of society that struggle to stay in school, and are most at risk of leaving prematurely (Kadzamira and Rose, 2003; MoEST, 2008a; World Bank, 2004).

Research evidence from Malawi and the region suggests that, against a context of underlying poverty, a disproportionate number of those excluded from school are likely to be children orphaned or otherwise made

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\(^4\) Adult HIV prevalence was estimated to have decreased between the 2004 and 2010 MDHS, from 12 to 11% percent, although this was not statistically significant.
vulnerable by HIV/AIDS (Ainsworth, Beegle and Koda, 2005; Bennell, 2005; Case, Paxton and Ableidinger, 2004; Evans and Miguel, 2007). Disparities widen as age and educational levels increase (Floyd et al., 2007; Kidman et al., 2012; Sharma, 2006); and children who have lost both parents are particularly disadvantaged (Munthali, Chimbiri and Zulu, 2004). Looking beyond enrolment, findings from school-based surveys in Malawi indicate higher absenteeism and withdrawal from school amongst orphaned children (Kadzamira et al., 2001; UNICEF Malawi, 2005). For this study’s investigation into inequities in educational access for children made vulnerable by HIV/AIDS, the literature thus supports a rationale for focusing on access to learning amongst orphaned and vulnerable children in upper primary.

A study of the literature highlights a wide range of household, community and school-based factors that can constrain the schooling of orphaned children and others made vulnerable by HIV/AIDS (see Chapter 2). More needs to be known, however, about the processes by which barriers faced by children affected by HIV/AIDS impact on educational access within Malawi and, critically, what factors can help support their retention in school. A growing sphere of qualitative research in Malawi offers a more detailed picture of the experiences of orphaned and vulnerable children (see Chapter 2). But, with the exception of a few studies (Bryceson, Fonseca and Kadzandira, 2004; Kendall and O’Gara, 2007), their access to education is generally given only passing or secondary consideration. Furthermore, the role of the school in either mitigating or raising barriers to access has not been adequately interrogated. This study intends to address this gap by using case studies of selected primary schools in high HIV prevalence areas to explore factors influencing the educational access and retention of orphaned and vulnerable children (see Chapters 5 and 6).

With the realisation that progress towards universal primary education has stalled with millions of children remaining out of school, many within the Education for All (EFA) movement has been increasingly advocating for more inclusive approaches to schooling to reach out to educationally marginalised, including those affected by HIV/AIDS (UNESCO, 2009; UNESCO, 2010). This is likely to take on greater prominence as debates around proposed goals for a post-2015 framework underline the need for greater focus on inequalities (Watkins, 2013). Critically – and central to this thesis – there have been continued calls from the international community for educational provision to become more flexible and responsive to the realities of the lives of vulnerable children (Guarcello, Lyon and Rosati, 2006; Harber and Davies, 1998; Molteno et al., 2000; UNESCO, 2008c; UNESCO, 2010), and particularly in the context of HIV/AIDS (Carr-Hill et al., 2002; Hepburn, 2004; Kelly, 2000; Pridmore and Yates, 2005).

Commentators have noted that, given the threat posed by HIV/AIDS in the region, together with the instrumental importance of education in mitigating its impact (Jukes, Simmons and Bundy, 2008; Vavrus,
2006), there is a real need for new models of schooling that reach out to those affected; and that responses to the HIV epidemic provide an opportunity for wider educational transformation (Aggleton and Weeks, 2009; Hepburn, 2001; Kelly, 2000; Pridmore and Yates, 2006). Despite a substantial literature outlining policy options and strategies to mitigate the impact of HIV/AIDS on the educational access of vulnerable children, robust evaluation data has remains scarce and largely limited to efforts to increase demand by addressing the costs of schooling (Pridmore, 2007; Shann et al., 2013). This present study seeks to support this opportunity for a re-modelling of traditional approaches to educational provision, not only by addressing the knowledge gap related to the potential role of flexible models of schooling in enhancing the educational access of vulnerable children in the context of HIV/AIDS, but by providing an evaluation of the processes, outcomes and impact of one such school-based intervention.

1.4 Research questions and approach used

The study is guided by the central research question:

To what extent can constraints on the educational access and retention of children orphaned or made vulnerable by HIV/AIDS in rural Malawi be addressed, and their inclusion enhanced, using a flexible model of schooling designed to complement conventional primary schooling?

In exploring this central research question, the study is framed by the following research questions:

- Within high HIV prevalence communities in Malawi, what factors influence access to learning and the retention of children made vulnerable by HIV/AIDS?
- In what ways can a more flexible model of schooling benefit such vulnerable children and support their access to learning and their retention? What challenges might be faced?
- To what extent can a flexible model of schooling reduce dropout and repetition amongst orphaned and vulnerable children in high HIV prevalence communities in rural Malawi?

The research questions are addressed through a two-phase mixed methods design. Following an initial literature review and in-country planning visits, the first phase of the field study gathered qualitative data from four contrasting school sites in high HIV prevalence areas in rural Malawi to explore factors affecting orphaned and vulnerable children’s access to learning and retention in school. In the second phase, an experimental design was used to evaluate a school-based intervention incorporating ODFL strategies for more flexible schooling. Impact was measured in terms of retention (reduced dropout) and promotion to the next grade. Adaptation of the basic intervention model for implementation in Malawi drew on findings from the
first, qualitative phase and extensive local consultation. Additional qualitative data was gathered from original case study sites to evaluate the processes and lessons learnt from the intervention and elaborate on the quantitative results, with particular reference to children affected by HIV/AIDS. (See Chapter 3 for further details of the methodology).

1.5 **Significance of the Study**

In Malawi, since the mid-2000s the government has highlighted the need to re-think educational provision in the context of HIV/AIDS:

As deaths from HIV and AIDS cause the number of orphaned children to increase drastically, action must be taken to protect their right to schooling and education. It will, therefore be necessary to create alternative pathways to learning that meet needs and requirements of these children. (Government of Malawi, 2005, p.5)

This study informs policy and programming within the Basic Education Directorate of the Ministry of Education, Science and Technology (MoEST), which, in partnership with international development agencies, seeks effective ways to support equitable access for orphaned and vulnerable children.

The commencement of this study coincided with a resurgence of interest at the policy level for working with a wider range of educational modalities to build equitable access to quality education (MoEST, 2008b). Strategies include the use open and distance learning (ODL) strategies to enhance pupils’ classroom experiences (e.g. interactive radio instruction) and to offer greater flexibility in learning through community-based centres for out-of-school children. Whilst the latter - the government’s Complementary Basic Education programme (CBE) - enhances access to basic education for vulnerable and marginalised children (Allsop and Chiuye, 2010), it does exist parallel to the formal education system. The intervention model developed for this research allowed district and school-level actors in high HIV-prevalence areas within Malawi to integrate ODL strategies into existing school structures. This has provided a unique opportunity to explore the potential of a more flexible model of curriculum delivery, combined with school and community support, to improve access to learning and enhance retention within the formal system.

The study has also generated new knowledge from case-studies that describe factors that both disrupt and support access to learning in conventional primary schools, and links these to exclusionary school-level policies and practices. As knowledge to inform practitioners and policy-makers, these findings were published as a working paper for the SOFIE project, and were made widely available through dissemination activities in Malawi.
Working within the wider SOFIE Project, has also provided opportunities to disseminate findings from the intervention evaluation with practitioners and policy-makers at the district and national levels, as well as in international fora.

1.6 THEORETICAL ASSUMPTIONS

Broadly, this thesis can be located within a rights-based framework, regarding education as a fundamental right of all children and a means for enhancing social justice. As such, it assumes an understanding of access as one encompassing secure enrolment and progression and equitable opportunities for participation and learning, leading to completion and meaningful outcomes for all learners (Barrett et al., 2006; Lewin, 2007b). Conversely, it considers educational exclusion not only as non-enrolment or dropout from schooling, but taking the form of erratic attendance, temporary withdrawal and enforced absenteeism, as well as the ‘silent exclusion’ of learners resulting from poor participation and performance (Gilmour and Soudien, 2009; Lewin, 2007b).

This thesis is informed by discourses and debate surrounding exclusion and inclusion in education that provide a ‘lens’ to explore issues of the educational access of children impacted by HIV/AIDS, and an analytical framework from which to evaluate the study’s findings. In doing so, it also draws on concepts of social exclusion, seeing exclusion as a multi-dimensional, cumulative and dynamic process (Silver, 2007). Concepts emerging from capability theory that distinguish between different forms of exclusion and discrimination have also been helpful in understanding barriers to learning (Sen, 2000). In adopting an inclusive lens, this study eschews a deficit approach to inclusion of vulnerable groups, but recognises a shift from viewing the child as the problem, to that of the school and the wider education system (Save the Children Fund, 2008; UNESCO, 2008c). Progress towards inclusion is assumed to require seeking out and supporting those most at risk of exclusion, overcoming obstacles to learning to ensure the participation and progress of all learners, and exploring ways of responding to and welcoming diversity (UNESCO, 2008a). Further discussion of these theoretical underpinnings is found in Chapter 2.

1.7 SCOPE AND SEQUENCE OF THESIS

This introductory chapter has described the broad context for this study; highlighted the research problem, rationale, research questions, theoretical underpinnings and approach used. Chapter 2 critically reviews the literature on educational access and retention to identify what is already known about the exclusion of orphaned children and others made vulnerable by HIV/AIDS, with a focus on Malawi. This chapter also discusses the theoretical and conceptual frameworks that inform the study, drawing on debates regarding exclusion and inclusion in education. Chapter 3 presents an overview of policy options and strategies to
improve the educational access of vulnerable children in the context of HIV/AIDS. It highlights the successes and shortfalls of demand-side strategies and presents the case for using ODFL strategies to improve access and inclusion. The chapter reviews literature on strategies and innovation incorporating greater flexibility into children’s learning and highlights gaps in knowledge and practice.

Chapter 4 presents the methodology of the study. It describes the mixed methods design and discusses issues related to the ontology and epistemology of the approach used. It presents the methods used during the two key phases of the study, including sampling procedures and data collection, management and analysis. It describes how dilemmas encountered working with schools and communities were tackled, and discusses ethical concerns. Chapter 5 presents findings from the first phase of the research design – a largely qualitative analysis of case studies of primary schools in four contrasting high HIV prevalence communities. The chapter explores factors affecting the educational access and retention of orphaned and vulnerable children, with particular attention paid to children affected by HIV/AIDS.

Chapter 6 describes the intervention model developed by the SOFIE team and reflects on the process of adapting the model for the Malawi context. It also describes the uptake and fidelity of the model; its key strategies and outputs. Chapter 7 explores the processes involved in implementing the intervention, drawing on the perspectives of participants from schools and communities in the four case-study sites. Its emphasis is on the experiences of pupils targeted for support. It considers the ways in which the constraints on pupils’ education were disrupted, and highlights educational and psychosocial benefits and key challenges to implementation. Chapter 8 presents a closer analysis of the impact of the intervention using quantitative data from the experimental design used to evaluate the intervention. It uses logistic regression and loglinear analyses to examine the effects of the intervention on two pupil outcomes: dropout and progression to the next grade. Chapter 9 synthesises and discusses the findings from the two phases of the mixed methods design within a wider framework of inclusion. The final chapter summarises the findings in relation to the research questions, considers the potential of ODFL strategies to reach orphaned and vulnerable children, and reflects on the research process and the study’s implications for policy and practice in Malawi.

Table 1-1 below summarises the study’s guiding research questions, key sources of evidence used in answering them and the relevant location within this thesis.
1.8 **Definitions and the use of Language**

A concern throughout this study has been the use of language in defining and describing the young people involved. Terms such as ‘orphan’ or ‘vulnerable children’ and ‘children affected by HIV/AIDS’ can, if used without care, appear pejorative. Yet, few useful alternatives are available. Where possible, the term ‘orphaned children’, rather than ‘orphans’ is used, so that children are not defined solely by orphanhood. However, in reviewed demographic data, the forms ‘**single orphan**’ (having lost one parent) and ‘**double orphan**’ (having lost both parents) are in common usage and are reflected here. During the intervention, children targeted for assistance were often referred to as ‘at-risk’, which, whilst having less negative connotations, was still by no means ideal.

The Malawi government follows international convention by defining an orphaned child as:

> a child who has lost one or both parents because of death and is under the age of 18 years (Government of Malawi, 2005, p. 11)

Yet such conventions create tensions with the Malawi context and with local concepts of a child defined as orphaned. Kadzamira *et al.* (2001) argue that the government definition is too restrictive, because many school-going children are 18 years or over, particularly at secondary level, and are still dependent on adult

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### Table 1-1: Research Questions and Thesis Structure

<table>
<thead>
<tr>
<th>Research Questions</th>
<th>Sources</th>
<th>Location in thesis</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Empirical data (qualitative)</td>
<td>Chapter 5</td>
</tr>
<tr>
<td>2. In what ways can a more flexible model of schooling benefit such vulnerable children and support their access to learning and their retention? What challenges might be faced?</td>
<td>Review of related literature</td>
<td>Chapter 3</td>
</tr>
<tr>
<td></td>
<td>Empirical data (quantitative and qualitative)</td>
<td>Chapter 6 and 7</td>
</tr>
<tr>
<td>3. To what extent can a flexible model of schooling reduce dropout and repetition amongst orphaned and vulnerable children in high HIV prevalence communities in rural Malawi?</td>
<td>Empirical data (primarily quantitative)</td>
<td>Chapter 8</td>
</tr>
</tbody>
</table>
support. Conversely, once adolescents have borne a child and/or married, they are assumed to have adult status and can be excluded from information provided on orphaned children in communities. To avoid the exclusion of these young people during fieldwork, this study did not strictly adhere to definitions based on age and actively sought out adolescent parents or those entered into marriage. The term ‘sibling-headed household’ describes households where siblings or other close relatives (e.g. cousins) are living by themselves after the loss of adult support, without strict limits on age.

The government definition of a **vulnerable child** is a more encompassing and culturally accessible concept, closer to the traditional view of orphanhood equated with the loss of adult and material support:

> A vulnerable child is one who has no able parents or guardians, is staying alone or with elderly grandparents or lives in a sibling-headed household or has no fixed place of abode and lacks access to health care, material and psychological care, education and has no shelter (Government of Malawi, 2005, p. 11)

In quantitative research, orphan status has often been used as a proxy for the impact of HIV/AIDS, including research on HIV/AIDS in Malawi (Crampin et al., 2003; Floyd et al., 2007; Sharma, 2006). Yet, this is problematic, not only because of assumptions that all cases of orphaned children are AIDS-related, but that it can exclude other children impacted by HIV/AIDS (Ainsworth and Filmer, 2006; Bennell, 2003). The 2010 MDHS introduced a measure for ‘orphaned and vulnerable children’ that defines vulnerable children, explicitly in terms of those living with chronically-ill parents or other adults.

An assumption of this study is that orphan status alone is not a useful criterion for exploring the challenges to educational access presented by HIV/AIDS. Where the term ‘**children affected by HIV/AIDS**’ is adopted this includes, but is not limited to, those who have lost a parent or guardian to AIDS; children living with parents or guardians who are chronically ill as a result of AIDS-related illness, in households or communities severely affected by HIV/AIDS, or those who themselves are HIV positive (Bennell, 2005; Pridmore, 2007).

In the literature, definitions of wider vulnerability resulting from the impact of HIV/AIDS are diverse (Sherr et al., 2008). Throughout this study, opportunities were taken to engage with local concepts of vulnerability and the implications for children’s risk of exclusion from schooling. Guidelines as to who should receive targeted support from the intervention grew out of this process. Schools were encouraged to adopt a broad

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5 The heavy influence of donor agencies in Malawi and media coverage of programmes targeting ‘OVC’ has led to familiarity with this terminology. Such terms are now common parlance in the local languages – research participants spoke of *ma-orphan*, *ma-vulnerable* or even *ma-OVC*, rather than the traditional *anamasiye* (literally, ‘children who have been left’).
and flexible approach to identifying beneficiaries, acknowledging the varying forms of vulnerability in high HIV prevalence communities (see Chapter 6). Despite this, inherent tensions remained and discussed further in Chapter 8 and 9.

1.9 CHAPTER SUMMARY

This first chapter provides a backdrop to the issues to be explored in this thesis. It has highlighted how, in Malawi, an already inefficient and under-resourced education system is struggling to ensure the equitable access and participation of all children, including large numbers of children made vulnerable by HIV/AIDS. This chapter has also introduced another central argument behind this thesis: that schools need to be more flexible and responsive to the realities of children’s lives in order to improve access to learning and retention of vulnerable learners. This chapter has presented the key research questions that guided this study, outlined its mixed methods design and introduced the researcher’s theoretical ‘lens’ influenced by a growing debate on inclusion in education. The following chapter expands on this theoretical framing before proceeding to examine the patterns of educational access in Malawi and review existing literature from Malawi on the constraints to access faced by orphaned and other children made vulnerable children by HIV/AIDS.
CHAPTER TWO: EDUCATIONAL ACCESS AND EXCLUSION IN THE CONTEXT OF HIV/AIDS

2.1 CHAPTER OVERVIEW

The purpose of this second chapter is, firstly, to present and debate key concepts of this thesis; namely, working definitions of educational access and exclusion and the underlying principles of inclusion in education. It presents a framework from which to assess progress towards greater inclusion in schools and highlights challenges thereof. Secondly, it examines the patterns of educational access in Malawi, focusing on available data on orphaned and vulnerable children and highlighting how these interlock with other determinants of enrolment and dropout. Finally, it reviews the literature from Malawi on obstacles to educational access faced by children affected by HIV/AIDS.

2.2 DEFINING EDUCATIONAL ACCESS

The years leading up to the Jomtien World Conference on Education for All in 1990 saw the emergence of a neo-liberal approach to development expounded by the World Bank and its allies. This ‘Washington Consensus’ prioritised investment in universalising primary education as a means to increase productivity and drive economic growth and development (Gore, 2000; Rose, 2003). The rationale was based on human capital theory underpinned by rates of return analyses that calculated the private and social returns on education, predicting high societal gains from expanding access to primary education (Robertson et al., 2007; Tilak, 2006).

From this economic stance, access – as a measure of internal efficiency synonymous with enrolment - was conceptualised within a narrow framework of supply and demand. This framework acknowledged that simply making schools available was not sufficient to ensure that schools were ‘accessible’ to all children, especially, for example, girls (Tietjen, 1991). Demand-side factors were heavily cloaked in economic terms, with demand assumed to be led by rational decisions at the household-level over the relative benefit of schooling versus its costs (Bellew and King, 1991). Subsequent critique of the human capital approach challenged its theoretical and methodological underpinning, including its over-reliance on potentially-flawed rates of return analyses (Bennell, 1996) and a narrow economic focus on efficiency and equity, which fails to address adequately the process of educational provision and “ignores the social networks within and around education” (Rose, 2003, p. 82).
Whilst human capital theory continued to hold sway for much of the early nineties, by the Dakar Global Forum on ‘Education for All’ in 2000, a rights-based approach to education had found prominence in the development discourse (Robertson et al., 2007; Rose, 2003). This had clear implications for addressing the needs of a wide range of educationally marginalised children (Badcock-Walters et al., 2005; UNESCO, 2010). By endorsing the EFA goals, countries made an explicit commitment to provide equitable access to free primary education –and ensure completion– for “girls, children in difficult circumstances and those belonging to ethnic minorities” (UNESCO, 2000, p. 15)

The EFA movement has also led to a conceptualisation of access as equitable access to learning, thus emphatically linking access to issues of quality. Educational research into improving access and addressing quality converge, and proponents acknowledge the bi-directional nature of the relationship (Barrett et al., 2006; Lewin, 2007b; Tikly, 2006). This led to greater importance being placed on understanding how school environments –and processes therein– impact on children’s experiences of schooling and its outcomes (Dunne and Ananga, 2013)

In defining educational access, Lewin (2007b, p. 33) and colleagues in the Consortium for Research on Educational Access, Transitions and Equity (CREATE) argued that initial access – measured by enrolment - cannot be meaningful unless it leads to:

…”secure enrolment and regular attendance; progression through grades at appropriate ages; meaningful learning, which has utility; reasonable access to lower secondary grades…and more equitable opportunities to learn for children from poorer households, especially girls.

This definition has important implications for the present study. Critically, it emphasises equity of opportunity and, with it, the need for inclusive and sustained access to learning.

In adopting this broader definition of access incorporating regular access to learning and equitable participation and completion, this study seeks to build a greater understanding of the processes surrounding the school experiences and outcomes of vulnerable children in HIV-affected communities and households.

2.3 Debating Educational Exclusion and Inclusion

In order for meaningful educational participation for all children be achieved, those most marginalized and at risk of permanent exclusion must be ensured sustained access to quality education (UNESCO, 2010). Promoting inclusion in a comprehensive manner remains a major challenge to the education community, requiring approaches that address the underlying causes of exclusion (Balescut and Eklindh, 2006). Inclusive education is increasingly being seen as a broad reform strategy to address barriers to learning, respond to the
diversity of needs of learners and promote equity in pupil participation and outcomes (UNESCO, 2005). It is useful for the present study to explore concepts that seek to understand the processes of exclusion, as well those underpinning inclusion in education. The following sections discuss these concepts.

2.3.1 Concepts of Exclusion

Social Exclusion

The concept of ‘social exclusion’, described as a ‘rupture of social bonds’, originated in France and drew heavily on notions of national solidarity (de Haan, 1999). Different interpretations of social exclusion co-exist, which reflect contrasting ideologies and varying notions of inclusion (Silver, 1994). These are linked, for example, to ideas of citizenship, social cohesion, participation and community regeneration (Campbell, 2002a; Poggi, 2003). Some authors have suggested a cautious use of established views in building understanding of social exclusion in the South, stressing the need to see discourses of exclusion and inclusion as context-specific and strongly grounded in issues of social inequalities and injustice (Dei, 2005; Kabeer, 2000; Sayed, Soudien and Carrim, 2003).

Social exclusion has been broadly defined as the processes through which groups or individuals are wholly or partially excluded from full participation in the society in which they live (de Haan, 1999). It encompasses exclusion from economic, social, cultural and political aspects of society, as well as its prescribed rights, entitlements and obligations (Campbell, 2002a; O'Brien et al., n.d.; Silver, 2007; Thorat, 2005). This multidimensionality also means that individuals can be included in some aspects of society, whilst excluded in others (de Haan, 1999). Thus, as Silver (2007:1) contends, excluded groups may be marginal, but not “socially isolated”. A case in point would be children who are involved in social or economic activities within their communities, yet are educationally marginalised. Silver (2007) also emphasises the dynamic nature of the process, describing a continuum on which an individual is either moving towards inclusion in one or other dimension, or moving through cumulative deprivations towards permanent exclusion.

Forms of exclusion

Social exclusion can also be located within the broader context of the capability approach (Sen, 2000). The capability approach to development perceives an individual’s capability as their freedom to achieve a state of ‘doing and being’ that they have reason to value (Robeyns, 2006; Unterhalter, 2007). Within this framework, the ‘process’ of social exclusion leads to a ‘state’ of exclusion that can be conceptualised as a deprivation of such freedoms (Poggi, 2003). Sen (2000) distinguishes between the constitutive relevance of exclusion – a deprivation of intrinsic importance - and the instrumental importance of causally important deprivations that lead to further deprivation.
Reflecting a rights-based approach to education, an assumption of this present study is that educational exclusion is a deprivation of both constitutive and instrumental importance. Sen (2000) also makes an important differentiation between active and passive exclusion. The former is brought about through deliberate policy or action, such as selection procedures for entry into secondary education. Passive exclusion, however, does not involve any deliberate attempt to exclude, but through various social arrangements can still result in exclusion. For example, studies on the impact of HIV/AIDS in schools in Malawi have argued that whilst there was little overt discrimination against orphans and other vulnerable children in schools, a lack of support or insensitivity to the needs of these children can contribute to their exclusion (Kadzamira et al., 2001; Kendall and O'Gara, 2007).

2.3.2 Inclusion in Education

Discourses and development of Inclusive Education

Inclusive education emerged in the North from critique of special education and as a response to the needs of children with disabilities (Topping and Maloney, 2005). Internationally, it is increasingly being seen as a means of welcoming diversity and supporting the needs of all pupils, regardless of race, class, ethnicity, religion or circumstances (Ainscow, 2007). Several distinct discourses of inclusive education have been identified (Dyson, 1999). The dominant rights and ethics discourse draws from a wider discourse in which educational inclusion is required as “an inevitable outcome” (Dyson, 1999, p. 39) of a commitment to human rights and social justice (Campbell, 2002b; Polat, 2011; Topping and Maloney, 2005). An alternative rationale for inclusive education is provided by the efficacy discourse, which focuses on the cost-effectiveness of inclusive schools vis-a-vis specialist schools in terms of their educational outcomes and wider social benefits. This resonates with debate over the ‘parallelism’ approach to educational provision for marginalised children in developing countries: competing discourses examine the effectiveness of providing complementary or alternative approaches to basic education vis-a-vis mainstream formal schooling (DeStefano et al., 2006; Hoppers, 2005; Rose, 2005; Yates, 2008).

Another well-established discourse concerns what characterises inclusive education and how, in practical terms, this might be realised (Dyson, 1999). Advocates of this pragmatic approach stress the importance of school-based, collaborative empirical research to bring about change (Ainscow, 2007). Within and between these broad discourses on inclusion, definitions, inherent values and concepts are not uncontested (Armstrong, Armstrong and Spandagou, 2011). Ainscow and his colleagues offer a comprehensive typology of differing perspectives of inclusion in education (Ainscow, Booth and Dyson, 2006, p. 15)
The development of distinct discourses is perhaps less evident in the South. However, the concepts of social exclusion and inclusion have been used as lenses to explore the educational experiences of various diverse groups of children. Examples include: black and refugee students in South Africa (Sayed, 2002; Sookrajh, Gopal and Maharaj, 2005), Dalit children (Thorat, 2005) and ethnic minorities (Dei, 2005). More broadly, inclusion is often defined in terms of how schools respond to diversity and provide for the needs of all learners (Ainscow, 2006). The South Africa Education White Paper no. 6, for example, which places inclusive education at the core of educational transformation, emphasises respect for learner differences regardless of individual or group traits, and the importance of enabling schools to support participation of all children (Du Toit and Forlin, 2009; Engelbrecht, 2004). Definitions on inclusion in the South, though often contested, are thus largely framed in terms of human rights and social justice and, as is the case in Malawi, directly linked to the EFA agenda (Armstrong, Armstrong and Spandagou, 2011).

**EFA and Inclusion**

The EFA movement has mainstreamed inclusive education as a central and cross-cutting principle: considered vital if all learners are to be ensured access to quality education (Balescut and Eklindh, 2006). Within this there has also been a broadening and shift in terminology to talk of ‘inclusion in education’, ‘inclusive schooling’, or simply ‘inclusion’. The promotion of inclusive education to support EFA goals falls squarely within the dominant rights and ethics discourse described above. It emphasises the need to take action to extend access those educationally marginalised, including those affected by HIV/AIDS (UNESCO, 2010).
The broad vision of ‘Education for All’ as an inclusive concept ... must take account of the need of the poor and the most disadvantaged, including working children, remote rural dwellers and nomads, and ethnic and linguistic minorities, children, young people and adults affected by conflict, HIV/AIDS, hunger and poor health; and those with special learning needs (Dakar Framework for Action, Annex.)

Defining Inclusion

Balescut and Eklindh (2006) and Ainscow and Miles (2009, pp. 2-3) summarise the key concepts of inclusion in education into four elements:

1. **Identification and removal of barriers to learning:** Central to most approaches to improving inclusion is the gathering of information on difficulties faced by learners, finding means to minimise barriers to their educational access and challenging exclusion (Armstrong, Armstrong and Spandagou, 2011).

2. **The presence, participation and achievement of all learners:** This emphasises moving beyond ensuring enrolment and attendance. Here Balescut and Eklindh (2006) relate ‘presence’ to where children learn, and how reliably and punctually they attend; ‘participation’ in terms of the quality of their learning experiences, and ‘achievement’ in terms of outcomes across the curriculum. Campbell (2002b:1) highlights the need for inclusion to address “equity of access to schooling, equity of treatment within schools and equity of outcomes of schooling.” In doing so, she echoes a clear human rights framework for rights to education, rights in education and through education, which addresses the “availability, accessibility, acceptability and adaptability of education” (Wilson, 2004, p. 12).

3. **Emphasis on those groups of learners who may be at risk of marginalisation, exclusion or underachievement:** This indicates responsibility to identify, monitor and actively seek out groups most at risk of exclusion (Ainscow and Miles, 2009; UNESCO, 2010). Specific action should be taken to redress inequities, respond to diversity and create opportunities for learning and support children’s wider needs. (Basson, 2011; Dei, 2005; Hoppers, 2006; Inoue and Oketch, 2008; Kendall and O’Gara, 2007). This resonates with calls for targeted support to improve the educational access of children affected by HIV/AIDS (see Chapter 3).

4. **Inclusion is a process:** Several authors describe inclusion as a process of change within schools, addressing school cultures and practices in order to redress inequalities, support equitable access to learning and provide protection against discriminatory practices (Basson, 2011; Du Toit and Forlin, 2009; Polat, 2011) Ainscow (2007) highlights the need to address teachers’ practices and develop
awareness at schools to challenge existing norms. School-level policy and structures may also require change to ensure access for all (UNESCO, 2008a). In an examination of perspectives on ‘inclusivity’ in schooling in Ghana, Dei (2005, p. 267) stresses the importance of not only interrogating existing practices and societal relations that exclude, but of suggesting “specific, creative ways of transforming conventional schooling” This latter point has been an important consideration in the development of this doctoral study: it acknowledges the need to try out new models of schooling and thus supports a rationale for introducing greater flexibility in schools to improve inclusion.

These four broad concepts outlined above provide a useful framework for this study to assess progress towards greater inclusion. This framework has been used to organise a synthesis and discussion of findings from the empirical research presented in this thesis (see Chapter 9).

One drawback of this understanding of inclusion is the emphasis on identifying barriers to learning only. This may fail to acknowledge existing capacities in schools and communities (Campbell et al., 2014). It also negates supportive factors within learners’ lives and risks perpetuating a deficit approach to children’s educational access. Within the literature on the education of children affected by HIV/AIDS, relatively little is written about factors that can support sustained access and retention. Recent exceptions include small-scale studies in South Africa and Zimbabwe that explore the competency of schools and teachers to address the needs of orphaned and vulnerable children (Campbell et al., 2014; Ferreira and Ebersohn, 2011) This doctoral study explores supportive factors in some depth, both to address this knowledge gap and to inform the development of the SOFIE model.

2.3.3 Considerations and challenges for inclusion

A consideration in any engagement with the concepts of inclusion and educational exclusion is the strong normative stance implied in much of the literature (Sayed, 2002). The ultimate aim of inclusive policies is to overcome exclusion. Critiques note that the movement of groups or individuals from a state of exclusion to inclusion is assumed to be always desirable (Sayed, 2002; Sayed, Soudien and Carrim, 2003). This raises critical challenges for formal schooling:

Firstly, this assumption can invalidate the experiences of some children’s coping strategies, if schools are unable to adapt to their specific needs. Balescut and Eklindh (2006) highlight punctuality and reliable attendance as a measure of inclusion (see above), yet some children cannot attend regularly. In the context of HIV/AIDS, for example, children might withdraw from schooling at certain periods of time for care-giving duties or to work (Yates, 2008). Greater flexibility is required to look beyond existing structures and rules to avoid the continued exclusion of children. (see Chapter 3 for a discussion greater flexibility in schools).
Secondly, this principle of ‘normalisation’ constructs those excluded in juxtaposition with those included, so that there is a tendency to identify them solely by their exclusion from basic rights or entitlements (Gore, Rodgers and Figueredo, 1995; Sayed, Soudien and Carrim, 2003). Some commentators see it as imperative that rights-based approaches ensure that inclusion goes beyond this deficit model for reducing barriers. They stress the need to address issues of pedagogy and school organisation, whilst exploring wider exclusionary practices inherent in both schools and society (Dei, 2005; Dyson, 1999).

Thirdly, placing those previously excluded as the ‘other’ also risks pathologising the ‘failure’ of groups or individuals and creates a ‘discourse of victimisation’ (Meintjes and Giese, 2006; Sayed, Soudien and Carrim, 2003). Such children once ‘included’ may still be perceived as outsiders and continue to be excluded from full participation (Singal, 2008). The concept of inclusion as process (see above) thus stresses the need for education systems and schools not just to respond to diversity, but to celebrate it.

Such considerations are especially pertinent to this study, indicating the need for schools to address the experiences of children affected by HIV/AIDS in a manner that mitigates stigmatisation or discrimination (Campbell et al., 2011). Furthermore, resources and teaching should not start from the default assumption that pupils are unaffected by HIV/AIDS, but should be sensitive to their information needs and to issues met within their families and communities (UNESCO, 2008a).

2.3.4 Promoting Inclusion in Education

A critical issue that emerges from the above discussion is that addressing inequities cannot stop at the school gates and that schools themselves can “exert, mediate and replicate wider exclusionary practices” (Campbell, 2002a:16). Specifi cally addressing the complexities of the relationships between categories of class, caste, race, gender etc., Sayed et.al. (2003) oﬀer a framework of ‘articulations’ against various institutional (school) contexts that focuses on: (1) the point of institutional access, (2) the setting and ethos, (3) the curriculum and (4) the social location of the institution.

In considering policy responses to educational marginalisation amongst disadvantaged children, including those affected by HIV/AIDS, the 2010 Global Monitoring Report presents an analytical framework that places inclusivity at its core (UNESCO, 2010, p. 187). The framework presents three interlocking levels of intervention that (1) address the affordability and accessibility of schools; (2) the learning environment and (3) promote wider social and legal protection to mitigate poverty and discrimination. Underpinning the rationale for this study, one of the key strategies recommended to enhance accessibility is that of greater flexibility and innovation in educational provision.
There are clear points of divergence and convergence within the frameworks described above, but pivotal - and addressed in this study - is the need to understand the social processes and relations, within schools, as well as homes and communities, which contribute to educational exclusion.

2.3.5 Patterns of educational access and exclusion in Malawi

This following section summarises patterns of educational access and exclusion in Malawi, focusing on evidence related to orphaned children and others made vulnerable by HIV/AIDS, and highlighting several interlocking determinants of dropout. Firstly, it locates Malawi within a wider typology of educational access.

2.3.6 A typology of educational access

According to a typology of enrolment patterns in SSA (Lewin, 2007b), Malawi falls into a group of countries characterised by “very high initial enrolment rates at primary schooling, but high dropout and repetition with low completion rates, and falling transition rates into secondary school and low participation at secondary level” (Lewin, 2007a) (Group 2, in Figure 2-1 below).

FIGURE 2-1: TYPOLOGY OF ENROLMENT PATTERNS IN SUB-SAHARAN AFRICA

Source: (Lewin, 2007b)
In this group, primary gross enrolment ratios (GER) are generally over 100%, reflecting over and under-age entry, as well as high numbers of repeaters in the system (Lewin, 2007b). Given the high initial enrolments, it is apparent that the vast majority of children in these countries have, at some point, attended school. In other words, the formal education system “often connects with the child, but not at the intended age or for intended duration” (UIS, 2005). Dropout rates are high and access is further curbed by selection procedures and/or fee-paying structures at the entry point into secondary school (Lewin, 2007a).

Thus, the great majority of children are excluded from education after initial entry. Those dropping out before completion of primary education risk permanent exclusion with no pathway back to re-enter Amongst these are likely to be a disproportionate numbers of girls, children affected by HIV/AIDS, and others in vulnerable circumstances (Lewin, 2007b, p. 32).

Yet, these figures are unlikely to represent the full extent of exclusion. Measures of children ‘in school’, which rely on government census data, do not account for lengthy withdrawals or high absenteeism, both of which inevitably impact on learning (UIS, 2005). Disadvantaged children may formally enrolled, but “silently excluded” (UNESCO, 2007) due to erratic or intermittent attendance or discrimination; or attending school, but learning little (UNESCO, 2014a). In a review of barriers to educational access faced by children affected by HIV/AIDS, Pridmore (2008a) argues that even when enrolled, these children may suffer exclusion through poor attendance, discrimination and the wider psychosocial impact of HIV/AIDS.

2.3.7 Enrolment, repetition and dropout in Malawi

In Malawi, GER at primary level exceeds 100% - inflated by large numbers of over-age children in the system. However, net attendance ratios from household surveys have consistently shown that between 10-20% of children of primary school age are out of school in any given year (NSO, 2009b; NSO and UNICEF, 2007; NSO and ORC Macro, 2001; NSO and ORC Macro, 2005). High enrolment rates in lower grades indicate that the majority of children out of school are dropouts rather than non-enrollees. 2010 MDHS data shows that amongst 15–19 year-olds only 1.9 % of males and 2.9 % of females had never attended school (NSO and ORC Macro, 2011).

Poor internal efficiency in Malawi’s education system is characterised by high levels of repetition and dropout leading to low primary completion rates. Nationally, the proportion of pupils repeating their grade stands at 28% (NSO, 2007). Very low levels of achievement (Milner et al., 2011; Smith and Barrett, 2011) contribute to high repetition rates as children are prevented from progressing to the next grade. At the time of the fieldwork conducted for this study, the survival rate to Standard 8 was approximately 30% (MoEST,
According to analysis by Sabates et al. (2010), just over a quarter (27.7%) of 16 and 17 year olds dropped out before completing primary school.

2.3.8 Causes of exclusion

Only a small minority of children in Malawi have been denied any access to schooling; estimated at around 5% (Sabates et al., 2010). Little is known about this group, but literature from other developing countries suggests that it is likely to include children who have suffered debilitating childhood illnesses, are infected by HIV or are disabled (Birdshall, Levine and Ibrahim, 2005; Pridmore, 2007; WHO, 2011). As noted above, the great majority of children excluded from schooling in Malawi are those who drop out after initial enrolment, before completing the primary cycle.

Precursors identified in wider research that signal that a child is at risk of dropping out include: late enrolment, repetition, low achievement and irregular and intermittent attendance (Hunt, 2008). Dropout is linked to, amongst others, poverty and child labour, orphanhood, gender, educational levels of mothers, poor health and nutrition and low quality of education provision (Bennell, 2002; Dachi and Garrett, 2003; Hunt, 2008; Lewin, 2007b; Pridmore, 2007; Sabates et al., 2010; UIS, 2005), as well as issues of violence and abuse at schools (Boyle, 2002; Leach, Dunne and Salvi, 2014; Swainson et al., 1998; UNESCO, 2014b), early pregnancy and social norms that value girls’ entry into marriage over education (Lloyd and Mensch, 2008; Loaiza and Wong, 2012). Analysis of DHS data from SSA indicates that children living in communities with higher HIV prevalence have lower educational attainment; progressing more slowly and less likely to complete primary school (Fortson, 2008).

A critical understanding from reviews of the literature, and one that informs this study, is that dropout rarely has a single cause, but is a process resultant of several causes, often interlocking at both the household and school level (Hunt, 2008; Sabates et al., 2010).

2.4 Educational access and exclusion of children impacted by HIV/AIDS

From strong evidence that orphan rates correlate with HIV prevalence rates, orphan status has often been used as a proxy for the impact of HIV/AIDS on education systems (Ainsworth and Filmer, 2002; Bennell, 2005). Substantial research evidence from SSA indicates that orphans are significantly less likely to be enrolled in

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7 Increased survival rates for 2010 indicate some improvement in the ability of the primary school system to retain its pupils. However, figures show that, despite this, approximately half (52.2%) of all enrolled pupils failed to reach their final year of the primary school cycle.
school, and progress more slowly when enrolled (Case, Paxton and Ableidinger, 2004; Evans and Miguel, 2007; Kurzinger et al., 2008). However, enrolment differentials between orphans and non-orphans are highly contextualised and often country-specific (Ainsworth and Filmer, 2006; Kidman et al., 2012; Pridmore, 2008a; UIS, 2005).

There are difficulties inherent in using orphan status alone to measure the impact of HIV/AIDS on educational access. For example, longitudinal studies in Tanzania and South Africa, suggest that school dropout is likely to occur not only during the period following parental death, but prior the death of the parent, as a result of parental morbidity (Ainsworth, Beegle and Koda, 2005; Evans and Miguel, 2007). A cross-sectional study in Soweto found that children in households with sick adults were less likely to have school fees paid and were more likely to be absent from school compared with children from unaffected households (Gray et al., 2006). The Ainsworth et al. (2005) study indicates that children’s schooling is more severely affected during parental illness, only to improve after their death. As argued by Boler and Carroll (2003), parental death is likely to be only one of the many difficulties to arise as AIDS impacts on children’s households. Bennell (2005) highlights 3 sub-groups of children whose lives are most directly affected by HIV/AIDS and whose access to education is potentially under the greatest risk: children who are HIV positive, children living with chronically ill household members and children who have lost parents or guardians to AIDS.

A cross-national review of the barriers to conventional schooling faced by children and young people affected by HIV/AIDS highlights a range of factors operating at the household, community and school levels, including: changing patterns of household organisation and child migration; increased poverty and demand for child labour; trauma and abuse; discrimination and a loss of social cohesion; lack of educational support and poor quality of education provision (Pridmore, 2008).

2.4.1 Access of orphaned and vulnerable children in Malawi
In Malawi, evidence of the impact of HIV/AIDS on the educational access of children has predominantly focused on the comparison of orphans and non-orphans in terms of their participation in formal schooling, and some debate remains as to the extent of the educational disadvantage of orphaned children. Analysis of data from 2004/5 Integrated Household Survey (IHS data) found substantial disparities in enrolment between orphans and other groups, with disadvantage separate and distinct from factors relating to poverty (Kidman et al., 2012). Welfare Monitoring surveys show an overall narrowing of enrolment gaps between orphans and non-orphans since the introduction of FPE (NSO, 2006; NSO, 2009b). Data from the 2004 MDHS and the
2006 Malawi Indicator Cluster Survey (MICS) indicate that, for 10 to 14 year-olds, orphan status alone is not a strong determinant of whether a child is or is not attending school (NSO and UNICEF, 2007; NSO and ORC Macro, 2005). The MDHS 2010 data reports that amongst 10 to 14 year-olds, orphaned and vulnerable children are slightly less likely to be attending school than others (89% in school and 93% in school, respectively), although this does not appear to approach significance (NSO and ORC Macro, 2011).

Using longitudinal panel data, a study in Karonga in the north of Malawi found that, whilst parental death due to HIV/AIDS had no significant impact on enrolment, children who had lost 2 parents in quick succession were more at risk of dropout (Floyd et al., 2007). Analysis of the 2004 MDHS (Munthali, Chimbiri and Zulu, 2004) and 2004/5 IHS (Kidman et al., 2012) datasets indicate that double and maternal orphans were less likely to be attending school than non-orphans. The 2004/5 IHS analysis also found that living with a chronically ill relative significantly increased the risk of children being out of school (Kidman et al., 2012).

Threaded throughout this present study is the understanding that issues of access and exclusion rest on more than just whether a child is enrolled or not. Looking beyond enrolment to a more meaningful picture of access, there are several studies that indicate that orphans are likely to be disadvantaged in terms of regular attendance and attainment (Ainsworth, Beegle and Koda, 2005; Bennell, 2005; Bicego, Rutstein and Johnson, 2003). Research evidence from Malawi is limited. Evidence from one of the few school-based surveys in Malawi that quantifies the impact of HIV/AIDS showed that absenteeism was higher amongst orphans (Bennell, 2003). Results from the same survey also showed that orphans were more likely to withdraw temporarily from school (Kadzamira et al., 2001). A survey commissioned by UNICEF to track pupil attendance in schools in districts vulnerable to food insecurity found higher rates of absenteeism amongst orphaned children (UNICEF Malawi, 2005).

2.4.2 Other determinants of access and dropout in Malawi
In examining the patterns of access of children made vulnerable by HIV/AIDS there is a need to consider inter-locking factors that can reinforce and compound exclusion.

Poverty
Jukes et al. (2008) state that, in developing countries, the most significant barrier to the educational access of children affected by HIV/AIDS is that of poverty. In Malawi, despite the introduction of FPE, the socio-economic status of children’s household remains one of the major factors affecting school participation (Chimombo, 2007). Kadzamira and Rose (2003, p. 506) argue that whilst the majority of children are able to access primary schooling, “many households are not able to sustain the initial demand for a variety of
reasons, often related to poverty.” Demographic data from Malawi has consistently shown that children from poorer households have enrolment rates significantly lower than those from wealthier households, and are less likely to complete primary education (Al-Samarrai and Zaman, 2002; Al-Samarrai and Zaman, 2007; Bennell, Hyde and Swainson, 2002; Kadzamira and Chibwana, 2000; NSO and ORC Macro, 2005; NSO and ORC Macro, 2011).

Location
Children in rural areas in Malawi are at greater risk of early exit from schooling compared with those in urban centres (NSO and ORC Macro, 2011). Orphaned children from poorer households in rural areas, particularly those located in the Southern region, are less likely to be in school (NSO, 2007). In the context of Fortson’s (2008) observations that poorer educational outcomes are found in communities with higher HIV prevalence, it is worth noting that the Southern region has higher prevalence rates compared to other the regions of Malawi. In addition, co-infection rates amongst couples are highest in the South, at 11.7% compared with 3.6% in the Central region and 2.1% in the North (NSO, 2005). This places children at a much greater risk of losing both parents and increasing their risk of dropout (Floyd et al., 2007). Such variation in educational participation by location is also likely to reflect socio-cultural and historical differences in Malawi, including differences between patrilineal and matrilineal societies (Kadzamira and Chibwana, 2000; Rose, 2003).

Gender
Overall the primary net attendance rate (NAR) is slightly higher for girls, whilst the gross attendance rate (GAR) is higher for boys (NSO and UNICEF, 2007; NSO and ORC Macro, 2005; NSO and ORC Macro, 2011). The gender parity index (GPI) for gross school attendance is 0.95, reflecting a greater number of over-age male pupils (NSO and ORC Macro, 2011). In terms of initial enrolment, gender disparities in Malawi have reduced dramatically over the last decade (Chisamya et al., 2012). Yet, school census data from the time of this study indicates that in the upper grades of primary school dropout was notably higher amongst girls (see Figure 2-2). Girls’ participation in school is particularly sensitive to household socio-economic status and opportunity costs (Chimombo, 2007). And, as adolescents, girls face an increased risk of withdrawal due to socio-cultural pressures, including early marriage (Chimombo, 2009; Hyde and Kadzamira, 1994; Kadzamira and Chibwana, 2000). In 2010, 50% of women 20–24 years of age were married before 18 (NSO and ORC Macro, 2011).
Age

Late entry and consistently high repetition rates in primary schools result in large numbers of over-age children in the education system. Analysis of EMIS data shows that in 2010, 12.3% of children across all grades were 14 years of age or older. In senior grades (6 to 8), this figure rose to 46.7% (Jere, 2011). Large numbers of pupils above the appropriate age for their grade present challenges in addressing their social and learning needs. Older children incur higher opportunity costs, increasing their risk of dropout (Sabates et al., 2010).

Data from the Malawi MICS survey indicate that the differential between orphans and non-orphans attending school in 2006 increases by age group. In 2006 this differential was greatest amongst 14 – 17 year-olds, with school attendance rates of 78% for non-orphans and 64% for orphans (NSO and UNICEF, 2007). Analysis of 2004/5 Malawi IHS data found that older orphans (10-14 years) were significantly more likely to be out-of-school or behind for their grade compared with those of 6-9 years (Kidman et al., 2012). This is confirmed by studies using the 2004 DHS data and AIDS Indicator surveys, which found that for several SSA countries, including Malawi, OVC were less likely to be attending school than non-OVC on reaching adolescence (IFPRI, 2007; Mishra and Bignami-Van Assche, 2008). A panel study from Malawi also indicates a greater

8 School attendance rates do not distinguish between a child attending primary or secondary school and this greater differential may reflect poor transitions to secondary education. However, because of the large proportion of over-age children enrolled in the primary education system, children aged 14 years and above are still commonly found in primary schools.
likelihood of orphaned children dropping out of school, compared to non-orphans, as educational levels increase (Sharma, 2006).

### 2.4.3 Constraints faced by children affected by HIV/AIDS in Malawi

The above sections have reviewed literature related to patterns of educational access and exclusion for children affected by HIV/AIDS in Malawi. Much of the evidence for this is heavily reliant on quantitative research focusing on factors such as household income, gender, location and orphan status and measuring a fairly narrow definition of access (i.e. enrolment). This literature alone is not sufficient to build understanding of the processes and mechanisms behind these factors.

In Malawi, a separate, growing sphere of literature offers a detailed exploration of the experiences of children impacted by HIV/AIDS, and provides insights into factors leading to social and educational exclusion. Much of this evidence stems from qualitative research into the lives and welfare of orphaned children and, to a lesser extent, other children made vulnerable by HIV/AIDS. An early schools-based survey of the impact of HIV/AIDS in primary and secondary schools also used qualitative data to explore reasons for absenteeism and dropout amongst orphaned children (Kadzamira et al., 2001).

**Socio-economic constraints**

In their qualitative study of social change in the wake of HIV/AIDS, Bryceson et. al. (2004) note that cumulative impoverishment of households affected by HIV/AIDS leads to increased difficulties in meeting basic needs, including schooling costs. The authors link this to school dropout amongst orphaned children, especially boys, who would become involved in *ganyu* (hired labour). School-based surveys in Malawi and neighbouring Zambia found that increased absence and dropout was related to poverty, child labour and household responsibilities (Kadzamira et al., 2001; Robson and Sylvester, 2007). Research from neighbouring Tanzania observes that children from households affected by HIV/AIDS are often required to work to ‘fill the gap’ left by the impact of adult illness and mortality on household labour and income generation (Dachi and Garrett, 2003). Mann (2002) also noted that orphaned children in rural Southern Malawi resort to paid labour as a coping strategy, although the impact of this on schooling was not made explicit. Studies suggest that orphaned girls would enter into early marriage or transactional sexual relationships as means to solve their financial difficulties (Bryceson, Fonseca and Kadzandira, 2004; Kadzamira et al., 2001) or escape discrimination in their host households (Mann, 2002). McBride (2004) describes the impoverished conditions faced by many orphaned children, noting that a lack of basic needs, hunger and social exclusion undermine their attendance at school.
Household arrangements, attitudes and practice

In Malawi, increased incidences of morbidity and mortality in the wake of HIV/AIDS have seen a resultant increase in fragmented households, child migration and fostering. Orphaned children are often allocated to host households on the basis of arrangements within extended families (Ansell and Young, 2004; Bryceson, Fonseca and Kadzandira, 2004). The extent of the influence of traditional inheritance patterns on such arrangements is the source of some discussion in the literature, largely in relation to the welfare of orphaned children within patrilineal and matrilineal communities (Bryceson, Fonseca and Kadzandira, 2004; Cook, Ali and Munthali, 2000). However, in their qualitative study of child migration amongst households affected by HIV/AIDS, Ansell and van Blerk (2004) strike a warning note against broad generalisations. They argue that traditional norms and practices have long been somewhat fluid in Malawi and that fostering arrangements are often borne of compromise based on, for example, the sequence of deaths within families, migration of the surviving spouse, individuals’ sense of responsibility and the personal agency of orphans themselves. They also note that children’s education can be interrupted as a consequence of parental death and whether they return to school is often dependent on guardians’ attitudes and practices towards their for schooling.

Within host households, Mann (2002) offers a detailed portrayal of discrimination faced by orphaned children, which included denial of food, exploitation, emotional abuse and forced absenteeism from school. She suggests that such scenarios emerge when guardians’ frustration at their inability to meet all the households’ basic needs, and their inclination to give preferential treatment to their own children, clash with misunderstandings surrounding orphans’ emotional withdrawal.

Psychosocial factors

In exploring the psychosocial impact of HIV/AIDS on orphaned children, authors highlight children’s feeling of grief and isolation, particularly in the face of discrimination and a perceived absence of care (Cook, Ali and Munthali, 2000; Mann, 2002). Mann (2002) notes the importance of allowing children to remaining with guardians where they feel loved and supported emotionally. Bryceson et al (2004) also highlight the low self-esteem of orphans within host households. However, these studies make no explicit examination of how psychosocial factors impact on children’s participation in schooling.

School-related factors

Fewer studies look in-depth at the role of the school in the educational access of children affected by HIV/AIDS in Malawi. However, evidence from case studies of schools’ responses to HIV/AIDS suggests that schools do little to support orphans and other vulnerable children, and staff do not see themselves as accountable for the needs of such children (Kendall and O'Gara, 2007). Earlier research describes how - with
high class numbers, pressures of timetabling, poor capacity and teacher ill-health and attrition - teachers are overwhelmed and incapable or unwilling to take on the additional burden of reaching out to vulnerable children (Kadzamira et al., 2001; Moleni and Ndalama, 2004). Kendall and O’Gara (2007, p.5) argue that free primary schooling and “passive open-door policies …are insufficient means to bring and keep these children in school.” And, in the absence of monitoring and follow-up of pupils, conclude that vulnerable children are a “present, but officially invisible population in the school setting” (2007, p.10).

Research also suggests that schools’ lack of engagement with children affected by HIV/AIDS is compounded by a de-linking between schools and their communities, with school and community relations further undermined by accusations of teachers’ sexual abuse of pupils (Bryceson et al., 2004). The prevalence of gender-based violence in schools in Malawi, perpetrated both teachers and fellow pupils, indicates a school culture that conflicts with an envisioned safe haven for vulnerable children (Burton, 2005; Kadzamira, Moleni and Kunje, 2006; Leach et al., 2003). In a national survey, a third of all pupils reported that teachers demanded sex from pupils (Burton, 2005). A later survey links girls’ experience of gender-based violence with school dropout (Bisika, Ntata and Konyani, 2009).

More research is needed to elucidate the prevalence of discrimination against children affected by HIV/AIDS in primary schools in Malawi. Mann (2002) describes emotional abuse by peers – though not specifically fellow pupils - and insensitivity amongst some teachers when addressing HIV/AIDS-related topics in the classroom. Kadzamira et al. (2001) observed little or no direct discrimination against orphaned children in schools. They did conclude, however, that subtler forms of discrimination were at play, with school regulations limiting accessibility for pupils in acute poverty.

2.5 Chapter Summary
Drawing from the definitions and debates surrounding social exclusion, educational inclusion and exclusion presented in the above review, this chapter has outlined the study’s understanding of access as encompassing secure enrolment and progression and equitable opportunities for participation and learning, free from discrimination. The use of orphan status alone as a proxy for the effects of HIV/AIDS on educational access is acknowledged as problematic, with more research required into children’s experiences prior to the death of a parent. Patterns of enrolment in Malawi also show how several interlocking factors, such as age, household income, gender, age and location, may converge to impact on children's educational access.
The qualitative research reviewed above illustrates the difficulties faced by children affected by HIV/AIDS. However, evidence into the role of the school in creating or mitigating these difficulties is limited. In addition, little of the research attempts to draw links between disadvantages faced by vulnerable children and a corresponding impact on educational outcomes, beyond whether a child is in school or not.

Despite a more nuanced approach offered by the qualitative literature, much of the focus of the research reviewed is on orphaned children. This reflects another important gap in the literature regarding the accessibility of schools for children impacted by HIV/AIDS in different ways. More yet needs to be known about the wider spectrum of economic, social and psychological disadvantages faced by children affected by HIV/AIDS in Malawi and how these impact on their educational access and attainment. An attempt to do so is presented in Chapter 6 of this thesis.
CHAPTER THREE: THE USE OF FLEXIBLE APPROACHES TO IMPROVING EDUCATIONAL ACCESS AND RETENTION

3.1 CHAPTER OVERVIEW

This chapter discusses policy options and strategies to address barriers to education faced by children affected by HIV/AIDS. It explores ways in which schools might adopt more flexible approaches to learning in order to improve their access and inclusion. The chapter reviews, firstly, the literature on educational responses that can help mitigate the impact of HIV/AIDS on vulnerable learners and improve their educational access, drawing on examples from Malawi. The chapter then highlights examples of greater flexibility in educational provision that can enhance participation and outcomes of vulnerable groups, and considers the possibilities for integrating ODFL strategies within formal schooling. In doing so it considers the potential of flexible models of schooling to support children made vulnerable by HIV/AIDS.

OVERVIEW OF POLICY OPTIONS AND STRATEGIES TO IMPROVE EDUCATIONAL ACCESS FOR CHILDREN AFFECTED BY HIV/AIDS

Within the literature on educational responses to the impact of HIV/AIDS on children’s access to learning, several key strategies for educational intervention are discussed. Broadly, they can be distinguished by whether they provide specific, targeted support for orphaned and vulnerable children or can bring benefits more broadly, by seeking to improve educational access for all (Bundy et al., 2002). These strategies are summarised in summarised in Table 3-1 below.

Hepburn (2001, p. iv) underlines a general consensus in the literature on HIV/AIDS mitigation when she states that any initiative “should be viewed as one dimension of a necessarily multi-dimensional response to the increasingly complex effects AIDS has on children, families and communities.” Bennell (2005) argues that educational responses to should take place within a wider social protection framework that includes safety-net funding for basic needs, support for community and home-based care programmes and strengthened child rights and protection legislation. Pridmore (2007) highlights the importance of strong school-community linkages to build support for vulnerable children and greater flexibility to respond to challenges faced by children in high HIV prevalence communities. She and others point to the potential of ODFL or complementary, non-formal programmes to reach out to orphaned and vulnerable children who may find their schooling interrupted or unable to attend regularly (Boler and Jellema, 2005; Jukes et al., 2008; Kelly, 2000).
### Table 3-1: Educational responses to improve access for orphaned and vulnerable children in the context of HIV/AIDS

<table>
<thead>
<tr>
<th>Educational responses</th>
<th>Targeted interventions</th>
<th>General interventions</th>
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<tbody>
<tr>
<td>Subsidising school costs</td>
<td>Subsidisation of school-related costs (e.g. uniform).</td>
<td>Elimination of school fees</td>
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<td></td>
<td>Bursaries</td>
<td>Social cash transfers</td>
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<td>School health and nutrition programmes</td>
<td>Take-home rations within school feeding programmes</td>
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<td>Health interventions (e.g. de-worming)</td>
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<tr>
<td>Restructuring traditional educational provision with more</td>
<td>Flexible timetabling, curriculum and progression</td>
<td>Community schools</td>
</tr>
<tr>
<td>open and flexible options for delivery.</td>
<td>Flexible ODL modes of study (e.g. modules and self-study guides)</td>
<td>Multi-media DE programmes for out-of-school youth (e.g. interactive radio).</td>
</tr>
<tr>
<td>Strengthening school and community capacity for care and</td>
<td>Identification, monitoring and follow-up</td>
<td>GREATER collaboration and linkages with local support networks and organisations</td>
</tr>
<tr>
<td>support for orphaned and other vulnerable children.</td>
<td>Provision of pastoral care and counselling (mentoring).</td>
<td>Referral systems</td>
</tr>
<tr>
<td></td>
<td>Mobilising community support for educational and welfare needs (fundraising and IGA).</td>
<td></td>
</tr>
<tr>
<td>Improving quality of educational provision</td>
<td>Remedial learning support</td>
<td>Improved relevance of curriculum (e.g. life skills, vocational skills)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Whole school reform</td>
</tr>
<tr>
<td>Promoting inclusiveness and child rights</td>
<td>Proactively address issues for girls’ security and safety at school</td>
<td>Create inclusive school policies and practice to address stigma and discrimination</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Advocacy for child rights</td>
</tr>
</tbody>
</table>

(Adapted from: Hepburn, 2001)

Sources: Bennell (2005); Boler and Carroll (2003); Boler and Jemella (2005); Carr-Hill et al. (2002); Hepburn (2004); Kadzamira et al. (2001); Kelly (2000); (Miller, Tsoka and Reichert, 2008); Pridmore and Yates (2005); Rispel (2006); (Ferreira and Ebersohn, 2011)

### 3.2 Evidence of Impact on Educational Access

Rigorous evaluation of interventions to mitigate the impact of HIV/AIDS on educational access is often lacking (Shann et al., 2013). As Pridmore (2007, p. 41) noted in her review of health impacts on educational access and attainment:
There is a rapidly growing literature on interventions to help mitigate the impact of HIV and AIDS on school-aged children who are directly affected by the epidemic, but a dearth of evaluation data.

The UNAIDS Inter-Agency Task Team on Education’s review of literature on HIV/AIDS, education and marginalisation, reiterates the absence of strong evidence on the impact of educational interventions on orphaned and vulnerable children, particularly school-based interventions (UNAIDS IATT on Education, 2009). More recently, social protection programmes have shown success in enhancing enrolment and retention of children from vulnerable households through the provision of cash transfers. In Malawi, pilot schemes in the high HIV-prevalence districts of Zomba and Mchinji found that providing vulnerable households with a small monthly stipend increases school enrolment and class attendance and reduces dropout (Baird et al., 2010; Miller, Tsoka and Reichert, 2008; Mncube and Harber, 2013).

Much of the more robust empirical evidence on the effectiveness of the above-mentioned strategies (Table 3-1) originates from the wider field of policy-related research to inform EFA and MDG goals (e.g. J-PAL studies out of MIT). This literature examines cost-effective means of improving enrolment gaps experienced by children from low-income households and other traditionally disadvantaged groups and, to a lesser extent, their attendance, retention and progression. Based on empirical evidence from work in developing countries, three key strategies are identified as important policy options: (1) provision of social cash transfers (2) reducing school-related costs and (3) in-school health and nutrition programmes (Birdshall, Levine and Ibrahim, 2005; Duflo and Kremer, 2003; Kremer, 2003; Krishnaratne, White and Carpenter, 2013). Improving school quality has also been shown to have positive impacts on enrolment and retention, especially amongst girls (Birdshall, Levine and Ibrahim, 2005; Lloyd, Mensch and Clark, 2000), although there is less research to support this and findings are often context-specific (White, 2009).

3.2.1 Reducing school-related costs

Country-specific studies in SSA, including Malawi (see Al-Samarrai and Zaman, 2007), have shown that abolishing school fees leads to increased educational access overall and a narrowing of enrolment gaps for previously excluded children, including orphaned children (Jukes et al., 2008; UNESCO, 2008b). Although bursaries and scholarships for fees exemption can improve access to education for children from disadvantaged groups, such as girls and orphaned children, they have been criticised for attempting to provide a ‘quick-fix’ solution without consideration of additional school-related costs, or pupils’ emotional and social needs (Boler and Jellema, 2005). Targeting scholarships for needy pupils can also create tensions between beneficiaries and non-beneficiaries, as well as within households and communities of those targeted (Chapman and Mushlin, 2008). In the case of merit-based scholarships, underlying issues of equity are apparent (Kremer, Miguel and Thornton, 2008; Moleni, 1999).
Reducing the financial burden of schooling on households through subsiding school-related costs (e.g. school uniforms) has been shown to have a positive impact on children’s access and retention. Evidence from Kenya indicates a greater effect on children from poorer households (Evans, Kremer and Ngatia, 2009). In Malawi, the USAID-funded Ambassadors Girls Scholarship programme (AGSP) provides school-related materials for orphaned and vulnerable girls in primary schools, conditional on their attendance and performance (Jukes et al., 2008). The programme also trains teachers to mentor girls, conduct follow-up meetings and teach Life Skills. In Malawi, there has been some evidence of success in this project, with claims that dropout was reduced (USAID/Malawi, 2008a). However, as with other bursary schemes, the numbers are limited and unlikely to make substantial inroads into the extent of need (Boler and Jellema, 2005).

### 3.2.2 School health and nutrition programmes

School feeding programmes are promoted as effective strategies to improve educational access, through providing incentives for school attendance, off-setting household costs and improving the nutritional status of children attending school (Bundy et al., 2009; Levinger, 2005; WFP, 2010). Empirical evidence indicates that school feeding is particularly effective if complemented by low-cost health inputs such as de-worming and micro-nutrient fortification (Bundy et al., 2009; Kristjansson et al., 2006; Vermeersch and Kremer, 2005). School feeding has been shown to support learning through addressing short-term hunger and enhancing short-term cognitive skills, with the greatest impact on children of poor nutritional status (Bundy et al., 2006; Kristjansson et al., 2006).

School-feeding and health interventions are often presented as cost-effective strategies for delivering welfare support to children and, consequently, addressing access and attainment (Jukes et al., 2008). Yet children whose access is already curtailed will be excluded from such support, and such interventions may not reach those most vulnerable, including HIV-affected children (Bundy et al., 2002). In Malawi, an evaluation of a World Food Programme pilot that provided in-school feeding concluded that on-site feeding alone was not sufficient to overcome other barriers excluding vulnerable children from school (Edström et al., 2008). To address this, the targeted use of take-home rations, conditional on attendance, was adopted to support girls and orphaned children (Bundy et al., 2009; WFP, 2010) The results of this approach were mixed: although there was some evidence of a positive impact on girls’ enrolment and retention overall, there was no improvement in grade progression for girls and only a slight improvement for boys overall (Edström et al., 2008). Kristjansson et al (2006) in their review of school feeding programmes noted that sustained, improved learning outcomes resultant from the provision of meals would be dependent on whether school conditions themselves were conducive to learning.
Whilst there is substantive evidence that some aspects of educational access can be improved by reducing school-related costs and school feeding, outcomes for different vulnerable groups are often highly nuanced. Such interventions, often heavily supported by international donor agencies, operate from within a deficit paradigm and reflect a strong normative stance in tackling access (see Chapter 2). Mhlanga (2008, p. 25) states that many such demand-side interventions are based on the assumption that once vulnerable children are “relieved of the cost burden of schooling, their attendance and academic achievement will be guaranteed” He argues that relatively few such interventions specifically address learning lost through absenteeism, poor concentration and participation or low quality of education. Such approaches have been criticised for failing to problematise and address other, more complex causes of exclusion (Miles and Singal, 2010; Rogers, 2004; Yates, 2008). For example, emphasis on pupil and household disadvantage fails to acknowledge the role of the school and its structures and value systems in raising barriers to access.

3.2.3 Holistic school-based initiatives

A common assumption is that schools are well-positioned to act as nodes of service and care, addressing a range of social, emotional and educational needs of vulnerable children. This can be found both in literature concerning SSA (Bundy et al., 2009; Chitiyo, Changara and Chitiyo, 2008; Rispel, 2006) and in Malawi specifically (Cook, Ali and Munthali, 2000; Kendall and O'Gara, 2007; McBride, 2004). There are several examples of such holistic educational interventions to support HIV-affected children in SSA. Many follow a ‘caring schools’ model that broadly conceptualises schools as ‘nodes of care and support’ through which to deliver a range of welfare, psychosocial and health-related support services to vulnerable children (Williams, 2010). These tend be heavily reliant on school-community partnerships.

Examples include the USAID-funded ‘Help At-Risk Orphans and Vulnerable Children (HERO) and ‘School as Centres for Care and Support (SCCS)’ programmes in SSA (Jukes et al., 2008; Rispel, 2006). The ‘Circles of Support’ initiative developed in South Africa and piloted in Botswana, Nambia and Swaziland is a collaborative initiative integrating school-based and community responses to mitigate the impact of HIV/AIDS (SADC, 2007). It draws on notions of social capital to strengthen community-school linkages and build support networks for children affected by HIV/AIDS (Dlamini, 2005; Mhlanga, 2008). Partnerships of schools and local volunteers mobilise networks of families, friends and other community members to identify and undertake various small actions (e.g. home visits, help with homework or fundraising) to support vulnerable children (Pridmore, 2008b). Focus group research with beneficiaries suggests that the initiative helped to establish a wide support base from which vulnerable children could access financial and material support for their schooling. In addition, teachers took up an important role in providing emotional support and
life skills guidance (Dlamini, 2005). However, available evaluations fail to provide evidence of impact on pupil access and outcomes.

In a case study of schools in Cape Town in South Africa, Williams (2010) discusses several entrenched obstacles to schools adopting a ‘caring school’ approach, including over-crowded classrooms and over-burdened teachers, ineffective school-community governance and identification of vulnerable learners, and inadequate training and funding to deal with learners’ psychosocial issues.

The ‘Supportive Teachers, Assets and Resilience’ project (STAR), also in South Africa, placed the teacher as central to a holistic package of school and community-led support (Ferreira and Ebersohn, 2011). Teachers were mobilised to support HIV-affected children and their families by building school-based networks and utilising community partnerships. Teachers acted as conduits to wider social support services and worked alongside community volunteers to provide health and nutrition needs (e.g. school gardens), psychosocial and learning support. A formative evaluation of the STAR project indicates well-motivated teachers and good community links, but discussion of pupil outcomes is lacking (Ferreira and Ebersohn, 2011).

An underlying assumption of this approach is that teachers are best-placed, willing and able to provide the necessary pastoral care to vulnerable children. However, others have noted that teachers are often demotivated, ill-equipped or unwilling to provide specialised psychosocial support or wider ‘social contracts’ (Bennell, 2004), and may lack the moral authority to take on a central role in the delivery of pastoral care (Clarke, 2008; Ogina, 2010). Qualitative evidence from Malawi suggests that in high HIV prevalence communities, teachers who are already strongly challenged to meet the needs of pupils in their classrooms are unlikely to reach out to those who do not attend school regularly (Kendall and O'Gara, 2007).

In Malawi, the USAID-funded Primary School Support Program: School Fees Pilot (PSSP-SFP), piloted a holistic school reform programme designed to increase access to quality primary education, with emphasis on OVC (USAID/Malawi, 2008b). In contrast to the ‘caring schools’ movement, the project aligns itself with a school effectiveness approach. Alongside strategies to promote literacy, support teacher development and increase resources to schools through grants and income-generating activities, youth volunteers mobilised communities to develop action plans and implement activities to support vulnerable pupils. An internal evaluation claimed substantial improvements in enrolment, attendance and performance overall amongst participating schools compared with comparison schools. However, the nature of evaluation does not allow judgements to be made with regard to the benefits accrued to children identified as most vulnerable (USAID/Malawi, 2009a)
3.2.4 Complementary programmes through community schools

Second-chance, complementary education programmes delivered through community schools have been shown to be a cost-effective means of expanding educational access to vulnerable groups in several low-income countries (DeStefano et al., 2006). In Zambia, community schools were introduced as part of a wider response to the HIV/AIDS epidemic, targeting orphans and other vulnerable children, and in 2004 accounted for 25% of total primary enrolment nationally (DeStefano, 2006; Kelly, 2000). Key features of such programmes include: flexible timetabling, local recruitment of para-professionals as teachers, low-cost infrastructure, small class sizes and community-based management committees (DeStefano et al., 2006).

However, there are concerns that without strong links and equivalency with formal systems, such programmes run the risk of evolving into parallel institutions perceived as inferior to mainstream education (Hoppers, 2005; Lyon and Rosati, 2006; Rose, 2009); putting them at odds with current the discourse on inclusion. Furthermore, and somewhat paradoxically, the drive towards greater equivalency and mainstreaming may result in the loss of innovation and flexibility (Rose, 2009). Community schools have also been critiqued for placing a heavy burden on resource-poor communities expected to construct and maintain school infrastructure (Hoppers, 2005; Rose, 2002).

Malawi’s CBE programme targets out-of-school children age 9-17 years who have dropped out before completing Standard 5. Learners follow a 3-year course of learning with equivalency to the primary curriculum and the option of re-entry in the formal system. The programme’s conceptualisation drew on approaches used by non-formal literacy classes and adopted many elements of a community schools model (Moleni and Nampota, 2006). Baseline data from initial GTZ-funded pilot indicates that approximately a third (30.0%) of CBE learners were orphaned children, a figure notably higher than in primary schools within the target districts. Amongst older learners this figure rose to almost half (49.3%). Learner outcomes compared favourably with those from formal primary schools, although challenges of high dropout and absenteeism were present (Allsop and Chiuye, 2010).

3.2.5 Greater flexibility in educational provision

The rigid nature of most formal school programmes can become a barrier to children affected by HIV/AIDS; many may be unable to attend school regularly or at set times due to increased household responsibilities, domestic workload and care-giving (Boler and Carroll, 2003; Robson, 2004; Robson and Sylvester, 2007), their need to work outside the home (Guarcello et al., 2004; Jukes et al., 2008; Pridmore, 2008a) and seasonal fluctuations in food security and household income (Hadley, 2010). More flexible and responsive approaches to educational provision are needed to support such children, and to enhance the participation of those in
school, but performing poorly due to psychological trauma (Kelly, 2000), discrimination (Boler and Carroll, 2003; Pridmore, 2007) or previous erratic attendance (Rosati and Lyon, 2006).

Boler and Carroll (2003) make special mention of ODFL as an educational response to improve access to learning for children affected by HIV/AIDS. Pridmore and Yates (2005) argue that flexible delivery of the curriculum using ODFL strategies and resources would help ensure that vulnerable young people do not fall behind when unable to attend school, and may help them re-enter if already dropped out.

However, there is a critical gap in the research literature regarding the application and evaluation of ODFL strategies to support children affected by HIV/AIDS within formal primary schools. This thesis seeks to address this gap. In the absence of a strong evidence base, lessons can be drawn from flexible learning interventions. One such approach—the ‘second-chance’ or complementary model—has been highlighted above. The remainder of this chapter considers several interventions that fall under the broad umbrella of ODFL and highlights other examples of widening flexibility within formal schools. It first grounds the discussion in an understanding of ODFL and its different uses.

### 3.3 Enhancing Access and Retention Through Flexible Approaches to Education Provision

#### 3.3.1 Conceptualising flexible approaches to educational delivery in basic education

Enhancing the flexibility of educational provision to address barriers to learning is an approach that crosses the spheres of non-formal education (Rogers, 2004), open and distance learning (Perraton, 2000) and, to a lesser extent, formal schooling. Recently, it has been promoted as a means to reach out to children educationally marginalised and to improve inclusion (UNESCO, 2010) Those advocating for greater flexibility fall into two broad camps:

Firstly, those who envision wider accommodation with existing education systems for alternative or complementary basic education programmes, delivered through face-to-face or distance education modes, and who view flexibility as largely synonymous with non-formal education (for example, CCfE, 2003; Hepburn, 2001; Kelly, 2000)

Secondly, those who look to increased flexibility to enhance the accessibility, quality and reach of the formal system. Such views are reflect a desire to see greater inclusiveness and support for vulnerable groups (Jha, 2002; Pridmore and Yates, 2005) and more democratic schooling (Harber and Davies, 1998), or concern over the creation of an inequitable, two-tier system of educational provision if the non-formal sector were to become primarily responsible for children considered vulnerable and harder to reach (Carr-Hill et al., 2002).
A critical consideration for flexible learning approaches is the relationship sought with formal schooling: whether operating outside and parallel to mainstream education systems, or pursuing points of integration (Creed and Joynes, 2005; Yates, 2008). A second consideration is curriculum delivery. Just as educational provision exists on a continuum between programmes and institutions independent and parallel to formal education and those integrated within formal structures, a second continuum operates between autonomous, demand-driven learning (e.g. ICT distance learning packages) and face-to-face teaching and learning (see Figure 3-1 below).

The Association for the Development of Education in Africa (ADEA) Working Group on Distance Education and Open Learning (2002, p. 24) notes that “the boundaries between distance and non-distance forms of provision are ...blurring”, as distance learning providers seek ways to offer to greater interaction and face-to-face support for learners to improve retention and success rates and traditional contact-based providers (such as formal schools) are increasingly looking to new modes of delivery to reach a greater diversity of learners. Creed et al (2005) highlight the importance of incorporating tutoring opportunities for learners into distance learning programmes. Yates (2008, p. 9) describes an integrationist approach as one:

...seeking to work more directly with and within the mainstream, trying to engineer alternative delivery modalities using new media and pedagogy from within the schools themselves. Here conventional mainstream provision agrees to become more responsive and flexible in order to better serve new audiences previously excluded by the relatively closed nature of the face-to-face mode.

The school-based intervention model examined in this doctoral study adopted an integrationist approach: working with ODL resources and strategies within formal primary schools in order to address exclusion (the model is described in full in Chapter 6). As such, it is located at the centre of the developed typology presented in Figure 3-1 below.
Autonomous learning

Parallel

Distance Education programmes (ICT)
Multi-mode study

Open schooling
Adult Basic education

Flexible learning
- self-study guides
- e-modules

School enrichment
- multimedia (radio)
- peer learning
- remedial support

Integrated

Face-to-Face learning

FIGURE 3.1: TYPOLOGY OF FLEXIBLE APPROACHES TO DELIVERING BASIC EDUCATION
3.3.1.1 Open, Distance and Flexible Learning

Defining ODFL

The nomenclature Open, Distance and Flexible Learning (ODFL) used in this study groups together a set of concepts and strategies that reflect shifting trends in education delivery. It emerges from early engagement with distance education and open schooling as a means to expand access. It has grown to encompass the convergence of mixed-mode, multi-media and ICT options with more conventional teaching strategies. Distance Education has been defined as an educational process in which a greater proportion of the teaching and learning takes place when the teacher is removed in space and/or time from the learner (Perraton, 2007).

‘Openness’ is complementary, but not synonymous with distance learning. It refers more broadly to policies and practices that permit access without restrictions and are concerned with reducing barriers to learning (CCfE, 2002; Unterhalter, Hoppers and Hoppers, 2000). Flexible learning emphasises the appropriate use of any of a range of available teaching methods (including distance learning, face-to-face, multi-media, ICT and mobile learning) to optimise learning opportunities and best meet the needs of learners (Kember, 2007).

Underlying principles of ODFL, such as responsiveness to diversity and reducing barriers to learning (see, for example, Dodds, 2006) support greater inclusion in education systems.

What can ODFL offer?

Open and distance education modes have a long and proven record of expanding access to young people excluded from conventional schools, whether by distance, cultural considerations, cost or lack of entry requirements (Adams, 2008; Creed and Joynes, 2005; Ho and Thukral, 2009; Kember and Murphy, 1990; Nielsen, 1991; Yates, 2000). Despite widespread use in secondary and higher levels of education, similar initiatives to expand access to basic education in low-income countries have been limited, largely to non-formal projects to reach underserved communities (Ho and Thukral, 2009). This has been due, at least in part, to concerns about a lack of supervision and face-to-face support, the appropriateness of materials and poor development of socialisation skills (ADEA, 2002; Nielsen, 1991; Unterhalter, Hoppers and Hoppers, 2000). Over the last decade, Perraton (2007) observes a renewed interest in ODFL, a “new legitimacy” (p10) built on evidence of improved access through parallel programmes and the potential to strengthen and transform practice within schools. The emergence of flexible learning and its emphasis on multi-mode strategies, has presented a range of possibilities for integrated approaches to complement mainstream education.

Pridmore and Yates (2006) highlight several exemplars of ODFL interventions that reach out to vulnerable groups. One is the Somali Distance Education Literacy Programme (SOMDEL) coordinated by the Africa Educational Trust (AET) that provides a flexible programme of basic education for out-of-school children
and young people (Brophy and Page, 2007) The programme uses a ‘three-way’ teaching approach: fifty weekly radio broadcasts, a study pack of printed materials and face-to-face tutorials and support in community-based groups. Initially piloted in 2002, successive intakes had reached over 25,000 learners by 2006. External evaluations indicate that the great majority of learners completed and passed their courses (Brophy and Page, 2007; Fentiman and Dennis, 2007)

The long-established Escuela Nueva (EN) programme in Colombia has been heralded as a successful model of flexible and adaptive teaching and learning; designed to enhance the quality and reach of education in multi-grade rural schools (Boler and Carroll, 2003; Creed and Joynes, 2005; Pridmore and Yates, 2006). A key feature of this model is the provision of high quality, interactive self-study guides. The guides facilitate independent study or peer-led group work and promote child-centred active learning. They are linked to the core national curriculum, but can be adapted to local contexts and allow children to learn in a flexible manner appropriate to their needs (Colbert, 2009). EN schools have performed well across several outcomes, showing significantly higher rates of participation and retention and reduced repetition compared to traditional rural schools. Evaluations have shown EN learners achieving higher scores in almost all subjects in grades 3 and 5 (Little, 2001). EN schools also demonstrate greater community involvement and increased uptake of civic education activities (Creed and Joynes, 2005).

The integration of ODFL in formal primary education, has generally focused on improving the quality of education provision rather than addressing access directly (Perraton, 2007). Creed and Joynes (2005) present four key areas of activity: community mobilisation, training for school leadership and management, teacher education and the introduction of new teaching and learning resources and methods (as in the example of EN schools above). In Malawi, ODFL initiatives to support formal primary education have been limited to the piloting of Interactive Radio Instruction (IRI) to enrich teaching in lower grade classrooms and as a means to increase the supply of primary teachers through a distance teacher education programme (Steiner-Khamsi and Kunje, 2011).

**ODFL and HIV/AIDS**

ODFL has been presented as an important strategy in HIV prevention and mitigation (Boler and Carroll, 2003; CCfE, 2003; Perraton, 2000; Pridmore, 2007). Youth HIV prevention and behaviour change programmes in SSA have been successfully supported by ODFL strategies and resources (see Pridmore and Yates, 2006). Drawing on lessons learned from their study of ODFL initiatives in South Africa and Mozambique, Pridmore and Yates (2005) argue strongly that ODFL also has an important role to play in HIV/AIDS mitigation. They highlight the potential of ODFL to support schooling of vulnerable young people
in the context of poverty and HIV/AIDS, through, for example, a more flexible delivery of curriculum content to prevent learners falling behind when unable to attend classes, and by providing opportunities for psychosocial support. Referring to successful interventions such as the EN Schools programme (described above), they highlight the use of radio, self-study learner guides for individual or group study and/or peer-tutoring and a ‘buddy’ system (fellow pupils as mentors) as strategies worth pursuing.

3.3.2 Widening flexibility within formal schools

For the purposes of this study, flexibility refers not only to the time, location and pace of learning, but is extended to consider modes of delivery and teaching (including who teaches), curriculum, learning support, assessment and school organisation, ethos and discipline (Harber and Davies, 1998; Kelly, 2000). Several interventions have incorporated one of more of these aspects into formal schooling to reach out to and retain vulnerable groups.

Learning support

Amongst recommendations for planning for the provision of education to children orphaned by HIV/AIDS, Carr-Hill et al (2002) suggest the appointment of mentor teachers to work with children needing to re-access enter school, identifying their learning needs and providing remedial teaching. In India, the Baslakhis programme run in partnership with government schools provides remedial education to disadvantaged children (Banerjee et al., 2004). The programme recruits young, local women (balsakhis, literally “child’s friend”) to provide additional instruction to children identified as lacking basic competencies for their grade. Results from a randomised impact evaluation indicated significant improvement in test scores amongst classes receiving the intervention, with the greatest gains amongst previously low-scoring children – most likely to have been assigned to the balsakhi group (Banerjee et al., 2004). The authors suggest that the observed positive impact relates not only to additional learning support, but that balsakhi share a common cultural background with the children, whereas the teachers did not (Banerjee et al., 2004). There was no significant effect on attrition and attendance, suggesting the availability of remedial support alone was not sufficient to address other constraints on access.

Research evidence on the use of remedial programmes in SSA is sparse. In Malawi, the PSSP-SFP pilot (see 3.2.3 above) included such a strategy. Youth volunteers– named the Mobilisation Corps of Malawi (MCM) – work with school clusters to support a range of school and project activities. The MCM were recruited from within local communities and paid a small stipend. One aspect of their work was the establishment of after-school reading clubs and reading ‘buddies’ for pupils (USAID/Malawi, 2009b).
**Peer-tutoring and collaborative learning**

Haber and Davies (1998) suggest that schools should adopt greater flexibility through the use of peer-tutoring. They give as example the success of the Child-to-Child approach. Programmes incorporating this approach are now established in over 90 countries and operating in a wide range of contexts, from formal school systems to urban slum projects and home-based care for families affected by HIV/AIDS (IRDC, 2010). Drawing on theories of active learning and empowerment, and a philosophy that views children as agents of change, the Child-to-Child approach uses a range of learning resources and activities to encourage children teach others about health and development issues in their communities (Pridmore, Stephens and Stephens, 2000).

**Ethos and discipline:**

Greater flexibility in modes of educational delivery, as discussed above, may well have the potential to address constraints faced by children and encourage greater attendance. Yet, adopting greater flexibility would require a significant shift in the often highly authoritarian ethos of formal schools to one operating on more democratic principles and a re-conceptualising of absenteeism and discipline that may well run counter to present practices (Harber, 2004). As Harber and Davies observe (1998):

> Arguments for flexibility, particularly in time and space, would appear to preclude harsh judgements about being punctual or leaving school at different times of the day or week. Yet many teachers and heads feel threatened by such apparent disdain for time.

Consideration may also need to be given to schools and teachers’ stance on strict dress codes. In Malawi, where additional school costs play a critical role in the educational exclusion of vulnerable children, especially girls (Colclough, Rose and Tembon, 2000; Kadzamira and Rose, 2003), insistence on the wearing of uniform for egalitarian purposes can be counterproductive and inequitable.

An evaluation of the first phase of a South African-based project to promote inclusion in primary schools identified the critical importance not only of addressing learner diversity and resourcing, but also the adoption of more democratic leadership, structures, processes and values (Engelbrecht, Oswald and Forlin, 2006). Moving from authoritarian school cultures towards greater democracy and adherence to child rights is also essential in providing a safe environment for vulnerable children, particularly girls (Leach, 2004). Thus, the implementation of interventions to improve flexibility in schools needs consideration of potentially exclusionary and abusive practices that can undermine impact on access and wider inclusion.
3.4 Chapter Summary

This chapter has presented an overview of educational responses highlighted in the literature as having the potential to improve the educational access and retention of children made vulnerable by HIV/AIDS. Where possible, this chapter has referred to evidence from programmes implemented in Malawi. It has differentiated between strategies that provide specific, targeted support and wider interventions expected to promote the inclusion of vulnerable groups (Table 3-1). Whilst highlighting the positive effects of welfare-based interventions in addressing access (e.g. school health and nutrition, SCTs, cost reduction) this chapter has also warned that the deficit approach adopted by such interventions does not adequately address the role of the school in raising barriers to access, and may result in a failure to reach those most at risk of educational exclusion. Common to school-based interventions to mitigate the impact of HIV/AIDS is the central role placed on teachers to support vulnerable children. However, other evidence-based literature challenges the assumption that teachers are best-placed – or have the necessary capability - to provide such support.

To further elaborate the rationale for this study, this chapter has examined literature on flexible models of schooling to support improved access and inclusion, and considered its relevance to children affected by HIV/AIDS. It focused on approaches at the school-level, rather than wider, systematic reforms. It has defined ODFL and noted how key concepts of flexibility, responsiveness and addressing barriers to learning converge and support inclusion in education. A typology of ODFL highlights the range of approaches encompassed. Whilst there is a lack of empirical evidence on the use of ODFL strategies and resources to enhance the access of children affected by HIV/AIDS, this chapter has discussed the successes and challenges of a number of interventions working with other vulnerable groups. This chapter has also examined means of widening flexibility within schools, as well noting the need to address entrenched ideas regarding school regulations and ethos.

The integration of ODFL into formal schooling will be grounded in – and influenced by – the context, structures and relationships met in schools and their communities. This study not only discusses the potential of ODFL and wider flexibility within schools to support the educational access of vulnerable children in the context of HIV/AIDS, but will, in subsequent chapters, evaluate a school-based intervention that integrates a package of ODFL strategies and resources with formal curriculum delivery, within a framework of school support and community action. In doing so it addresses a critical gap in the literature surrounding HIV/AIDS mitigation, ODFL and inclusion.
Chapter Four: Research Approach and Methods

4.1 Chapter Overview

As stated in Chapter 1, the purpose of this sequential, two-phased mixed methods study was, firstly, to explore the factors influencing the educational access and retention of children affected by HIV/AIDS in rural Malawi in order to contextualise and inform the development of a flexible model of schooling. Thereafter, a school-based intervention was implemented over one academic year in a sample of primary schools in selected districts. In the first phase, qualitative data from four contrasting case study sites was gathered and analyzed, and factors influencing access and retention identified. Under the SOFIE project, a flexible model of schooling was subsequently developed to mitigate barriers to learning and support vulnerable pupils’ retention. In the second phase, an experimental design was used to assess the impact of this model. Additional qualitative data were collected and used to evaluate the processes, gather participants’ perspectives of the benefits and challenges encountered and elaborate on the quantitative results.

This chapter discusses the methodology developed for this research, including the methodological considerations that inform the use of a mixed methods approach and the rationale behind the overall research design and location of the study. Subsequent sections describe in more detail the decisions made and methods adopted for the sequential phases of the research. This chapter finishes with a discussion of the ethical considerations, limitations and challenges of the field study.

4.2 Research Approach

This section firstly provides an overview of the rationale for the mixed methods approach adopted by this study. Secondly it presents the underlying assumptions and methodological implications of the transformative paradigm that frames this research, and the overall strategy and procedures adopted. Further details of the methods used to operationalise the research design are presented in subsequent sections.

4.2.1 Rationale for a Mixed Methods study

Mixed methods research uses both qualitative and quantitative approaches in a single or multi-phase study, mixing methods at one or several stages of the research: problem identification, data collection and analysis and interpretation (see Tashakkori and Teddlie, 2003). This may be done with the intention of triangulation and corroboration of findings, exploring convergences and discrepancies, complementing and elaborating on emerging results (Greene, Caracelli and Graham, 1989; Jick, 1979) or using multiple lenses to gather
alternative perspectives on the phenomenon of inquiry (Mertens, 2005). In this way, the use of mixed methods can be particularly valuable when exploring issues within a complex social or educational context (Tashakkori and Teddlie, 2003) – as is this case in this study. Whilst heralded by advocates as a new approach to social research (Creswell, 2003), other commentators note that there is nothing fundamentally new about combining qualitative and quantitative methods and/or data within any particular inquiry (Bryman, 2008; Gorard and Taylor, 2004), and that many researchers have done so intuitively as a means to enrich and broaden the scope of their research (Mertens, 2005). What is new, over the last decade, is the extent to which mixed methods research has developed as a distinct, vibrant mode of inquiry, with its own well-established typology, research strategies and rigorous debate on its philosophical foundations (see, for example, Creswell and Plano Clark, 2008). As such it provides a viable alternative for researchers embattled by the so-called ‘paradigm wars’ (Creswell, 2003; Morgan, 2007).

The main rationale for using a mixed methods approach for this study is that a combination of both qualitative and quantitative methods allows for a more comprehensive understanding of the issues inherent in the research problem (Creswell, 2003; Morse, 1994). This, in part, is because by drawing on strategies traditionally associated with quantitative and qualitative research, mixed methods research can offset the weaknesses of approaches using solely a quantitative or qualitative stance (Creswell and Plano Clark, 2007). Gorard and Taylor (2004, p. 4) further argue that “qualitative and quantitative methods…are nearly always more powerful when used in combination rather than in isolation.” In this study, the use of a mixed methods approach is used to gain greater insight into the contexts of the research problem and the implementation of the developed intervention, as well as providing space for participants’ voices to be heard – often lacking in quantitative studies. In addition, qualitative data collected was able to help explain results of the quantitative analysis of intervention effects on pupil outcomes. Conversely, the use of an experimental design allows for a more robust evaluation of outcomes of the intervention by which to assess its relative effectiveness in addressing critical issues of concern: low retention and poor grade progression. The use of mixed methods also extends the scope of this research, answering questions that could not be answered by one approach alone (Mertens, 2005).

However, whilst mixed methods research draws on the complementary strengths of qualitative and quantitative research, it still faces the challenge of adequately integrating both approaches, so as establish overall validity and resolve underlying tensions in the representation of findings (Onwuegbuzie and Johnson, 2006). On a more practical level, another challenge is that the researcher is required to have expertise in both qualitative and quantitative methods and have sufficient time and resources to collect and analyse multiple data sets (Creswell and Plano Clark, 2007, Mertens, 2005).
4.2.2 Theoretical and philosophical assumptions

According to Creswell and Plano Clark (2007, p.11), mixed methods research is 'practical', in that it frees the researcher to use a wide range of methods and tools to address the research problem and allows for a broader interpretation of findings based on both numerical and text data. As such, mixed methods research lends itself naturally to a 'pragmatic' worldview or paradigm (Creswell, 2003; Morgan, 2007; Tashakkori and Teddlie, 2003). In this, the research problem itself seen as central and as the driver of methodological decisions, rather than a particular allegiance to post-positivist or interpretative-constructivist worldviews. Within this pragmatic stance, researchers may use either theory deductively or inductively, driven by the relative dominance of the qualitative or quantitative approaches within the study design (Creswell, 2003).

Within mixed methods research, theory can also be used to provide a distinct perspective or theoretical lens that guides – whether explicitly or implicitly – during all stages of the research process (Creswell et al., 2003). Several authors have noted the emergence of such studies, locating them within a transformative paradigm that encompasses a wide range of advocacy, action-oriented approaches to research and evaluation that are considered participatory, emancipatory, pluralist and inclusive (Creswell, 2003; Greene and Caracelli, 1997; Mertens, 2005). Such studies draw on writings of, amongst others, critical theorists, feminist and race/ethnicity scholars, disability activists and – more recently -individuals working with other marginalized groups: minority ethnic groups, low-income groups and people living with HIV/AIDS (Mertens, 2007; Sweetman, Badiie and Creswell, 2010). For researchers working within such a transformative framework, their theoretical stance may thus be integrated into the philosophical assumptions that underpin decisions regarding the purpose, design and methods of their research. This is characterized by researchers “placing central importance on the lives and experiences of marginalized groups” (Mertens, 2003, p. 74); giving voice to those under-represented in traditional discourses, acknowledging and exploring power relations, bias and discrimination, seeking to be collaborative and change-oriented, linking research and practice, and addressing wider issues of inequity and social justice (Mertens, 2007).

Having worked for several years in an educational research centre in Malawi mandated to provide government and development partners with policy-related research and empirical evidence of 'best practice' in the education sector, I feel a strong affinity with pragmatic knowledge claims. Such that research should be practice-orientated, grounded in real world situations, problem-centred and pluralistic (Creswell and Plano Clark, 2007; Patton, 1990). This study eschews debates surrounding commitments to any one metaphysical stance, but rather places value on both subjective and objective knowledge, building a balanced and more complete picture of the research problem. However, as within the transformative perspective, I believe that,
epistemologically, such balance can only be achieved through a conscious effort to understand and incorporate the viewpoints and lived realities of all those participating in the research: requiring cultural sensitivity and awareness of the researcher of the relationships and contexts within which learning, knowledge construction and change may occur (Mertens, 2007).

Pragmatists are guided by the criterion of “what works” to determine which methodology and methods to adopt (Morgan, 2007; Creswell, 2003). I see such practicality and its concomitant desire to improve the validity and reach of the research as important motivations, but insufficient as the value basis for such choices, or in determining the intended purpose of research (Chambers, 2009; House and Howe, 1999). Taking a transformative stance, in which axiological beliefs based on human rights and social justice theories are paramount, not only acknowledges the value-laden nature of research and requires research to be driven by wider social goals, but makes explicit the need to address this throughout the research process (Mertens, 2003).

4.2.3 Overall Mixed Methods Design

A wide range of mixed methods research strategies have emerged in the literature, drawn from many different disciplines (see Tashakkori and Teddlie, 2003). Creswell and Plano Clark (2007) offer a useful classification of mixed methods models categorised according to four major design types: the Triangulation Design, the Embedded Design, the Explanatory Design and the Exploratory Design. The overall design for this study is a variant of the embedded experimental design. This strategy involves the embedding of qualitative data within a wider experimental design, where qualitative data collection either precedes or follows the quantitative phase, depending on the role of the qualitative data within the research (Creswell and Plano Clark, 2007). According to the authors (2007, p.67), an embedded design is particularly useful where “a single data set is not sufficient, that different questions need to be answered, and that each type of question requires different types of data.” Figure 4-1 presents a visualisation of the sequence and key processes in the research design for this study.
FIGURE 4-1: RESEARCH DESIGN: EMBEDDED EXPERIMENTAL MODEL VARIANT

**PHASE ONE**

- **QUAL** Before intervention
- Analysis and findings
- Development & set-up of intervention (materials, training etc.)

**PHASE TWO**

- **Quan** (Pre-test)
- Intervention
- **Quan** (Post-test)
- **QUAL** End of intervention
- Overall results, synthesis and interpretation

**Procedures:**

- Semi-structured interviews
- FGDs
- Participatory methods
- Observation
- Household data & school records
- Tallying and tabulation
- Transcription
- Coding and thematic cross-case analysis

**Procedures:**

- Randomised control/intervention groups
- One-year school-based intervention
- Pre- and post-test measures for pupil outcomes and pupil questionnaire
- School records, pupil tracking & monitoring instruments
- Interviews/FGDs (mid-term monitoring trip to case schools)
- Tallying and tabulation
- Descriptive and inferential statistics
- Sub-group analysis

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9 Adapted from (Creswell and Plano Clark, 2007)
Creswell (2003) highlights three key decisions to be made when selecting a mixed methods strategy of inquiry: what will be the sequence of data collection (i.e. in phases or concurrently), how the quantitative and qualitative datasets will be integrated within the study and the relative weighting given to the data. These three considerations are outlined below:

**Implementation**

In this study, a two-phase, sequential programme of inquiry was adopted (Figure 4-1). Initial, formative qualitative data collection and analysis was followed by a second phase in which an experimental design was used to evaluate a school-based intervention. This second phase included the collection and analysis of quantitative data to measure impact on pupil outcomes and to assess the fidelity of the implementation process. Embedded within this second phase was the collection of additional qualitative data during monitoring and post-intervention research activities.

**Weighting**

An important characteristic of an embedded, mixed methods design is that the relative emphasis of the data types is often unequal, with one playing a secondary role to the other. In the embedded experimental design described by Creswell and Plano Clark (2007), greater weighting is generally given to the quantitative data, with qualitative data seen as supplementary. In a variation on this design, this study foregrounds an exploration of the factors influencing educational access in the selected school communities and the ways in which the developed school-based intervention can address barriers presented by HIV/AIDS. The results of the randomised control trial are used to quantify and assess the impact of the intervention on specified pupil outcomes within a wider evaluation of the intervention.

**Integration**

In this study, the integration or ‘mixing’ of the qualitative and quantitative data was, foremost, considered at the design level (Creswell and Plano Clark, 2007). In addition, ‘mixing’ was not limited to one particular stage of the study, but occurred in different ways throughout the research process. For example, although the first phase of this research involved the collection and interpretation of predominantly qualitative data, quantitative data was also used to describe the research setting and inform development of the intervention. Similarly, descriptions of the processes of implementing the school-based intervention used both quantitative and qualitative data. Mixing at the stage of data analysis was largely absent, however, except for the occasional ‘quantisation’ of participant responses and data generated by participatory research techniques used when working with young people. Statistical analysis of the quantitative dataset is presented separately, although interpretation of the empirical findings draws on the perspectives of research participants.
4.2.4 The Field Research team

Given the scope and context of the research, a small research team was put together to assist with instrument development, piloting and data collection. I recruited research assistants from a pool of young people used by the University of Malawi for temporary fieldwork. Successful candidates were chosen based on their experience of research methods and working with young people, as well as their fluency in local languages. The use of research assistants also addresses concerns over potential barriers and power differentials that could be set up between myself and participants, especially with young people, due to my own position as an older, white, female university employee.

Two research assistants – one male and one female – worked closely with me during fieldwork for the first phase of the study and subsequent qualitative data collection in phase two. For the second phase of the research, an additional four research assistants were recruited to assist in quantitative data collection during school visits. They were split into two sub-teams, each one responsible for one district, led by a field supervisor. As lead researcher, I supervised the sub-teams’ activities in the two districts, ensuring consistency in the methods used and checking the quality of data collected.

In line with a transformative framework that emphasises the importance of actively engaging participants in the research process and building credibility within communities of concern (Mertens, 2003) - as well as a desire to gain insight into local contexts and to support local capacity - additional individuals from the target districts were invited to join the research team. These were: (1) representatives of community-based organisations (CBOs) from within the catchment areas of the four schools and (2) Primary Education Advisors (PEAs) from the respective education district offices.

These community and district-based team members proved to be an important asset for the field research. They assisted in the refining of the research instruments, provided local knowledge of the target areas and helped to legitimise and negotiate entry into schools and communities. CBO representatives - school leavers with experience of working with vulnerable children, youth organisations and HIV/AIDS programmes - worked alongside research assistants during participatory activities with selected young people. Research assistants and CBO members also supported an ongoing 'cultural interpretation' of issues arising during fieldwork, through daily de-briefing sessions.

PEAs participated in the collection of quantitative data during the second phase of the study. They also provided invaluable logistical support and ensured regular feedback to district offices. All field research team members participated in the training and piloting activities that I organised and led prior to field visits.
4.2.5 Location of the study

Following consultation with Ministry of Education staff and examination of available demographic statistics, two districts were selected as study sites for the SOFIE project using the following criteria: high HIV prevalence rates, high pupil dropout and low donor intervention\textsuperscript{10}.

The two districts were chosen to reflect contrasting socio-cultural contexts, allowing for a wider exploration of issues affected orphaned and vulnerable children. The use of two districts also provided opportunities to examine the implementation of the school-based intervention in different contexts. The two districts contrast in terms of the prevailing inheritance systems that characterise the dominant ethnic groups, as well as other historical, geographical and economic factors.

The research focuses on rural districts, where the majority of the population is located, and where primary enrolment is lower and pupil dropout higher than in urban centres. Characteristics of the two selected districts are summarised in Table 4-1 below.

<table>
<thead>
<tr>
<th>TABLE 4-1: KEY CHARACTERISTICS OF THE TARGET DISTRICTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Characteristic</td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td>Region</td>
</tr>
<tr>
<td>Inheritance pattern</td>
</tr>
<tr>
<td>Tribe</td>
</tr>
<tr>
<td>Religion</td>
</tr>
<tr>
<td>HIV adult prevalence (15-49 yrs)\textsuperscript{11}</td>
</tr>
<tr>
<td>Net primary attendance rate\textsuperscript{12}</td>
</tr>
<tr>
<td>Pupil Dropout rate\textsuperscript{13}</td>
</tr>
<tr>
<td>Pupil Repetition rate</td>
</tr>
</tbody>
</table>

\textsuperscript{10} However, given the generally high levels of donor support for educational development in Malawi, both schools in both districts had experienced – to a greater or lesser degree – some interaction with previous educational reform programmes and NGO projects (see Chapter 5).

\textsuperscript{11} National AIDS Commission sentinel sites data 2004 (NAC, 2004)

\textsuperscript{12} Data from MDHS 2004 (NSO, 2005)

\textsuperscript{13} Dropout rates and repetition rates from EMIS data, 2007 (MoE, 2007)
4.3 Phase One: Qualitative Case Studies

The initial qualitative phase of the study was essentially exploratory in nature, providing a detailed, in-depth description of factors at work within primary schools and communities that could either support or raise barriers to the access and retention of children affected by HIV/AIDS.

4.3.1 Multiple case study design

A qualitative approach based on a multiple case design was chosen because such a design lends itself well to situations where it may not be possible, or desirable, to distinguish the issue under investigation from its context (Yin, 2003). This has important advantages for gaining insight into issues of access and inclusion in education, where a multiplicity of factors is likely to influence any particular child’s schooling. Whilst the time frame of the project did not lend itself to a lengthy immersion within the research setting, distinctive of much qualitative case study research, it was hoped that exploration of distinct ‘cases’ would provide sufficient detail to illuminate and extend understanding of the research problem (Merriam, 1998).

As case study research works within ‘bounded systems’, it is important to establish the unit of analysis for the research (Creswell, 2007; Yin, 2003). In this study, analysis was bounded within the primary school and its immediate catchment area, identified as varying numbers of discrete clusters of villages around the school.

A multiple case study design was adopted to explore how issues of access and retention play out across differing contexts and key factors were identified through a cross-case analysis. A multiple case study design addresses a particular concern or research problem, illustrated across several cases, rather than bringing focus on a case solely for its intrinsic value (Creswell, 2007; Stake, 2000). In addition, as argued by Yin (2003), the use of more than one case anticipates and addresses possible criticism of the validity of findings if based on a single case. Yin states (2003, p53)

> The contexts of two [or more] cases are likely to differ to some extent. If under these varied circumstances you still arrive at common conclusions…they will have immeasurably expanded the external generalisability of your findings.

Thus, in order to strengthen conclusions drawn from the findings of this study, two schools were selected from each of the study districts (Phalombe and Mzimba South), chosen for their contrasting socio-cultural contexts (see 4.2.5).

The case sites were located within either a rural or semi-rural setting (see Figure 4-2) the latter defined as within 2km of a trading centre. Although this variation could weaken the replication of findings within pairs
of cases (Yin, 2003), the design gains by illuminating potentially different situations and experiences within a similar socio-cultural context.

**FIGURE 4-2: MULTIPLE CASE-STUDY SITES**

<table>
<thead>
<tr>
<th>District</th>
<th>Phalombe rural</th>
<th>Mzimba South rural</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duma Primary School</td>
<td>Mzimba South</td>
<td></td>
</tr>
<tr>
<td>Kamunda Primary School</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Namalongo Primary School</td>
<td>Mzimba South semi-rural</td>
<td></td>
</tr>
<tr>
<td>Pamoza Primary School</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Matrilineal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patrilineal</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Contrasting socio-cultural context**

### 4.3.2 Selection of Case Study sites

Four contrasting school communities were selected for the initial collection of qualitative data (Figure 4-2). The four case-study schools were purposively selected from the larger group of 40 schools sampled for the randomised control trial (see 4.5.3). For ethical reasons, all four schools were selected from the group sampled to receive the intervention package. The selection of the case-study schools was done in consultation with district government staff and locally-based NGOs who helped identify areas of particularly high HIV/AIDS impact and schools with high rates of dropout. Another consideration for selection was that CBOs were working in the areas and willing to participate in research activities.

In Phalombe, Duma Full Primary (FP) is a Local Education Authority (LEA) school situated to the north of the district in a remote, under-developed area a few kilometres from Lake Chirwa. Despite its remote location, it has a high enrolment (approximately 1100) and well-built school buildings. The second school selected in Phalombe - Namalongo FP - is a very large school on the outskirts of a sprawling trading centre in the south of the district, close the Mozambique border. It has an enrolment of over 2200 pupils. Namalongo is an integrated school, with facilities for

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14 The names of the schools have been changed
visually impaired pupils, a school feeding programme and links with a local orphanage. The more remote school in Mzimba South –Kamunda FP– is situated north of the district capital amidst scattered smallholdings and scrubland. Its infrastructure is in very poor condition and the school is seriously understaffed. Pamoza FP is a long-established school located within a busy trading centre close to the Zambian border. It has recently benefited from the construction of new classroom blocks, although with few teachers, class sizes remain large. A detailed description of each case study site is presented in Appendix 1.

4.3.3 Sampling of participants for qualitative data collection

Purposive, non-random sampling was used to obtain samples of participants within each case study school that would be ‘information-rich’ (Patton, 1990) and able to inform the research questions, rather than representative of any wider demographic trends in a specific population. Participants included teachers, school heads and representatives of school management committees (SMC) and Parent Teacher Associations (PTA), community leaders and extension workers, as well as orphaned and vulnerable young people and their parents/guardians.

Sampling of children directly affected by HIV/AIDS

Through what I have termed a ‘funnelling’ process, a purposive, multi-stage selection process was used to sample children and young people from households affected by HIV/AIDS, as a sub-group of a wider sample of vulnerable children and young people. The first step in this process was the compilation of tentative lists of orphans and other vulnerable young people – both pupils and those out-of-school – during community meetings held at each school. Those in attendance at these meetings included: members of CBOs previously identified as working with orphans and vulnerable children and/or involved in home-based care activities; SMC representatives; school heads; village heads and government extension workers - either Health Surveillance Assistants (HSA) or Community Development Assistants (CDAs). Resulting discussions produced rich data about the household circumstances of vulnerable children in the communities.

Due to ethical concerns about linking given names with ‘AIDS research’ in open meetings, at this stage no attempt was made to specifically identify HIV/AIDS-affected households. These initial lists were later compared with documentation from CBOs and extension workers to verify the names given and identify any households likely to be directly affected by HIV/AIDS. These first steps of identification and verification varied at each research site, but in all situations the research team was guided by the knowledge of those living and working in the communities.

From the initial lists of vulnerable children, 12 pupils from Standards 5 to 8 (6 male, 6 female) were then invited to participate in half-day mini-workshops. Names of young people recorded as out-of-school were
compared to school records in order to identify those who had dropped out of school in senior classes within the last one to three years. Out-of-school children and youth invited to the mini-workshops were slightly over-sampled to allow for non-attendance. Equal gender composition of the participants per school was not always achieved (Table 4-2), as a few of those who confirmed attendance did not appear on the day of the activities.

**Table 4-2: Number of young people who attended Phase One mini-workshops, by school**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Duma</th>
<th>Namalongo</th>
<th>Kamunda</th>
<th>Pamoza</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
</tr>
<tr>
<td>Out-of-school workshop</td>
<td>2</td>
<td>6</td>
<td>6</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>Pupils workshop</td>
<td>6</td>
<td>6</td>
<td>5</td>
<td>7</td>
<td>6</td>
</tr>
</tbody>
</table>

In the final ‘funnelling’ of the sampling process, visual representations of household circumstances produced by participants during the mini-workshops, as discussions with participants, informed a final sub-group of a minimum of 6 children/youth per site for follow-up interviews. In this selection, the main criterion was children from HIV/AIDS-affected households that had experienced adult deaths or morbidity known or suspected to be from AIDS. The selection was also informed by earlier available documentation. Care was taken to ensure coverage of a range of different household circumstances.

This final sample is summarised in Table 4-3. Pupils’ ages ranged from 14 to 17 years; out-of-school ages ranged from 15 to 24 years. More than half of all young people interviewed were double orphans. All but one of the single orphans had lost a father. Of the single orphans, four were not living with the surviving parent and in three of the households the mother was in poor health, with symptoms associated with AIDS. Five of the young people interviewed had lived, or were living, in sibling-headed households; three (all out-of-school) were heading the households themselves. Details of individual young people and their household circumstances are in Appendix 5.
## TABLE 4-3: NUMBERS OF CHILDREN & YOUNG PEOPLE INTERVIEWED

<table>
<thead>
<tr>
<th>School</th>
<th>Gender</th>
<th>Orphan status</th>
<th>Schooling status</th>
<th>Sibling-headed household</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Single (father died)</td>
<td>Single (mother died)</td>
</tr>
<tr>
<td>Duma</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Namalongo</td>
<td>2</td>
<td>4</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Kamunda</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Pamoza</td>
<td>2</td>
<td>4</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>11</td>
<td>13</td>
<td>8</td>
<td>1</td>
</tr>
</tbody>
</table>

*Sampling of other participants*

Parents and guardians of the selected children and youth were sampled on a largely opportunistic basis – those available and willing to be interviewed during household visits. Where the household head was absent, another adult household member or older sibling was interviewed. If no one was available, arrangements were made to meet at an alternative time and place.

Various groups of individuals had already been identified as possible key informants: PEA’s, school heads and SMC/PTA chairs and village heads. Throughout the week spent at each school ‘snowball’ sampling was used to identify additional key informants, as more was learnt about the roles of various individuals within communities (Morse, 1994).

Teachers and PTA/SMC members were invited to join focus group discussions (FGDs). The SMC chair and/or PTA chair assisted in the selection of approximately equal numbers of male and female participants. In three of the schools, all participated in FGDs. In Namalongo, where teacher numbers were greater, only teachers from senior classes were invited. During selection, it was hoped that at least 8 participants would be available for FGDs, although this was not always feasible. Female participants were underrepresented amongst teachers and key informants (Table 4-4).
4.3.4 Instrument development and piloting

Research instruments for the case studies were developed and refined over a period of several weeks in early 2008. They were translated into Chichewa (the main language spoken in Phalombe) with assistance from the Centre for Language Studies, University of Malawi. Minor changes in the wording were made during initial training sessions, based on comments from research assistants and CBO representatives. Detailed programmes for participatory activities for mini-workshops were also developed during training sessions.

The instruments were piloted during three days at a semi-rural school in Zomba district. This included holding mini-workshops with pupils and teachers and FGDs with community representatives. Six interviews were held with pupils and their guardians. Key informant interviews were held with the deputy head and the SMC treasurer. The major limitation of the piloting process was that time was not sufficient to identify and reach out-of-school youth.

Following the pilot, the research team further refined the instruments and adaptations were made to the programme of activities for the mini-workshops. An attempt to use self-administered questionnaires with teachers resulted in very sparse responses. Consequently, it was decided to use a FGD with teachers, particularly following the success of community FGDs during the pilot. Finally, instruments were back-translated and translated into Chitumbuka (the main language in Mzimba South), again with input from both professional translators and representatives from the district.
4.3.5 Methods and Tools of data collection

Visits to case study sites took place between March - May 2008. Several methods and multiple sources of data were used, allowing for triangulation and elaboration of emerging issues. These are described below:

**Participatory tools used during mini-workshops**

Separate half-day mini-workshops were held with in-school and out-of-school children and youth. The objectives of the mini-workshops were two-fold: (1) to provide space for young people to discuss the barriers to schooling faced by orphans and other vulnerable children and (2) to aid selection of several young people for follow-up interviews. A series of drawing and writing activities took place, drawn from a wider ‘toolkit’ of participatory research methods (Cornwall and Jewkes, 1995; Pridmore and Bendelow, 1995) and adapted for the specific needs of this study (see Appendix 2). These participatory methods were chosen to allow the young people to engage actively with the research in an informal and stimulating way and to avoid approaches that “project the authoritative stance of the researchers” (Desai and Potter, 2006, p. 54). Draw-and-write techniques allow young people less comfortable with writing a means to express themselves and reflect on issues within their own lives (Campbell et al., 2011). Through personal experience of using similar techniques on projects dealing with sensitive issues (e.g. violence in schools), I found them of great value when working with young people (Kadzamira, Moleni and Kunje, 2006). All members of the field research team, including myself as team leader, participated in these mini-workshops.

Household diagrams and ‘river of life’ drawings were used to identify young people for follow up interviews. ‘River of life’ drawings map out and provide insights into critical events in the young people’s lives (see Pridmore and Yates, 2006). In an extension of this technique, young people indicated on their diagrams the times when their access to school had been impaired (using red stickers). This directly links critical events to barriers to learning (Figure 4-3).
Reasons for absenteeism, withdrawal and permanent dropout given by orphaned and other vulnerable children were highlighted using ‘problem trees’ and a pair-wise ranking technique. Participants drew ‘problem trees’ that identified a range of causes for absenteeism and dropout. These causes were then ranked according to importance using pair-wise ranking (Mulhall and Taylor, 1998). Figure 4-4 shows results of one pair-wise ranking exercise Plenary sessions were used to discuss emerging issues.

The data generated from these innovative methods informed the context and findings of the study (see Chapter 5) and provided valuable insight for subsequent interviews. The summarised results of the ‘problem tree’ analysis and pair-wise ranking by school, indicating girls’ and boys’ separate responses, are found in Appendices 3 and 4.

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15 The sticker denoting withdrawal from school coincides with the death of the pupil’s mother, when he was 10 years old.
Interviews

In-depth, semi-structured interviews were held with a sub-group of selected young people from households directly affected by HIV/AIDS. The interviews were held at the young person’s home and conducted by research assistants of the same sex. The river-of-life drawings produced by the young people were used to stimulate discussion during the interviews. The interviews were structured around several broad themes (e.g. life events, relationships and values, school experiences, stigma and discrimination, reasons for absenteeism and/or dropout), but research assistants were encouraged to keep the interviews open and flexible (see Appendix 17).

During visits to households, a second research assistant interviewed the guardian, parent or adult household member separately. The guardian interviews were conducted using a semi-structured interview schedule to verify information on the child’s circumstances and life events and to gather parent/guardian’s perspectives on education and their child’s schooling. Where permission was given, all interviews with children and their parents/guardians were recorded using a digital recorder. Short summary reports were written up by research assistants following the interviews and subsequently read through by me to ensure quality control of the data.

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16 Translation from Chitumbuka, from left to right: Hunger, Lack of uniform, Orphanhood, Poverty, Teachers beating children, Household chores.
Semi-structured interviews were held with key informants living and/or working in the schools’ catchments areas. I personally conducted interviews with all school heads. The responsibility for other key informant interviews was shared amongst all members of the team, including myself, depending on language requirements and the gender and status of the respondent.

**Household roster and checklist**

During household visits by research assistants, a short, structured household roster\(^{17}\) was completed, with information on household composition and household deaths provided by the parent/guardian. Proxy symptoms were used to identify which deaths had likely been due to HIV/AIDS. Information on the socio-economic status of household members and was also collected using a simple observation checklist (see Appendix 17).

**Focus Group Discussions**

At each school, two separate FGDs were held with SMC/PTA members and teachers. Each session was held within the school grounds at a place chosen by the participants and lasted between one and one-and-a-half hours. One research assistant was facilitator, guiding the discussions, whilst a second research assistant acted as observer and note-taker. FGDs were conducted in the prevalent language of the area. With permission of the participants, each FGD was digitally recorded. Short summary reports were written up immediately following the sessions and each recording was fully transcribed.

In an adaptation of a method used by Brinkman *et al.* (2007) in their study of competencies of rural development professionals in tackling issues of HIV/AIDS, four short case stories were read out at the start of the FGD to focus the thoughts of members and stimulate discussion (see Appendix 17). Discussions focused on difficulties faced by orphaned and vulnerable children in their communities in accessing learning. Discussions also addressed issues of vulnerability, any specific disadvantages faced by children affected by HIV/AIDS and support within schools and communities. FGDs with teachers explored additional issues related to the inclusion of children affected by HIV/AIDS in their schools.

**School checklist**

A structured school checklist gathered background quantitative data on the individual schools (enrolment, numbers of dropouts etc.) and collected information on the school environment. A similar checklist was adapted for phase two of the study (see Appendix 17).

\(^{17}\) The household roster was adapted from an instrument used during a collaborative research project between the Centre of Educational Research and Training (CERT), University of Malawi and the Population Council.
4.3.6 Next Steps

Following the fieldwork and data collection for phase one, the process of data management, transcribing, quality control and analysis continued in-country. This took place in Zomba, where myself and several members of the research team were located. Key strategies used in data management and analysis are described in section 4.8 below.

4.4 Development and set-up of Intervention Package

As outlined in Figure 4-1, following phase one of the research, the adapted SOFIE model was finalized and implemented in participating schools. This took place between July 2008 and December 2009.

The rationale for the SOFIE model was informed by literature in the fields of education, development and health-related responses to HIV/AIDS mitigation. Its adaptation for Malawi was informed by the findings from the four case studies (Chapter 5), as well as discussions amongst SOFIE project team members and consultation with national and district-level key informants (see Chapter 6 for details of this process). Informed by national and district level data on dropout and repetition (Chapter 2), a decision was made to target one senior grade (grade 6). As lead researcher for Malawi, I was responsible for the in-country consultation, adaption of the model, sourcing materials and finalizing all aspects of the intervention package.

The SOFIE model adapted for Malawi included the provision of self-study guides and supplementary learning materials for orphaned and vulnerable children identified by communities as at risk of grade repetition or dropout; clubs and a buddy system to provide additional learning support; training activities and materials for teachers and youth leaders to monitor, follow-up and provide psychosocial support for these children; as well as training to build school and community capacities to enhance support networks and promote inclusion within schools (see 6.3 for details).

4.5 Phase Two: Implementation and Evaluation of the Intervention

The aim of phase two of the mixed methods research design was to trial the adapted SOFIE model. In order to present a robust evaluation of the intervention – as a means to inform policy and practice - the SOFIE project supported and funded the implementation of a randomized control trial (RCT). As lead researcher for Malawi within the SOFIE research team, I was responsible for all aspects of the RCT instrument and database design, sampling, data collection, data entry and management and initial analysis. Additional statistical analysis was carried out in conjunction with the project statistician, and, where appropriate, is also referenced in this thesis.
4.5.1 Independent and dependent variables

The use of an experimental design requires clear identification of the independent and dependent variables (Creswell, 2003). In this study the independent (treatment) variable is the intervention package itself (the SOFIE model). The dependent variables are the variables used to measure impact on pupil outcomes. This doctoral study, which analyses and interprets data collected in my role as researcher for SOFIE project, examines two primary outcome variables reflective of the school-level context in Malawi:

(a) the proportion of pupils enrolled in the target grade that did not dropout during the school year

(b) the proportion of pupils enrolled in the target grade that were promoted to the next grade.

In Malawi schools, there is no standardized means of defining school ‘dropout’. For the purposes of this study, ‘dropout’ refers to those pupils that had withdrawn from school for a minimum of eight consecutive weeks – excluding transfers to other schools - and had not returned by the end of the school year. Promotion to the next grade is determined by the performance of pupils in end-of-year examinations, administered and graded by class teachers.

4.5.2 Experimental Design

In order to control for the effects of factors external to the intervention on pupil outcomes sampled schools were randomly assigned to either a control or treatment group, with only the treatment group receiving the intervention package (see Figure 4-5). Randomisation took place at the level of the school and was used to ensure a greater chance of equivalence between the schools in the control and the intervention groups (Cohen, Manion and Morrison, 2000). A key strength of RCTs is the presence of a control group. This provides an important counterfactual that can be used to strengthen assertions made about the impact of the intervention (White, 2009).

Pupils in both intervention and control groups were administered instruments to measure outcome variables\(^{18}\) at the baseline (November 2008) - O\(_1\) in Figure 4-5 - and following the intervention (November 2009) - O\(_3\) in Figure 4-5. Measures for outcome variables of interest to this doctoral study were collected post-intervention and during monitoring visits (O\(_2\) in Figure 4-5) to both groups (dropout and promotion rates). Quantitative data were also collected on variables such as school quality (e.g. teacher qualifications, school size, presence of feeding programmes) and pupil characteristics (e.g. gender, socio-economic status, orphan status) pre-test

\(^{18}\) Under the wider SOFIE project, data pertaining to a secondary outcome variable were collected. This involved the collection of test scores in English and Mathematics using tests adapted specifically for the SOFIE project from existing government survey instruments. Whilst this data is not treated to a detailed analysis in this doctoral study, test score data is used to control for pupil achievement in regression analysis (see 0)
and post-test. Additional data to evaluate the processes and fidelity of the intervention and update information on beneficiaries (at-risk pupils) were collected during monitoring and post-intervention visits (intervention schools only).

**FIGURE 4-5: EXPERIMENTAL DESIGN**

<table>
<thead>
<tr>
<th>Intervention Group</th>
<th>R</th>
<th>O₁</th>
<th>X</th>
<th>O₃</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control Group</td>
<td>R</td>
<td>O₁</td>
<td></td>
<td>O₃</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>O₂</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
</tr>
</tbody>
</table>

R = random assignment  
X = treatment variable (intervention)  
O₁ = observation/measurement (baseline)  
O₂ = observation/measurement (monitoring)  
O₃ = observation/measurement (post-intervention)

A RCT design is often assumed to work best with simple, homogenous treatments and can be ill-suited to the evaluation of complex interventions that are highly dependent on context and delivery (Gorard and Taylor, 2004). Whilst this concern should not be underestimated, Karlan (2009) argues that this is a misconception of the potential of RCTs. He states that where interventions are holistic and dynamic, incorporating resources, training and opportunities for change, the process of change itself is also under scrutiny, and should be evaluated as such. The above authors agree on the importance of including qualitative methods within a complex RCT in order document the quality and variability of implementation. In this study, quantitative and qualitative data were collected to assess the fidelity of the implementation and reflect on possible pathways by which change in pupil outcomes occurred (Chapter 7). Qualitative data and analysis also captured additional outcomes deemed of benefit to pupils and other participants.
**Qualitative data**

In phase two, qualitative data were collected through monitoring and post-intervention activities. There were three main data collection points for qualitative data (see Figure 4-1):

- Mid-term monitoring visit (May 2009)
- Concurrent with post-intervention school visits (November 2010)
- District-level evaluation workshops (January 2010)

By its nature, qualitative data directly related to the intervention could only have been collected from participants in the intervention group. To address concerns that any additional engagement with participants during implementation would produce differential effects of the evaluation on the two experimental groups (Cohen, Manion and Morrison, 2000), thus risking a Hawthorne effect (Brown and Dowling, 1998), school visits to gather qualitative data were restricted to the four schools that participated in phase one. Qualitative data collection from these schools also provides continuity, maintaining four distinct ‘cases’ from which to draw an in-depth cross-case analysis of the implementation process (see Chapter 7).

### 4.5.3 Sampling of schools for the randomized control trial

Forty primary schools were randomly sampled for the trial of the SOFIE model: 20 from each of the two participating districts. In Phalombe the sampling frame consisted of all government primary schools within the district, excluding junior primary schools. In Mzimba South, which is of much greater size, the sampling frame was restricted to one Traditional Authority (TA), TA M’Mbwele. This gave a sampling frame of 70 schools in Phalombe and 60 in Mzimba South. For each district, schools were ranked in quintiles according to available data on educational outcomes (school performance\(^{19}\)) and 2 matched pairs of schools from each quintile were randomly assigned\(^{20}\) to either the intervention or control group. As a final cross-check, the proposed list of schools was shared with district staff. One school in Phalombe was found to have recently taken part in another research survey and was replaced by another school from the same quintile on the sampling frame.

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19 The percentage of Standard 8 pupils selected to secondary schools. This measure was used since dropout rates (the preferred outcome) were not available for all schools.

20 For each quintile, schools were assigned numbers and those numbers were written on separate cards. Cards were drawn one by one from one pile and alternatively assigned as either intervention or control – this continued until the required number of schools had been selected, then repeated for the next quintile.
1.1 Pupil Sample for Quantitative Data and Participant Flow

Sampling at the pupil level was designed to include all pupils enrolled in the target grade. However, SOFIE project baseline measurements for the target grade (Standard 6) were taken at the end of the previous school year (November 2008) when pupils were still in Standard 5\textsuperscript{21}. The total number of pupils that participated in the baseline was 2175, of which 51.1% were female. Absenteeism in several schools meant that only 73.8% of enrolled pupils in Phalombe and 64.9% of enrolled pupils in Mzimba South were present for the baseline. Pupil tracking records subsequently showed that of those present at the baseline, just under a quarter (23.9%) did not proceed to Standard 6 and, thus, were not considered as part of the final pupil sample, nor were included in subsequent analysis.

In total, 2767 pupils were enrolled in Standard 6 in 2009 (1579 in intervention schools; 1188 in control schools), including those pupils who were repeating Standard 6 (13.8%) and/or transferred in during the 2009 year (10.6%). Of these, 2087 pupils completed the post-test questionnaire and SOFIE tests in 2009 (1213 in intervention schools; 874 in control schools) representing 75.8% of all pupils enrolled in Standard 6 in 2009. The remainder were either absent on the day of the school visit (8.7%), had transferred out (5.5%), dropped out (9.9%) or died (0.1%). Approximately two-thirds of pupils (63.6%) present during the post-intervention school visits had been present for the baseline (See Appendix 12 for Participant Flow Diagram).

A total of 259 pupils were selected by intervention schools as at-risk according to developed guidelines (Appendix 10) and registered to receive additional targeted support. Details of the overall pupil sample and at-risk group are presented in Chapter 9.

4.5.4 Sampling of participants for qualitative data collection (phase two)

Key informants

Purposive, non-random sampling was used to select key informants from the case-study schools (Standard 6 teachers, club leaders, school heads and SOFIE sub-committee chair). Where possible, the same key informants interviewed during the initial case study visits and mid-term monitoring visits were re-interviewed post-intervention. However, in both Phalombe schools, the Standard 6 teachers had been replaced and in Duma the school head had been transferred.

\textsuperscript{21} This decision was made by the SOFIE team given the difficulties of access to many of the sample schools at the start of the target school year (January 2009) - which fell during the rainy season - and the time-frame for the implementation of the intervention.
Members of school committees (PTA, SMC, SOFIE sub-committee) were invited to participate in an FGD. School heads and SMC chairs assisted in this process, but despite verbal invitations being sent out in advance of the school visits, turnout was low. Generally, female participants were underrepresented, reflecting the low numbers of women amongst school staff and in positions of responsibility (see Table 4-5). Amongst the key informants there was only one female respondent – the club leader at Kamunda.

**TABLE 4-5: GROUPS OF PARTICIPANTS, BY GENDER & SCHOOL (2009)**

<table>
<thead>
<tr>
<th>Participants</th>
<th>Phalombe</th>
<th></th>
<th>Mzimba South</th>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Duma</td>
<td></td>
<td>Kamunda</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
</tr>
<tr>
<td>Key informants</td>
<td>4</td>
<td>0</td>
<td>4</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Community FGD</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Pupil ‘mini-workshops’</td>
<td>7</td>
<td>8</td>
<td>5</td>
<td>6</td>
<td>6</td>
</tr>
</tbody>
</table>

**At-risk pupils**

All at-risk pupils registered for targeted support were invited to half-day ‘mini-workshops’. Attendance was generally high, although there were difficulties in locating two pupils that had dropped out: one girl from Namolongo and one boy from Kamunda. Two others - a boy from Namolongo and a girl from Pamoza - although still enrolled at school, did not attend as their names had been removed from the at-risk register. In these two cases, the pupils were followed-up and interviewed. In both Mzimba schools, very few girls had been registered as at-risk and the majority of pupils attending the ‘mini-workshops’ were boys (see Table 4-5).

Twenty-two at-risk pupils participated in follow-on, in-depth interviews. It was anticipated that a minimum of 6 pupils would be interviewed per school; equal numbers of girls and boys. With the exception of Duma, however, fewer girls were reached. In Kamunda, the only female at-risk pupil was absent on the days following the ‘mini-workshop’ and was not available to be interviewed. Care was taken to select both those pupils who had been regular attendees of SOFIE activities, as well as those who had participated less.

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22 The girl (14) had eloped with one of the construction workers working on a new road that was being built close to the school and the parents did not know how to contact her. The boy (16) was engaged to be married and often absent from home looking for employment – the research assistant who had visited his village took the opportunity to speak with his grandparents instead.
frequently or withdrawn altogether. Care was also taken to include pupils from a range of family circumstances, although very few of the at-risk pupils were maternal orphans. The final sample is summarised in Table 4-6 below.

### TABLE 4-6: NUMBER OF YOUNG PEOPLE INTERVIEWED, BY SCHOOL

<table>
<thead>
<tr>
<th>School/Gender</th>
<th>Total</th>
<th>Orphan status</th>
<th>Sibling-headed household</th>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Single (father died)</td>
<td>Single (mother died)</td>
<td>Double</td>
</tr>
<tr>
<td>Duma</td>
<td>4</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Male</td>
<td>4</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Namalongo</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Male</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Female</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kamunda</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Male</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pamoza</td>
<td>4</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Male</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>22</td>
<td>11</td>
<td>1</td>
<td>10</td>
</tr>
</tbody>
</table>

Few of the interviewed pupils were repeaters (5 out of 22 pupils). Although not known at the time of the interviews, the majority of pupils (19 out of 22) were selected for promotion to the next grade.

### 4.5.5 Instrument development and piloting

Three main quantitative instruments were developed for pre- and post-test measurements for the SOFIE project, and provide much of the quantitative data used in this study: a pupil questionnaire, a school checklist and English and Mathematics tests. To support data collection in Malawi, pupil tracking records were also developed – in addition to the school-based records available – to up-date and collate information on pupils’ educational status.

**Test papers**

For the SOFIE project I worked with curriculum specialists in Malawi to adapt grade-equivalent test papers in English and Mathematics used by MOEST and the Malawi National Examinations Board (MANEB) for the
Primary Achievement School Survey (PASS). In this way, the project was able to take advantage of criterion-based standard tests with items linked to the school curriculum and already extensively piloted. For the purposes of this thesis, data utilized from the administered test papers is limited to overall scores used to control for possible confounding factors in regression analysis (Chapter 9).

**Pupil questionnaire**

A structured, self-completion pupil questionnaire was developed to gather quantitative data on pupil characteristics, home background and school experiences. The questionnaire consisted mainly of a series of closed questions, designed for pupils to answer by circling one or multiple responses. Open questions were kept to a minimum.

Development of questions related to school experiences and home background were informed by the case study findings. Prior to piloting, the questionnaire was translated into Chichewa by the Centre for Language Studies, with further input from research assistants and PEAs during training.

**School checklist**

A structured checklist to record school-level data was also developed, adapted from an earlier checklist used during the case studies. It was designed to collate data from school records and SOFIE monitoring forms, information provided by school management and from direct observation. Information recorded included: enrolment data, school size and infrastructure, teacher numbers and training and details of any support programmes in operation (see Appendix 17). These checklists were adapted for mid-term and post-test visits to include questions related to the implementation of the intervention and record details of at-risk pupils (intervention schools only).

**Pupil tracking records**

As the baseline measurements for evaluation had taken place at the end of the previous school year (October 2008), I was concerned that the composition of the target grade would change on entering Standard 6 (i.e. through enrolment of pupils repeating their Standard 6, pupils transferring in or out or failing to return after the school break). This, coupled with the poor record-keeping observed at many schools during earlier visits, led me to develop additional means of collating and maintaining up-to-date information on all sampled pupils. These tracking records recorded pupils’ demographic and educational details, and whether they were registered as at-risk (see Appendix 17). Existing data on pupils present at the baseline was ‘cut and pasted’ onto the tracking records directly from the SPSS database and up-dated during mid-term and post-interventions visits. Pupil information was linked to the SPSS dataset by unique ID numbers.
To support school-level record keeping, all 40 schools were provided with government standard issue class registers, distributed prior to the 2009 school year. I had adapted these to allow class teachers to record the ‘orphan status’ of the enrolled pupils and track dropout.

**Piloting**

Pre-test instruments were piloted in 2 schools in Zomba Rural district, one a larger school near a trading centre, the other more remote. The questionnaires and test papers were administered to a stratified, random sample of 30 Standard 5 pupils and 30 Standard 6 pupils per school (with equal numbers of girls and boys). Following the piloting exercise, the questionnaire was refined during a final session with the research team, including the CBO representatives from planned research sites. Minimal changes were made to the test papers. Research team members fluent in Chitumbuka translated the pupil questionnaire, translating directly from the Chichewa version. Similarities between the two languages meant that this means of translation brought greater consistency between the two versions than might have resulted from two separate translations from English. Both versions were discussed and back-translated during these final training sessions.

Semi-structured key informant interview schedules and FGD guides were developed later in the research process to gather participants’ perspectives on the implementation and impact of the SOFIE model. Qualitative research instruments with questions unique to the intervention evaluation were circulated amongst the SOFIE project team for comment and underwent a rigorous moderation process with input from the local research team. Where appropriate, instruments were translated into Chichewa and Chitumbuka, following processes adopted during the initial case studies.

4.6 METHODS AND TOOLS OF DATA COLLECTION

4.6.1 Administration of quantitative instruments

Baseline and post-test data was collected at all 40 schools in October 2008 and November 2009. Both districts were visited concurrently: two schools were visited per day in each district, with each team splitting into 2 smaller teams of 2 or 3 people. All schools had been notified and access negotiated. On arrival at the schools, research teams followed the necessary protocols and briefed school heads on the planned activities. If not already identified, a venue to meet pupils and administer instruments was agreed upon. Where space within available classrooms was very limited (due to large enrolments) the use of a nearby church or hall was negotiated. Conditions in these venues were often poor, with few or no desks and many pupils had to sit on the floor. Team members ensured that drinking water was made available should pupils require it.
During the baseline, pupils seated themselves and the first instrument – the pupil questionnaire - was handed out, along with a pencil. Each pupil was given a unique ID number, which linked the pupil to both the school and his/her set of instruments. Pupils were asked to count off and record this ID number and their position in the corresponding seating plan.

To address potential difficulties due to poor reading and writing skills and to ensure a greater response rate for individual questions, the pupils were guided through the self-completion as a group. A member of the research team read aloud instructions for each question and options for answers. Despite the often very large number of pupils, the majority coped well with this approach. Where there were a few pupils that clearly needed additional support, available team members provided assistance. Following completion of the questionnaire and a short break, pupils filled in the test papers individually.

On completion of all instruments, research assistants ensured that all instruments were packed in numerical order following the ID scheme. This was of great assistance in keeping track of completed instruments and organizing data entry. In addition to administration and management of instruments, research assistants liaised with school management to access school records and complete the school checklist.

Post-intervention, pupil tracking records were used to take pupils through a roll call prior to seating. Those that had attended the baseline were given instruments coded with their original ID number and seated accordingly; those whose names did not appear on the tracking records were assigned ID numbers and their details recorded. If pupils were not present from the post-test exercise, reasons for this were recorded on the tracking records, triangulating information from pupils, teachers and school records.

Information on pupils’ promotion to the next grade was not available during post-intervention fieldwork, as pupils had not sat their end-of-year examinations. Several schools submitted this information to PEAs who forwarded these hand-written reports during evaluation workshops. Others delayed submission, thus requiring additional visits to the districts to collect missing information.

### 4.6.2 Mid-term monitoring trip

In May 2009, research team members returned to all 40 sampled schools to up-date pupil tracking records and –in the 20 intervention schools– to collect process data to evaluate the SOFIE project. Qualitative data was collected from the four case-study schools: key informants were interviewed and FGDs conducted with (1) at-risk pupils and (2) representatives of school committees. Both qualitative and quantitative data was collected was used to support analysis for this study.
4.6.3 Post-intervention Qualitative Data Collection (case study schools)

Working with the SOFIE project, I had the opportunity for more extensive qualitative data collection at the four case-study schools. This took place concurrently with post-intervention data collection in November 2009.

Working with two additional research assistants, I spent three to four days at each school carrying out activities to evaluate the intervention (including: key informant interviews, FGDs and ‘mini-workshops’ and interviews with ‘at-risk’ pupils). The mini-workshops were designed to: (1) gather pupils’ perspectives on their learning opportunities over the previous year and (2) to provide pupils’ with a voice in the evaluation of the SOFIE model. A series of participatory drawing and writing activities took place, which opened up into wider discussion in focus groups and plenary sessions.

Informal discussions were held with buddies (mentor pupils), school staff and parents/guardians of at-risk pupils who had dropped out of school. Key sources of data for this study were FGDs with community representatives and interviews with at-risk pupils and key informants, as well as plenary discussions held during mini-workshops.

*Interviws*

In-depth interviews were held with at-risk pupils on or near the school premises at a mutually agreed venue, and were conducted by research assistants of the same sex. A total of 22 pupils were interviewed (see Table 4-6). The interviews were framed by five broad themes:

- Family background and relationships
- Issues affecting schooling
- School experiences, learning and participation
- Experiences of involvement in SOFIE activities
- Impact of the SOFIE intervention

Key informants were generally very willing to talk with the research team. Those who had been actively involved in the intervention often had their own agendas to bring to the interview, which required careful negotiation. As many of the key informants had met the research team several times, interviews often took a less formal approach; a form of a ‘negotiated conversation.’ This was loosely structured around key issues: their views of the SOFIE model, challenges faced in the implementation process, benefits and impact of the intervention and SOFIE’s role in improving capacity to support orphaned and vulnerable children.
Focus Group Discussions

At each school, an FGD was held with school committee members (SMC/PTA/SOFIE-sub-committee), facilitated by research assistants. Each session was held within the school grounds at a place chosen by the participants and lasted between one and one-and-a-half hours. The discussions centred on issues similar to those addressed in the key informant interviews, with a focus on communities’ expectations and experiences of the intervention.

4.6.4 District-level Evaluation workshops

During final evaluation workshops held in January 2010, school and district-level stakeholders took part in participatory evaluation activities, including brain-storming and group sessions, SWOT analyses and ranking exercises. Participants from the four case-study schools made short presentations to describe their experiences and share their views on the SOFIE model. Representatives from all intervention schools attended, including youth volunteers, teachers, school heads and SOFIE sub-committee chairpersons.

These workshops also afforded me the opportunity to present preliminary findings, thus gaining valuable feedback from the wider group and enhancing the validity of the qualitative findings.

4.6.5 Additional Monitoring tools

During training workshops prior to the launch of the intervention, key implementers –teachers and club leaders– were provided with sets of monitoring forms that I had developed for the SOFIE project. These instruments served a dual purpose: (i) to support monitoring and follow-up of at-risk pupils and (ii) to capture both quantitative and qualitative data to evaluate the project. Although a detailed analysis and presentation of the data captured by these forms is beyond the scope of this thesis, this proved a valuable source of data to inform emerging themes and counter-check process data.

- ‘At-risk’ register – a simple, structured form where teachers could record details of all pupils identified as ‘at-risk’, when they registered and what resources they received.
- Pupils’ progress sheets – monthly summary sheets listing all registered pupils, structured to allow teachers to record observations on pupils’ progress with study guides and their performance and participation in class.
- Club Attendance register – Kept by the club leader to keep track of at-risk pupils’ attendance at SOFIE clubs.
- **Monthly reflection points** – In order to encourage teachers and club leaders to reflect on different aspects of the intervention over time, a simple, one-page, structured form was developed for completion on a monthly basis.

Quantitative data from these registers was transferred to school checklists during post-intervention field visits. With permission, I also made copies of all forms, including the ‘monthly reflection points’.

### 4.7 Summary of research methods

Table 4-7 below summaries the main research methods used to answer this study’s research questions.

<table>
<thead>
<tr>
<th>Research Questions</th>
<th>Methods</th>
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| 1. Within high HIV prevalence communities in Malawi, what factors influence access to learning and the retention of children made vulnerable by HIV/AIDS? | Mini-workshops with selected in-school pupils and out-of-school youth using participatory research techniques  
Key informant and in-depth interviews with young people  
Household visits to parents/guardians of young people interviewed (Household rosters and checklists)  
Focus group discussions with teachers and community members |
| 2 In what ways can a more flexible model of schooling benefit such vulnerable children and support their access to learning and retention? What challenges might be faced? | Collection of process data using school checklists, monitoring instruments and at-risk register  
Interviews with key informants and selected pupils targeted for intervention activities and resources (at-risk pupils)  
Evaluation workshops with selected at-risk pupils  
District-level evaluation workshops with school and community participants |
| 3. To what extent can a flexible model of schooling reduce dropout and repetition amongst orphaned and vulnerable children in high HIV prevalence communities in rural Malawi? | Collection of outcome data and pupil characteristics using pupil tracking records  
Pre-test and post-test collection of school characteristics (school checklists)  
Pre-test and post-test pupil surveys (pupil questionnaire and tests) |
4.8 DATA MANAGEMENT AND ANALYSIS

4.8.1 Qualitative Data

Transcripts and texts

During fieldwork, short summary reports of all FGDs and in-depth interviews with young people were written up immediately after they had taken place. These enhanced quality control and provided discussion points during daily de-briefing sessions. Full interviews and FGDs were transcribed by research assistants or myself either in the field or immediately on return to Zomba, and, where necessary, subsequently translated into English. Where audio recordings were not produced, full reports were written up from detailed notes on the same day as the interview. Reports of school-based mini-workshops and district-level workshops were also produced. These included English translations of participants’ materials and notes taken by myself and other facilitators during plenary sessions. With permission, original visuals were digitally photographed and uploaded.

As a further quality control measure, an independent reader (a graduate student) and I read and compared English translations of all transcripts against the Chichewa and Chitumbuka texts and audio recordings. In a few cases it was deemed necessary to re-transcribe sections of the original audio recordings or make adjustments to better capture colloquial expressions and meaning in English. I proof-read all transcripts and reports before and after typing. All typed transcripts and reports were uploaded onto Nvivo 8 for coding and analysis.

Coding and analysis

During Phase One of the study, I was guided by a two-step analytical plan that centred on the lives and schooling experiences of the children and young people that participated in the research. I first analysed the visual data from the participatory methods (problem trees and pair-wise ranking matrices) by school and group (pupils, out-of-school) and categorised and recorded this in tabular form. I used the emerging categories to expand an initial a priori list of codes informed by the literature and my previous research experience (Bazeley, 2007; Huberman and Miles, 1994). Close reading of the interview and FGD transcripts yielded additional issues and themes that were incorporated into the coding frame during an ongoing process of refining and up-dating. In this way, I used inductive coding to avoid confining or limiting the reading and analysis of the transcripts (Bazeley, 2007; Creswell, 2007) and allow for a more emic approach to addressing the relevant research questions.
Categorical aggregation of events and issues emerging from the preliminary analysis and coded texts provided a framework for further analysis and presentation of the data (Creswell 2007). I used these themes in a cross-case synthesis to compare findings across the four schools. Matrices and coding queries in Nvivo 8 were used to cross-reference factors and events emerging from the texts against ‘impact on schooling’, coding separately for ‘attendance’, ‘temporary withdrawal and/or drop-out’ and ‘participation/performance’. Care was taken to seek out both constraints and supporting factors. Following this approach an initial, broad framework that grouped factors as either ‘household’ or ‘school-related’ was expanded to include a third grouping loosely described as individual and/or psychosocial factors. Further interpretation and presentation of the data was pulled together in a narrative discussion of the findings, incorporating multiple perspectives.

I also drew on data from multiple sources (child interviews, guardian interviews, river-of-life drawings and household rosters) to build a picture of the background and life history of the young people interviewed. Data was used to write up detailed vignettes and summarised in tabular form. These acted as a useful aide memoire, providing an interpretation of the young people’s ‘stories’, and were available for further analysis (Examples are provided in the Appendix 7).

During Phase Two, the earlier coding frame was adapted to include on issues pertinent to the intervention, with broad categories based on the questions posed during interviews and FGDs. Again, this coding frame was expanded and refined during close reading of transcripts. Subsequent analysis followed a cross-case approach, drawing on multiple perspectives. Visual and written data from school and district level workshops was categorised and summarised in tabular form, but, in contrast to the analysis in Phase One, was used to supplement rather than lead the emerging findings.

4.8.2 Quantitative Data

Data entry and database management

Following baseline and post-intervention fieldwork in Phase Two of the study, test scores and data from pupil questionnaires were entered onto a SPSS database and cleaned. I was assisted in data entry by two of the research assistants who had participated in the fieldwork, but I was solely responsible for all data cleaning exercises.

Data on school-level variables was also entered and cleaned. In the final dataset, most of this data came from the post-intervention school checklists, which reflected the most up-to-date information on pupils collected during 2009. Selected variables on intervention inputs and activities (e.g. resources distributed, teachers trained, meetings held etc.) and details of pupils on the at-risk register were also entered.
Up-dated information on pupils’ educational status was entered following both the mid-term and post-intervention field visits. This included details of any ‘new’ pupils, whose information had not been captured during earlier field visits. Promotion data for all Standard 6 pupils was entered following submission of handwritten progress reports from schools, and a final cleaning exercise was carried out. These school reports were also used to cross-check pupil outcomes against those recorded on the pupil tracking records.

A comprehensive filing and cross-referencing system based on unique school and pupil id numbers was used to track and store data. Excel software was used to track the different data sources and their stages in preparation and analysis.

**Data Analysis**

Basic descriptive statistics were run to (1) explore school-level variables and (2) process indicators in intervention schools. The former allowed an initial comparison of control and intervention groups to assess the effectiveness of the randomisation process; the latter to examine the fidelity of the implementation of the SOFIE model. A similar exercise was then carried out to describe and compare pupil characteristics across the two groups. Chi-square tests were run to assess the significance of any differences between groups.

To assess the impact of the intervention, the primary explanatory variable of interest was the treatment (intervention) variable (1=intervention, 0=control). The intervention was considered to have had an impact on educational access and retention of pupils if there was a significant effect (p < .05) of the intervention on dropout and/or promotion.

An assumption of a true experiment is that the process of randomisation has indeed resulted in two groups with characteristics that differ only with respect to whether they received the intervention or not. Within educational research this is very difficult to achieve in practice. It is argued that the unit of randomisation (in this case the school) should also be the unit of treatment and analysis (Gorard, 2003). However, this presents some difficulties for this study - whilst schools were the unit of randomisation, treatment was at the class (grade) level (albeit one class within each randomly assigned school) and measures of pupil outcomes were taken at both the class and individual level. Furthermore, those provided with the ‘value-added’ treatment (pupils registered as at-risk in participating schools) were not randomly assigned.

As sampling and randomisation had been carried out at the school level, it was deemed appropriate to first carry out analyses with the school as the unit of analysis. This preliminary analysis of school-level outcomes (class dropout rates and class promotion rates) was done using non-parametric statistical tests, because of concerns over the size of the school sample. Preliminary analyses were done using SPSS 16 software.
To examine the impact of the intervention at the pupil level, logistic regression was used to measure effects on pupil outcomes. Both unadjusted and adjusted estimates were calculated (odds ratios). Adjusted estimates controlled for covariates at the district, school and pupil level. Interaction effects between the intervention and selected variables were run; where no interaction effects were found these were excluded from final regression models. Clustering effects on standard errors were controlled for at the school level. Regression analysis was run using Stata 8 using the logit and vce(cluster) commands.

A series of exploratory loglinear analyses were run to examine interactions between categorical variables\(^2\) for pupil characteristic (gender, age group, orphan status etc.) and at-risk membership and dropout. Cross-tabulations were first run to establish counts for each combination of categories and then weighted. Loglinear analysis was run on category combinations using the SPSS loglin function. Model Selection. K-way effects and Partial Associations were examined to assess the significance of two-way and three-way interactions between variables. Chi-square tests were then used to interpret associations between significant interactions, and odds ratios were calculated to estimate the likelihood of dropout if pupil sub-groups were registered as at-risk. Cross-tabulations indicated that all assumptions had been met for analysis, apart from the orphan status variable, where one cell had a count of 0. To address this a constant was added to all cells (Field, 2009).

In addition to the quantitative analysis presented in this thesis, the cleaned quantitative dataset was forwarded to the SOFIE project statistician for further analysis. Propensity score matching and multi-level logistic and linear regression were used to identify and assess the impact of the intervention on agreed pupil outcomes, both overall and for a sub-group of the pupil sample identified as at-risk. Working with the statistician, I used these additional analyses to inform and draft the project’s final report for Malawi (see Jere, 2010). Where appropriate for the focus of this study, I make reference to these analyses in this thesis (Jukes, Jere and Pridmore, in press).

### 4.9 Ethical Considerations

#### 4.9.1 Access

In addition to all ethical procedures adopted by the SOFIE project, permission to conduct research was granted by the MoEST in Malawi, with free access to enter government schools. I also took care to negotiate access at both district and school level. District officers were met during sensitisation and planning meetings prior to fieldwork. On initial entry to communities during Phase One, the research team sought audiences

\(^2\) Categorical variables were used to group pupils by selected characteristics. Age data was transformed into a categorical variable with values for older (14 years plus) and younger pupils (13 years or less). The variable on orphan status was collapsed into two variables: orphaned (single and double) or not.
with Traditional Authorities and village leaders, following local protocol. CBO representatives on the research team were central to negotiating access to communities. Traditional leaders were briefed on the study and their permission sought to enter communities and visit households. Meetings with community members and school staff were then held at the four case-study sites to brief them on the purpose of the research and plan the research activities. To address concerns that any collection of names of orphaned and vulnerable children would raise false expectations regarding future distribution of aid, this issue was addressed frankly and transparently during these meetings.

In Phase Two, access to enter schools was re-negotiated with school management prior to every visit, although this presented few obstacles as district offices had already given permission and had informed schools to this effect. PEAs also notified schools of forthcoming visits and kept district officers informed of fieldwork schedules and activities. School heads and teaching staff were accommodating and the research teams were generally warmly welcomed – particularly so in the four case-study schools.

### 4.9.2 Identifying participants and gaining consent

A critical ethical concern in this study was that the process of identifying children and households to participate should not contribute towards children being stigmatised or discriminated against. During community meetings care was taken to ensure that the focus of research was related to broader issues of access of vulnerable and orphaned children, rather than specifying those directly affected by HIV/AIDS. Where sensitive documentation or corroboration was sought from government extension workers, CBO members and/or school management, this was done on a strictly one-to-one basis and all information was treated as confidential.

The ‘funnelling’ process of sampling children and young people for the case study research was designed so that those selected for interviews were initially part of a wider, more heterogeneous group. As such, fellow pupils or other participants were less likely to associate those later chosen for interviews with any specific criteria. All pupils were made aware beforehand of the arrival of the research team and that some pupils would were to be invited to participate in research activities, stating simply that they would be representing children of their age. Out-of-school young people were invited verbally to attend by CBO staff or extension workers and advised that they had been selected as representative of out-of-school youth.

Informed consent was sought and received at each stage of the field activities. Prior to school visits, a prepared statement was read out at school assembly by school staff informing all pupils of the research team’s visit, the general purpose of the research and asking pupils to inform their parents/guardians. Pupils were asked to tell parents/guardians that if they are *not* willing to allow their children to participate, they should
inform the school. Whilst not ideal, this type of verbal consent was adopted because of the difficulties of informing a large number of parents/guardians, many of whom could not read and write. Prior to questionnaire and test administration and at the start of mini-workshops and interviews all participants were read a statement ensuring confidentiality and advising them of their rights if at any stage they wanted to withdraw. Digital recorders and cameras were only used when given permission from participants.

4.9.3 Welfare issues

Social welfare officers in both districts were kept informed of the study and encouraged to visit study sites as appropriate. In Phalombe, where visits to households of out-of-school youth revealed situations of near destitution and ill health, social welfare officers were informed so that they could follow up. Specific issues raised during interviews remained confidential, however.

In both districts, CBO representatives had had prior training in guidance and counselling skills, and all research team members were trained on how to work with young people in a sensitive manner. At one school visited during initial case-study activities, a female pupil spoke of her sexual harassment by a male teacher. The pupil involved was counseled, given guidance on how to reach the appropriate authorities and school management informed.

4.9.4 Benefits to participants

A critical ethical consideration is the extent to which benefits from involvement in the research accrue to participants. During Phase One, there was an assumption that participating pupils would benefit – either indirectly or directly - from their schools’ future involvement in the intervention. However, I was concerned that the out-of-school youth would not be benefiting from the intervention and no procedures were in place to address this. To make some amends for this, all those participating were given small ‘gifts’ in recognition of their time (soap, body lotion).

4.10 Challenges and Limitations

4.10.1 Research Design Limitations

A critical limitation of the design of the intervention and its evaluation is that, as an intervention ‘package’, impact is measured quantitatively for the whole package rather than its constituent parts. This study addressed this limitation through the incorporation of qualitative and participatory methods within the experimental design to explore participants' perspectives on the effectiveness of various components of the SOFIE model, as well as their assessment of implementation processes and change (Chambers, 2009; Karlan, 2009).
As with any experimental design taking place in a complex social setting, the observed impact of the intervention may be compounded by the participants’ awareness and corresponding response to their participation in the research itself – the Hawthorne effect (Brown and Dowling, 1998). This possibility was taken into consideration at the design stage of the SOFIE project. Following the baseline activities, interaction with research teams was kept to a minimum at both control and intervention schools. In Malawi, all schools experienced the same number of visits and identical data collection activities, with the exception of activities to collect qualitative data, which were limited to the four case-study schools.

The tracking of transferred pupils and dropouts from Standard 6 once they had left their respective schools was problematic and beyond the scope of this study. Thus, whilst ideally the outcome variable for retention would be the reported proportion of pupils still in full time education at the end of the school year, in practice, this was measured by its converse – the proportion of pupils that had dropped out during 2009. Assumptions cannot be made about whether these pupils subsequently dropped in again. Pupils that transferred to other schools were distinguished from dropouts by the documentation required for transfers.

Another limitation of the research design was that within the funding parameters of the SOFIE project a household survey of pupils participating in the intervention was not feasible. This meant that information on factors such as socio-economic status and education levels of the pupils’ households was not collected – factors associated with pupil dropout (Hunt, 2008). To address this, measures of vulnerability were included in the pupil questionnaire such as whether pupils’ took breakfast on the day of the school visits and parental employment. However, more detailed information on pupil background would have benefited subsequent quantitative analysis.

**4.10.2 Addressing Fieldwork Challenges**

Absenteism of pupils – in both districts – was a concern during the pre-test fieldwork and had implications for the effort involved in collecting data for pupil tracking records throughout the intervention phase. Various reasons were given for this, most often related to teachers’ extended or frequent absenteeism. On occasion the reason given for pupil absenteeism related directly to their vulnerability, such as a food distribution exercise for households with orphaned children. Where this would create unnecessary bias in pre-test data (tests and pupil questionnaires), a second visit was paid to the school. Unfortunately, the timeframe for the fieldwork did not allow for return visits to all schools where absenteeism was high.

Although there was notable improvement during the course of the evaluation, one of the initial challenges faced by the research team was inadequate record-keeping in intervention and control schools. Determining whether a pupil had dropped out was particularly problematic, as attendance in Malawian primary schools is
often intermittent and, if recorded, the measures for dropout varied between schools. Therefore, a standard measure to ascertain whether a pupil was at risk of permanent drop-out was adopted this study (see 4.5.1).

The situation found in many schools emphasized the need to incorporate training on monitoring and record-keeping into the intervention package. Class registers, where orphan status could also be recorded, were provided to all schools (including control schools) to track attendance of target grade pupils during 2009. Pupil tracking records were also developed and used to monitor and up-date pupil data in all schools.

4.11 Establishing Validity

Addressing validity in mixed methods research is complicated by the need to combine both qualitative and quantitative approaches, each with their distinct priorities, forms (and language) of validity. Emerging debates in mixed methods research call for models of validity that can identify specific issues that might evolve from such integration. Much of this centres on the need to draw valid ‘meta-inferences’ from inferences from both the qualitative and quantitative components of the study (see Onwuegbuzie and Johnson, 2006; Teddlie and Tashakkori, 2003). This might include consideration tensions that emerge from the relative value placed on quantitative or qualitative inferences and the need to ensure that procedures to establish validity associated with both qualitative and quantitative data collection and analysis are followed and achieved (Creswell, 2003) – what Onwuegbuzie and Johnson (2006) call ‘multiple validities’.

To establish the validity of the inferences drawn from any experimental design requires the researcher to demonstrate a plausible, causal relationship between the treatment (in this case the intervention) and the observed outcomes (Robson, 1993). A range of ‘threats’ to this internal validity exist, related to experimental procedures and treatments or participant characteristics (Creswell, 2003). An initial step in enhancing the validity of results was to ensure the reliability of the data collected. This was done through the rigorous piloting and moderation of research instruments and protocols, giving particular attention to language and meanings present in the communities of concern. The involvement of individuals living and working within these communities was of immeasurable value to this process.

In this study, several other associated threats were not relevant to the outcomes under investigation (e.g. mortality –selective dropout of participants– is not a concern when the outcome under measurement is dropout itself). Others were reduced through the use of randomization (e.g. selection bias). Possible threats remaining included a possible diffusion effect of the treatment, if aspects of the intervention package were adopted by nearby control schools. Given that the average inter-school distance in Phalombe was just over 4km, it is possible that at catchment boundaries pupils shared resources such as the study guides with pupils
from other schools. In addition, school heads and district officers met regularly at district offices and may have discussed ideas emerging from the intervention. However, such interactions are likely to be limited in their effect as control schools did not participate in the training nor set up clubs, for example. A more important, potential threat was the variability and/or lack of fidelity of the implementation process between schools and districts. In this study, both qualitative and quantitative methods were used document key aspects of implementation process and used to inform and enhance the overall validity of inferences made regarding the impact of the intervention.

Researchers working within a transformative framework strive to produce an inclusive and balanced view of the phenomenon of interest that provides a degree of objectivity, yet avoid unnecessary bias brought about by a lack of understanding of key viewpoints, especially those traditionally underrepresented (Mertens, 2003). As such, the credibility of the inferences drawn from the data is critical (Lincoln and Guba, 1985), as is the extent to which interpretation of the qualitative data represents the perspectives of the underlying groups (Maxwell, 1992). In this study, several additional procedures were used to enhance internal validity:

- Triangulation of emerging findings through the use of multiple sources and multiple methods of data collection (Merriam, 1998), including actively seeking out and involving children and young people in the research. Triangulation was ongoing during both phases of the research design, with qualitative and quantitative data analysed for convergence and disparities in inferences. Similarly, quantitative data was cross-checked across different sources of information (e.g. school records and zonal statistical returns, monitoring forms, pupil questionnaires) to increase confidence in their validity (Robson, 1993).

- Taking a pluralistic approach and ensuring inclusion of diverse and multiple perspectives during writing up and dissemination.

- ‘Cultural interpretations’ of fieldwork activities and observations through daily de-briefing sessions amongst the research team, which included members who lived and worked in the communities of concern.

- Participant review and member checking by providing regular opportunities for feedback and discussion of emerging findings with school and district-level participants and stakeholders. Ethically, this also strengthened the representation of participants in the research process and narrative, allowing space for their own views to be reflected (Sultana, 2007).

In order to help assess the validity of any ‘meta-inferences’ drawn from combining inferences from the qualitative and quantitative data and analysis, a more etic viewpoint can also be of value (Onwuegbuluzie and
Johnson, 2006). In this study, this was approached through the peer review of emerging findings during SOFIE project workshops.

Also of interest to me was the extent to which the research findings and implications might be more generally applicable within Malawi (i.e. the generalisability or external validity of the study). In both phases of the research, much of the in-depth, qualitative data was collected during visits to four schools as case studies. A limitation of the use of distinct case studies is that it is inherently difficult to generalise to a wider population. As the qualitative data collection this study was designed first and foremost to inform and evaluate innovation – implemented in schools located in similar settings to the four schools – it could be argued that such generalisability beyond the sample of intervention schools was not a primary objective of this qualitative investigation. The selection of multiple cases, however, can go some way to addressing such a limitation by strengthening confidence in the external validity (or ‘transferability’) of the findings (Yin, 2003). Furthermore, the production of ‘thick descriptions’ of context (Merriam, 1988), as provided in Chapter 5, allows readers to assess findings within their context and relate them to other schools or communities with similarities in context. Whilst sampling procedures in Phase Two of this study allow for the generalization of quantitative analysis from sampled schools to the wider population of schools in the target districts, care must be taken in generalising the findings to Malawi as a whole, but rather to rural districts of similar contexts.

4.12 Chapter summary

This chapter has presented a rationale for using a mixed methods approach to address the research problem and has highlighted several of the decisions made in developing the overall research design. Whilst mixed methods research predominantly adopts a pragmatic stance, this chapter has discussed how such research can also be located within a transformative framework, particularly where – in the case of this study – the researcher is working with marginalised groups. This perspective underpins key decisions in research design and processes discussed above: access, respondents’ level of participation, ethical considerations and validity. This chapter has outlined the sampling procedures used to select participating schools and has described in some detail the strategies and data collection methods used in the two main phases of the research. It describes the development of a participatory, ‘funnelling’ strategy for selecting children and young people affected by HIV/AIDS in a context where early disclosure and discussion of such criteria might cause distress. The chapter has described the main data sources methods of data collection for this study – both quantitative and qualitative – and the key stages involved in data management, analysis and integration. It has also discussed the main challenges and limitations faced with regard to the research design, difficulties faced during fieldwork and how these were addressed.
Part III: Exploratory Case Studies

CHAPTER 5: FACTORS INFLUENCING ACCESS AND RETENTION OF ORPHANED AND VULNERABLE CHILDREN

This chapter presents the findings and analysis from the case studies, which explore the factors influencing orphaned and vulnerable children’s access and retention in primary schools in high HIV prevalence communities in rural Malawi. It focuses on constraints and supportive factors as experienced by children impacted by HIV/AIDS. As such, it answers the first of this study’s research questions:

• Within high HIV prevalence communities in Malawi, what factors influence access to learning and the retention of children made vulnerable by HIV/AIDS?

5.1 CHAPTER OVERVIEW

This chapter starts with a brief comparative overview of the four case-study schools; grounding the forthcoming discussion within their different contexts. Specifically, it highlights the impact of HIV/AIDS within these schools and communities, as reported by key informants, and summarises the extent of external support for orphaned and vulnerable children in the surrounding areas (further details of the context of the four schools in found in Appendix 1).

The chapter then presents and discusses factors emerging from interviews, FGDs and participatory work with pupils and out-of-school youth that, at the micro and meso-level, influence access to learning. The discussion centres on the constraints placed on the educational access and retention of orphaned and vulnerable children, bringing into focus children from HIV/AIDS-affected households. It also presents evidence of family and psychosocial factors that may support continued schooling.

In the complex social milieu surrounding pupils’ access and exclusion from schooling, presenting such factors - and their impact - in isolation is problematic. Here, I present clusters or ‘constellations’ (Kendall, 2004) of factors that that can combine to disrupt schooling or, at times, contest and mitigate disadvantage. For clarity, these are discussed within broader, over-lapping layers that came to form the analytical framework for the emerging findings: household and community factors, school-related factors and individual and peer-related issues (Figure 5-1).
5.2 CONTEXT

5.2.1 Impact of HIV/AIDS

Both districts where the case-study schools were located have relatively high rates of HIV prevalence. The dominant ethnic group in Phalombe, the Lomwe, has the highest rates of adult HIV-prevalence of any ethnic group in Malawi (16.8%). The Ngoni, the dominant ethnic group in TA M’mbwera in Mzimba South, also show a high rate of HIV prevalence (10.6%), particularly compared with the overall adult prevalence rate in the Northern region of 6.6% (NSO and ORC Macro, 2011).

In TA M’mbwera, the migration of men to South Africa to find work has resulted in large numbers of *de facto* female-headed households, according to district-level key informants. Migrant worker were reported to take additional wives or girlfriends during their extended stays in South Africa, so that on return they bring an increased risk of exposure to HIV. The polygamous structure of many households further compounds this problem. Some cultural practices such as *chokolo* (wife inheritance) were also said to increase the spread of HIV infection.
The border trading centre close to Mozambique where Pamoza FP is located is particularly hard-hit. Multiple deaths within once prominent families in the area were openly attributed to HIV/AIDS; leaving remaining family members, including many returning orphans, in much reduced circumstances. The school itself had recently lost two teachers to AIDS, a married couple, and one teacher is currently receiving ARV medication. The PEA for Pamoza noted that he has lost 8 teachers to AIDS in his zone (13 schools) in recent years.

In Phalombe, HIV/AIDS was strongly associated with increased poverty and food insecurity, particularly in the more rural areas. Orphaned children were perceived as having little material support and often required to fend for themselves. The two school heads opined that HIV/AIDS in the wider school communities has resulted in reduced participation of parents in school development activities and poor social cohesion. One NGO worker observed that the spread and impact of HIV/AIDS is fuelled by high rates of separation, divorce and subsequent re-marriage in the district, increasing the vulnerability of women and children. This is particularly common in the area around Lake Chirwa – where Duma school is situated – where young men come to find casual work during the fishing season.

Certain commonalities in the impact of HIV/AIDS across case-study schools exist. All communities had experienced increased numbers of orphaned children, and key informants agreed that HIV/AIDS had contributed to increased absenteeism and poor performance amongst learners. In the two Phalombe schools, key informants also noted that coping strategies of households or individual children affected by HIV/AIDS would often result in permanent school dropout. In the two remote rural schools, debate amongst community members and representatives of school management regarding constraints faced by children affected by HIV/AIDS brought mixed responses. Some members insisted that children from low-income households were similarly disadvantaged as orphaned children, whilst others argued that children suffer the additional burden of parents’ chronic ill-health, which negatively impacts on children’s attendance and performance. The majority of respondents across all schools concluded that many children affected by HIV/AIDS suffer specific, additional constraints in access to education compared with those from low-income households.

5.2.2 Support for orphaned and vulnerable children

Key informants identified government interventions and NGO-led programmes within the schools’ catchment areas that provide support to orphaned and vulnerable children (Table 5-1). Support provided was predominantly for child welfare, health and basic needs, although the girl education programmes (Adolescent Girls Support Program and FAWEMA) provide examples of mentoring, motivation and follow-up; albeit to a very limited number of beneficiaries.
Across all school communities, key informants also named small CBOs that had been involved in *ad-hoc* or one-off initiatives to distribute basic necessities to a few vulnerable pupils. In most cases these activities relied on funds raised by the CBO members themselves and there were concerns about the sustainability of such activities.

**TABLE 5-1: LIST OF GOVERNMENT AND NGO-LED PROGRAMMES AT CASE- STUDY SCHOOLS**

<table>
<thead>
<tr>
<th>School</th>
<th>Programme</th>
<th>Targeting</th>
</tr>
</thead>
</table>
| Duma   | School Health and Nutrition Programme  
         | Ambassador Girls Support Project  
         | Fawema ‘Mothers Group’ | All school-age children  
         | Orphaned girls  
         | Girls |
| Namalongo | School Health and Nutrition Programme  
         | WFP school meals | All school-age children  
         | All pupils (take-home rations for orphans) |
| Kamunda | School Health and Nutrition Programme  
         | Ambassador Girls Support Project  
         | Fawema ‘Mothers Group’  
         | Tovwirane AIDS committee | All school-age children  
         | Orphaned girls  
         | Girls  
         | Orphaned and vulnerable children |
| Pamoza | School Health and Nutrition Programme  
         | FAWEMA ‘Mothers Group’ | All school-age children  
         | Girls |

**5.3 HOUSEHOLD AND COMMUNITY-RELATED FACTORS**

This section presents issues relating to children’s immediate households and wider family circles, within wider social exclusion and community influences. It focuses on factors reported to have direct influence on school attendance, withdrawal and dropout, as well as participation in class.

**5.3.1 Family crises, illness and bereavement**

**Chronic ill-health of parents or guardians**

Discussions across all four schools reveal that extended periods of parental ill-health can be highly disruptive to schooling: often just disruptive as pupils’ subsequent orphanhood. Teachers and community members highlighted the practice of involving children in care-giving activities as one that impacted heavily on pupils’ attendance. In addition, several noted that for many children this is also a time of great uncertainty and anxiety, potentially further increasing their withdrawal and isolation. For some, these periods of disruption – in terms of schooling – could actually be more severe *prior* to the loss of a parent. A female teacher from
Duma spoke of one boy who was out of school for two years whilst his mother was ill, but returned following her death.

This child’s mother was sick, the parents were divorced…and since the boy was the eldest in the family, the rest were his sisters, he was responsible for looking after his sick mother. I think this also made him stop schooling. Now his mother is dead and maybe that’s why he now comes to school, encouraged by the ones who he is staying with.

One 13 year-old male pupil interviewed in Kamunda explained that he was out of school for almost two years during the ill-health and decline of his mother, only to return to school soon after she died.

Interviews with young people highlighted additional disruption in schooling, with households fragmenting and members re-locating during times of chronic ill-health, either to seek better medical care, consult traditional healers or to return to their home villages. During interviews, three out-of-school youth and one pupil spoke of accompanying their chronically-ill parents at such times. An 18 year-old girl, who left Namalongo school in Standard 5, described how she had travelled with her father to his home district when he fell ill; and remained there until his death. Throughout this period she did not attend school (see Akuzike’s story, Appendix 7).

In other situations, children were left behind under the care of an older sibling or adult household member. In such cases, there was some semblance of continuity in terms of school enrolment. However, the absence of the household head had other indirect impacts on pupils’ access to learning, most notably through the low productivity and reduced circumstances of the households (see 5.3.3).

**Bereavement**

The most immediate impact of a death in the household is the absence of children from school to attend the funeral. Although the length of such ceremonies has been curbed in recent years, they can still last several days. Such absenteeism is acknowledged as a concern amongst key informants and guardians, but few would go against the social norms that require participation in funerals.

Interviews with young people and their guardians indicated that several had been reluctant to return to school following bereavement. Even if they returned, the period of re-adjustment could be lengthy, impacting on their general performance. One 13 year-old boy from of a sibling-headed household in Namalongo explained:

> It was during the time after the father’s death… all of us did not go to school, because we were affected so much.

The uncle of a 15 year-old female pupil at Namongolo FP stated:
When her mother died she was in standard 5. She did not want to go to school. Her performance went down, but after one year she started picking up. I guess she had come to terms with her mother’s death.

Where the loss had been of a single parent and children remained in the same households, some noted relatively little impact on their school attendance. Chisomo a 20 year-old young man from Duma, spoke of the earlier death of his father,

It was not a problem, because I still had one parent. So this parent was fending for us so that we go to school… I continued with school. I did not stop…

However, ‘river of life’ exercises and interviews with young people highlighted the cumulative effects of morbidity and AIDS-related deaths on households. Many described a series of shocks that reduced their access to learning and contributed to their social and educational exclusion. In a few cases, multiple deaths in households left children fending for themselves. Chisomo continued,

…but when mother died things went bad, since as children we were on our own...I failed to continue with school.

(see Chisomo’s story in Appendix 7)

One young woman from Duma told how she had lost her grandmother (whom she was staying with during her early schooling), returned to her parents, who both died, then remained in the care of an elder sister, who also subsequently died. At this point, with no means of support and in dire poverty, she had left school; later to marry.

**Fostering arrangements for orphaned children**

Community members and teachers across schools agreed that in most cases where a surviving spouse was not present (because of their earlier death, divorce and/or re-marriage) members of extended families would take up responsibility for the children. Elders or close relatives would meet to make arrangements for the care of the children. In some cases, due the influence of prevailing socio-cultural norms, even where there was a surviving spouse the children did not always remain in their care.

Supporting earlier findings by Mann (2002), such arrangements were said to be made with little or no consultation with the children and might involve the splitting up of siblings into different households. Interestingly, several interviewed pupils had later made their own decisions to change households, as a result of ill-treatment where they had been staying (including curtailed access to schooling). This indicates that older children may not be entirely passive in negotiating their living arrangements, but display some level of
personal agency. In the absence of adult support, some young people found themselves in sibling-headed households, with significant constraints on their persistence in school.

Responses regarding the negative effects of the re-location of children following bereavement generally centred on the specific circumstances found within the new households (5.3.2 below), rather than the change of locale per se. However, a few of the young people interviewed noted constraints related to their move to an area unfamiliar to them, such as unfamiliarity with the language of instruction and isolation within their new school. Commonly, such children had grown up in towns where their parent(s) had been working, but had returned to their ‘home’ village following the death of one or both parents. One pupil interviewed, who had returned with his mother to her home district on the death of his father, did not enrol in school due to social and religious differences. He later chose to come back to his father’s area to live with his older siblings and re-enrolled in his original school – after an absence of several months.

5.3.2 Discrimination, isolation and social exclusion

Intra-household discrimination

During FGDs at all schools, participants described discrimination within households as a constraint on children’s access to learning. A general perception was that some orphaned children receive less care than other children in their host household: that they might be bought fewer clothes or be given a lesser share of food, blankets, soap and other basic necessities Others noted that orphans are used as little more than house servants, taking on almost all household chores at the expense of their schooling. A few spoke of verbal abuse and discouragement, even violence.

Discussions during the pupil mini-workshop at Pamoza also highlighted such discrimination. One 16 year-old female pupil explained.

Guardians do force children to do the chores or else they beat the children. They tell them to work and not go to school. If they go to school they say you should not come back home after the classes…others tell you, “you should just go and get married, who is going to pay school fees for you?”

Amongst the young people interviewed, half of those who were staying with relatives other than their parents, believed that they were treated differently from other children in the household: being bought fewer clothes and other basic necessities, including, in some cases, school materials. A 15 year-old male pupil from Duma, who was staying with his grandparents and an uncle not much older than himself, said:

We are treated differently. As you know my uncle has got both his father and mother here, while I have none, so they make sure that he gets his needs while I am left to go to the lake … clothes, schooling needs like exercise books, pens; we differ in these things.
A 14 year-old female pupil at Pamoza described her experiences:

... sometimes they might not buy me [any clothes]... sometimes I bathe without soap while the other children do. I bathe in water only without soap... they also insult me... sometimes they say I should go to Lilongwe to stay where my step-mother is [chronically ill in hospital].

She went on to describe how she was regularly kept out of school to attend to household chores, and sometimes beaten if she refused (see Madalitso’s story, Appendix 7). Two other female pupils described being subjected to violence by guardians, though in both cases the girls had since left for other households.

Some key informants noted that intra-household discrimination may stem from frustration at the additional costs borne by the household hosting orphaned children. A few related discrimination to wider issues of social cohesion – the breakdown of the extended family and adoption of a more westernized notion of family. The PEA at Pamoza commented:

This time the cost of living is high, each one looks after their own family - this extended family is not there. People have learnt to eat at tables; they don’t go to the cooking pot. There is no more communal living in the village. In the past, orphans could easily be cared for in that way. But this time, it is everywhere – people thinking of money only.

**Property-grabbing**

Another example of an act of discrimination against orphaned children is the practice of ‘property-grabbing,’ whereby on the death of the father, relatives from the male side will snatch property, land and belongings from the surviving widow and/or children. This practice appeared to be particularly common in Phalombe, with teachers and community members from Namalongo listing many examples. At Kamunda, teachers and community members argued that property-grabbing was not common in their area, stating that the patrilineal system of *lobola*, is supposed to guarantee support of orphaned children by the male side. In Pamoza, however, teachers noted that despite this custom, some relatives have taken property or cattle. Three young people interviewed noted incidents of ‘property-grabbing’. One 13 year-old female pupil from Duma described her experience:

My father’s brothers took most of the belongings that our father left. They took kitchen utensils, plates, pots, pails and livestock and also removed the wooden door from the house that we were staying in with our father …my father’s brothers left us suffering without anything to live on.

**5.3.3 Household poverty**

A key commonality amongst research participants in this study was that orphanhood was conceptualised as a ‘lack of support’, which was largely equated with material and financial support. The picture of a child made vulnerable by HIV/AIDS emerging from discussions was of one struggling to meet basic needs; living in a household facing greatly reduced circumstances. Those individuals and households seen as particularly
vulnerable were orphans who had lost both parents, those living with grandparents, households supporting chronically ill adults and sibling-headed households. This lack of support was in turn linked to reduced access to education.

**Impoverishment**

The impoverishment of households affected by HIV/AIDS may start long before the death of a parent, during extended periods of ill-health, as their labour foregone and households struggle to cover additional costs of caring for those who are sick. Rural households where adult members fall sick during the planting season are particularly badly affected. The mother of a 17-year-old girl from Pamoza—who revealed her HIV+ status during the interview—described how her lengthy period of hospitalisation during the rains had prevented the family from going to their fields, and how they expected little from the harvest that year.

Households that have struggled to support themselves during the ill-health and decline of household members are also likely to face the additional burden of paying for well-attended funerals. One community member in Namalongo explained,

> It is also possible that during death [bereavement], the little money which was with parents is also finished.

The uncle of one female dropout from Pamoza noted difficulties faced during the ill-health and deaths of his brother and sister-in-law:

> When there is a sick person you suffer and lot and you don’t rest. Even the deaths, I was responsible for everything, be it wood for coffins, food etc.

In addition, as mentioned above, asset-stripping through practices such as ‘property-grabbing’ can also further impoverish households.

Many of the households lived in poor conditions, with few assets and surviving on subsistence farming, the sale of crop surpluses, artisan activities and/or unskilled, hired labour (*ganyu*). A few received irregular remittances from relatives working elsewhere. Where households had little regular access to cash, food security was particularly poor, since households were unable afford farming inputs such as subsidised fertiliser (see Appendix 5 for details). Eighteen out of the twenty-four guardians or household heads interviewed stated that hunger was one of the main problems faced by their households.

**Lack of food and basic necessities**

Pair-wise ranking activities and discussions during mini-workshops highlighted a strong association between household poverty and food insecurity and pupil absenteeism and withdrawal from school (see Appendix 4).
The lack of food and basic needs were ranked highest as the causes of both absenteeism and dropout across all schools. Pupils from Pamoza noted that even if they attend, hunger impacts negatively on their participation and performance. One girl said:

When children are hungry they have not eaten anything they cannot learn and they feel sleepy because they have not taken any food. They think of their hunger and they do not get what the teacher is saying.

Patterns of poor food security in rural Malawi include a distinct ‘hungry season’; a time when the previous year’s stocks have run out and the new season’s crops are not yet harvested and maize prices rise. School heads for Duma, Kaumunda and Pamoza schools all agreed that absenteeism was higher during such times, as families struggle to cope. The head at Pamoza explained:

There is high absenteeism during the months of February – March, when there is famine. Instead of going to school the whole family, parents and children, can go for ganyu to find food.

In communities with high levels of underlying poverty, food insecurity impacts on many children. However, several key informants noted a disproportionate effect on HIV/AIDS-affected households. The school head at Duma argued that pupils in vulnerable households, such as sibling headed households, were particularly at risk of extended withdrawal from school or dropout during times of hunger.

In addition to food, the lack of other basic necessities was also a concern. Focus groups noted that this ‘lack of support’ would lead to children spending time away from school as they sought ways of providing for basic necessities. Clothing was a major concern raised by young people during mini-workshops. A female pupil from Pamoza stated:

When we do not have enough clothes or the clothes are dirty and we have no soap to wash clothes, we are absent from school, because we are looking for soap … when we put on dirty clothes our school friends say bad words… so because of poverty pupils fail to go to school.

Socio-cultural norms expect children to bathe daily, put on body lotion (usually petroleum jelly) and clean clothes and be neat in appearance. When a lack of basic necessities prevents this, children, particularly adolescents, are likely to feel uncomfortable going to school. Teachers reinforce these requirements and school regulations insist on the wearing of uniform – an additional cost for the household to bear.

Discussions with teachers at Pamoza also underlined how issues of clothing become gendered and exposed girls to additional harassment. One male teacher noted:

To girls there can be more problems. Say if a boy and a girl comes from a poor family, for the boy, even if he were to wear worn out shorts, it will be ok with him, in contrast to a girl wearing a worn out skirt.
A female teacher continued:

What happens to a girl when at 15 and is not dressed properly, maybe her breasts are exposed; boys begin to touch her. If the clothing is torn they will touch her.

5.3.4 Household responsibilities and adult roles

Care-giving

One of the most frequently mentioned constraints on children directly affected by HIV/AIDS, common across all four schools, was that much of the burden of care for chronically ill parents or guardians would fall to the children in the household, particularly the elder children. A male community member in Duma explained:

The sick person will require more people to look after him. The children will be given all sorts of chores like ‘go and wash this’, thus they can’t go to school.

Children are likely to take on additional household tasks that the sick adult can no longer perform, such as looking after younger siblings, drawing water, cooking and other household chores. According to cultural norms, much of the care-giving roles and household tasks are female responsibilities and, consequently, girls often bear the brunt of this work. Some tasks are more likely to fall to boys, however, such as looking after cattle and other livestock. Some FGD participants likened such situations as a reversal of roles, with children now becoming responsible for the upkeep of the household.

If one’s parents are infected, especially if it is the mother, all household chores are done by the learners. They cannot go to school. *PEA, Pamoza FP*

Let’s say two houses are infected, but from one family comes a boy, the other a girl. Now, according to our customs as Malawians, women are the ones who mainly look after the sick. Likewise it means the girl will be more affected, because she will have to be near the sick person to give water, cook porridge for the patient, turning the patient, all these the girl child does. Then for cooking to take place you need firewood. Taking all this, it will need a girl child, because of our culture *Male teacher, Namalongo*

Discussions with teachers and community members at Duma, Namalongo and Pamoza revealed that children would also escort their sick parents to obtain medical care, or to collect medicine on their behalf. In rural hospitals, a ‘guardian’ system requires family members to remain with the patient, to prepare meals and wash clothes. If a sick parent is admitted, then the child might be expected to take up this role. At Duma, one male teacher gave such an example:

She [a female pupil] stayed two weeks without coming to school. When she came back… I asked her why she had not been coming to school. She answered that her mother had fallen sick and she was looking after her in hospital.
Titani, a Standard 8 girl who stays with her mother and younger sisters at Duma, explained her situation:

Sometimes I am absent, but not much …only when my mother is sick. I would be looking after her, escorting her to the hospital as there is nobody else to help her.

In such comments, there is a sense of isolation – that in rural communities such as Duma, with relatives close by, children are forced to take on the role of primary care-givers, even when this means their absence from school. This may well reflect a loss of social cohesion, with extended families’ and communities’ ability to support each other becoming strained (Pridmore, 2008). However, this may also be due to an unwillingness of parents suffering from AIDS-related illnesses to ask for help outside the immediate family, perhaps because of fear of stigma or discrimination. One male teacher from Namalongo explained:

It comes to a critical point when the infected try anything: going to the hospital, to a sing’anga and such like - and in all these errands someone else cannot be sent, it’s the children who are sent…this means children are not going to school.

Children’s work

Bryceson et al.(2004) note that one consequence of the reduced productivity and impoverishment of households affected by HIV/AIDS is the increased use of *ganyu* as a coping strategy. Interviews with household guardians across schools indicate that, for many, this was indeed the case. Often this represented a distinct downturn in household economic activities. The mother of Titani, a female pupil at Duma, explained:

We do *ganyu* in people’s gardens so as to find money to buy food, soap. All these come from *ganyu*… When my husband was alive I wasn’t even thinking of doing this.

A young man heading a sibling-headed household in Namalongo commented,

In the past we did not know about doing *ganyu*…We came to know *ganyu* after the death of our father.

Many of the young people interviewed were required to work, with *ganyu* supplementing meagre returns from subsistence farming. In several cases such work was incompatible with children’s sustained access to school. In all but one of the sibling-headed households visited, the eldest had dropped out of school in order to seek out *ganyu*. Others remained enrolled in school, although attendance was often erratic. One female pupil noted how, following the death of her parents, she had withdrawn temporarily from school to earn money through *ganyu*, but returned a year later after circumstances improved. In yet other situations, pupils were able to remain in school, but spent much of their free time taking up *ganyu* and farming activities - free time that could have otherwise be spent studying. This was particularly common amongst households headed by grandparents.
However, the picture revealed by these case studies is more nuanced than simply that of children’s work resulting in exclusion from learning. In several cases, vulnerable children were using *ganyu* and other income-generating activities to support their schooling needs. One male pupil at the mini-workshop in Namalongo spoke of using earnings from *ganyu* to pay for extra tuition offered at the school. And in Duma, two of the male pupils interviewed stated that they would go to the lake during school holidays to earn money for uniforms and notebooks. Both were living with elderly grandparents and were also required to support the household income. Another pupil in Duma – a girl – described how she sold sugar cane\(^ {24} \) to get money to buy notebooks and pens.

Several research participants discussed the gender dimension of children’s work. Teachers and community members from all schools indicated that boys had greater recourse to work outside the home and more options by which to earn money. However, such discussions often revealed as much about prevailing gender stereotypes as the reality on the ground. Whilst some activities are traditionally not open to girls (e.g. cattle herding or fishing), several girls spoke of their involvement in other forms of *ganyu* (e.g. weeding, harvesting and shelling maize), working alongside their brothers or other household members. Several young people - both boys and girls - spoke of involvement in market day activities: selling cooked foodstuffs, vending or running errands.

**Sibling-headed households**

A small number of children affected by HIV/AIDS find themselves without any adult support. Key informants, teachers and community members across all schools acknowledged the presence of sibling-headed households in their communities. Such cases appear to be more common in Phalombe. During FGDs in Phalombe, several examples were given of the difficulties faced by such households. One example narrated by a male community member in Namalongo illustrates this:

> We have some orphans in our village. They live on their own. One day I noticed that someone was stealing my cassava so I went there early in the morning and climbed a tree. After sometime one of the orphans came and started uprooting the cassava and started eating it… I asked him why he was doing this he just said 'hunger'. I felt sorry for him and because I know how they struggle at their home. I uprooted several plants and gave them to him to eat with his siblings…orphans who live on their own face terrible things!

In the face of such exclusion from society and adult support, sibling-headed households have to overcome significant challenges to continue with their schooling. Key informants and members of FGDs across all schools agreed that children in sibling-headed households were often absent from school for extended periods

\(^ {24} \) This type of small-scale vending is known as *mwana geni*, literally ‘child business’.
of time and were particularly at risk of permanent dropout. Discussions confirmed that it was common for the eldest sibling to leave school to support younger siblings.

Six of the young people interviewed were or had been staying in sibling-headed households (five from Phalombe and one from Mzimba South). Amongst these several scenarios emerged, with household members’ ability to access school dependent on their gender and position in the household. In cases where the young people interviewed had been the de facto heads of the households, all but one had all left school and was responsible for providing support for younger siblings. The majority had since married (and divorced). In another case, a female pupil had the support of an elder brother who had recently married. Despite a temporary withdrawal, she had remained in school, albeit under difficult circumstances. In yet another case, one girl, on joining the household of an older, unmarried brother had left school permanently. In both the above cases the household heads were themselves school dropouts. The only case where all members of a sibling-headed household were in school was the family of four siblings at Namalongo - who were receiving support from the TA and other well-wishers.

In sibling-headed households, an expectation that girls would take the responsibility for household chores increased their risk of absenteeism and/or permanent dropout. One male teacher at Namalongo, commenting on sibling-headed households, said:

...the boy may fetch food, but it remains the duty of the girl to cook, and if they are school children it means again it’s the girl who is to look after them, making sure that they have taken a bath etc...So the girl child has a big load. For instance, the girl asks herself, ‘if I go to school who going to go to the maize mill?’ ...When will I look for relish and cook food?’, while the boy will be just looking at the girl to do all this. So she absents herself to do these chores at home.

This is reflected in the case of Wezi, one of the girls interviewed, who was living in a household headed by an elder brother. The brother explained:

Since my mother died I was staying alone...that time I was a school boy and when things got tougher and I realised that I cannot continue staying alone... I remembered that I had relatives and I went to granny and asked if they can allow me to be staying with Wezi so that she can be helping me with cooking and other chores.

Shortly after joining the household Wezi had been forced to leave school.

5.3.5 Household support for schooling: attitudes and practices

During interviews, parents and guardians were asked, given their household circumstances, whether they believed education to be important. Almost all professed a belief that education was important and that they wished their children could continue with their schooling. Although the majority had received little or no
schooling themselves, they perceived education as important for both boys and girls. Their reasons included: improved knowledge and literacy, opportunities for future employment and to avoid risky behaviour.

The importance is that when he can excel in his studies then in future he will be self-reliant and I will also be helped by his success. He will get employed. That is the importance of going to school.

_Grandmother of a male pupil, Pamoza_

The advantage is that these boys and girls when going to school, they prevent getting pregnant and marrying earlier. They avoid get infected with diseases because of staying idle whilst their friends are in school

_Elder brother of female pupil, Namalongo_

Despite the dominance of farming and trade in the local economies, there was a common belief across communities that education was an important route to salaried employment. Although perhaps unrealistic given the high levels of youth unemployment in rural Malawi, several participants said there had been a shift in attitudes based on the increasing number and visibility of educated, working individuals from their communities, or within their own families:

In these recent times people have now realized that schooling is important because they now see the fruits of education from what other educated people are doing … like being employed, building a nice house… all this is happening because they went to school.

_Female community member, Kamunda_

Some of us want our children to get an education. In the past nobody was making it to the University but now we have some who went.

_Male PTA member, Namalongo_

A few key informants also noted that NGO-run sensitisation campaigns had influenced people’s attitudes to education, particularly with regard to girls’ education.

Education was often conceptualised as contributing to self-reliance: that greater levels of education and improved job opportunities would allow young people greater future independence, seen as critical for orphans.

According to my opinion I want this one to get educated…What will happen when I die? Who will she stay with? She should proceed with school.

_Grandmother to a female pupil, Pamoza_

Some guardians had doubts as to whether they would be able to raise the necessary fees for secondary school, reducing demand for completion of primary education. Others clearly stated a desire to see their wards reach as far as they could go. A typical comment, from a guardian in Namalongo, illustrates this,

I want her to finish primary education. If we have trouble in future paying [secondary] school fees, let it be, but she should finish primary.
Most of the parents and guardians of out-of-school youth expressed disappointment that their children left school early, but suggested that they had had little influence over their wards’ final decision to leave school.

The attitudes presented by parents and guardians generally showed a demand for education. However, several guardians’ expressed views on the importance of education were in direct contrast to situations described by the young people themselves, or observed during household visits. Even where guardians were said to provide support and encouragement, pupils would often be left to make the decision whether to attend school on a particular day or not.

**Financial support**

In terms of financial support for direct school costs – pens, notebooks, uniforms etc – most pupils were currently receiving such support, albeit often very limited. Several guardians spoke of struggling to raise money to cover costs:

> I buy them uniform, I pay for mock exams for Brenda, … I struggle to raise money, when I fail I go to my uncle to ask for help, but generally I am the one providing for the children
> Elder brother, sibling-headed household, Namalongo

> Ah this time, we don’t pay fees since school is free, so when we get money we just buy soap, maize to eat. As for uniform we buy with money realized from ganyu but, I am not sure about the future.
> Mother to female pupil, Duma

Several interviewed pupils noted that family members living and working elsewhere would send money or bought items to support their schooling, though rarely on a regular basis. This type of support was mentioned frequently by pupils in Mzimba South, where many households had relatives working abroad (e.g. South Africa). As described earlier, there were also several examples of enrolled children who provided for their own school needs (see 5.3.4)

Amongst the out-of-school youth in Phalombe, financial support for school costs had been reduced severely or ceased completely whilst they were at school. In all cases but one, the individual named as responsible for providing support for school costs had died. In every case this had been a household member. In contrast to interviewed pupils, none of the out-of-school youth spoke of recourse to further assistance from other family members upon the death of the one providing support. In Mzimba South, four of the five out-of-school youth interviewed indicated that at the time they left school they were receiving little or no financial assistance for school costs. One young man who dropped out of school at age 15 years following his return to his maternal village, explained:

> My uncle told me to come home, but when I came I could not afford notebooks, books and for me to go to the garden and raise money for these things was difficult so I just dropped out.
Emotional support

Closely linked to financial support for school, several young people raised the issue of emotional support or ‘encouragement’ – of someone to take an interest, motivate them and ensure that they attend school \((\text{olimbiktsa})^{25}\). Conversely, a lack of encouragement was ranked as one of the main reasons for dropout amongst out-of-school youth at Namalongo. One boy commented, “If I had had my father I would have finished school…most boys need encouragement.”

At Pamoza, the PEA related this absence of encouragement to the loss or ill-health of the mother, explaining that in the culture of that area responsibility for the care and supervision of children was very much with the women. Teachers at Namalongo and Pamoza both said that, faced with difficulties such as poverty, pupils need reassurance and encouragement to endure and proceed with school. They argued that many orphaned children lack this support. Underlining this, a young man who had supported himself and his brothers after the death of his mother, stated (see Chisomo’s story, Appendix 7):

… there was nobody to force us to go to school since we were all children…If there were people who could encourage me to go to school my future would have been bright. There was no one who encouraged us. They were just looking at us as we went herding livestock. If there were people who could encourage us we would have continued with school.

In sharp contrast to this, a young female pupil, also from Duma, spoke at length of the encouragement received from her mother and how this gave her the strength to continue with school, despite living in an impoverished situation (see Titani’s story, Appendix 7). The mother was herself was in poor health – most likely HIV+ - and this may contributed to her desire to see her daughter educated:

The one who encourages and supports me is my mother, no one else does this to me...There is a lot of that our mother is doing to us to enable us go to school. She gives us advice and also encourages us, by not allowing us to be absent anyhow…Sometimes we could go to school without eating anything in the morning, we could wear dirty clothes, bath without soap and no body oil … still our mother told us to go to school.

Across all schools, there was a notable difference between the responses of those still attending school and those who had dropped out. Amongst pupils, all but one was able to name someone whom they felt provided ‘encouragement’ in regard to their schooling. Responses from pupils show that following the death of parent(s), many were able to draw continued encouragement from their guardians, fellow siblings or the extended family\(^{26}\). This was not the case for out-of-school youth. In contrast, out of the 7 out-of-school youth

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\(^{25}\) Such individuals were described as ‘olimbiktsa’, which in translation means ‘someone who strengthens another’, which is probably closer to an idea of providing what might be called moral support – an active rather than a passive role.

\(^{26}\) This support was generally fairly low-key - in the form of advice, or making sure they had left for school that day or, on rare occasions, looking through their notebooks.
who could mention a parent or guardian who had provided such encouragement, 5 said that the named person had died.

Only in three cases did pupils name teachers as providing such encouragement, highlighting a gap in schools’ support for the emotional needs of vulnerable children – and indicating a potential role for future support.

5.4 INDIVIDUAL AND PEER-RELATED

This section discusses individual and peer-related factors’ impact on the continued schooling of orphaned and vulnerable children. It highlights issues related to children’s own motivation and personal agency as well as the psychological impact of HIV/AIDS and how they respond. It also examines the role of peer groups.

Whilst acknowledging the influence of households and wider socio-cultural pressures on entry into marriage, young people’s personal experiences of marriage, pregnancy and transactional sexual behaviour are presented here.

5.4.1 Marriage, pregnancy and sexual risk

Marriage

Young people’s early entry into marriage emerged as factor affecting educational access across all four schools, although entry into formal marriage arrangements was of greater concern in the Mzimba schools, particularly Kamunda, where communities maintain strong ties with tradition. Research participants across all schools agreed that orphaned children, especially girls, had been known to marry at a young age to ‘run away from problems’ in their current household. Such problems might include discrimination or violence, but were generally assumed to be poverty-related: a ‘lack of support’. Household members were said to pressurise girls to marry early to relieve them of the burden of supporting them. In all scenarios, the assumption was that the husband would be able to provide better support. Out-of-school youth at Kamunda described their own views why vulnerable children might enter into marriage. One 17 year-old female dropout said:

Children are getting married early when they have no parents to support and look after them. They want to start getting support from their husbands if they get married. Others marry because their parents or guardians are failing to support the children’s needs. Others as well get married when the parents remarry after one parent dies. The parent who remarries leaves the children alone or with their grandparent.
As such, marriage is conceptualised as a coping strategy for those facing difficulties at home. Teachers gave several examples of girls from HIV/AIDS-affected households who had left school and were now married. One male teacher from Duma noted,

There was one girl who had only one piece of clothing ...for her to change clothes, she was relying on her brother’s wife’s clothes...whenever she borrowed these clothes there was verbal abuse from the in-law. She was being told that she should just go and get married. She did not sit for her Standard 8 exams. She dropped out and she is now married.

Of the out-of-school youth interviewed, four of the five girls had been married at an early age, although all had subsequently separated from their husbands. All mentioned that expectations of material support were a primary consideration in the decision to marry. In three of these cases, however, the girls had already left school; a decision that they attributed to poverty. Two of these girls, both around fifteen at the time of their marriage were fending for themselves after multiple deaths in their households (see Akuzike’s story, Appendix 7). Another of the interviewed girls, a school dropout from Pamoza, revealed a disturbing story of her elder brother being paid to set her up in a marriage with an older man as a second wife, much against her will.

**Transactional sex**

Research evidence from Malawi suggests that girls orphaned or made vulnerable by HIV/AIDS are at greater risk of entering into informal, transactional sexual relationships, often with older men, so-called ‘sugar daddies’ (Bryceson, Fonseca and Kadzandira, 2004; Chawani and Kadzamira, 2003). This issue also emerged during FGDs. In Pamoza, community members spoke openly of this. One male participant stated:

Here there are also some men who cheat girls that they can provide everything to her so long as she meets his sexual desire or gets married. This is another problem which makes orphans to dropout of school...Some people who have money to help, instead of helping, they take advantage of this to abuse these adolescents. They end up impregnating them and then leave such girls.

In all focus groups, members described vulnerable girls as ‘immoral’ and ‘prostitutes’ who actively seek such relationships:

A girl would say my skirt is torn, I have no soap; no food when she knocks off from school. She will just stay and in the end she starts prostitution to find money for cassava.

*Female community member, Namalongo*

Without support such girls rush for men...she will use her body  
*Male teacher, Kamunda*

It is unclear whether such perspectives reflect an element of personal agency in girls’ involvement in transactional sexual relationships or simply underlines a stereotypical positioning of girls as responsible for male sexual behaviour. A more important observation is that such risky behaviour may often be the
consequence of increased vulnerability and social exclusion brought about by the effects of HIV/AIDS. A female community member at Pamoza offered a more sympathetic perspective:

When the orphan is a girl child, you find that she has now started moving around looking for men so that she can find some assistance. This is common in this area. But the problem begins when the child lacks parental care, she lacks food and clothes so only for her to survive, she starts indulging in such behaviours.

**Pregnancy**

Despite a change in policy in the mid-1990s to allow pregnant school girls to return to school following the birth of their child, strong anecdotal evidence suggests that few take up this opportunity (Streuli and Moleni, 2007). None of the school heads interviewed in this study could name any girl who had returned to school following known pregnancies and/or marriage.

**5.4.2 Anxiety, low self-esteem and isolation**

Across schools, key informants, teachers and community members made repeated references to the anxiety felt by orphans and other children from HIV/AIDS-affected households; their worries over the future or their current circumstances; their feelings of neglect and low self-confidence. Several participants highlighted the psychological impact of caring for those chronically ill.

Because of sick parents the child will start worrying … The household with a sick person will be full of anxiety.  

Male teacher, Duma

Several key informants and community members spoke from personal experience of caring for orphaned children. A common reflection was that such children ‘think a lot’ about their late parents and no longer ‘feel proud’ or confident. Participants observed that orphaned children often feel their lack of parental care and support because of the reduced circumstances they find themselves in. Bereaved children were said to have difficulties adjusting to their new circumstances and often felt excluded and unfairly treated, whether real or imagined. A few key informants noted that this made some of them withdrawn or unruly and difficult to teach.

They feel shy amongst their friends, they are not confident of themselves. They think they are neglected and they think that people think of them in a different way, so they feel shy, rejected and disconnected. They suffer psychologically.  

School Head, Namalongo school

Those from affected families, it’s like they start new life after the death of their parents. So they see the new life as very strange. …  

Male teacher, Namalongo

In class they can look miserable, they lack concentration because of thinking too much…also can be rough and rude. They think that people in the community don’t want them; that they are not supported and they feel rejected. So, they can behave abnormally – they can be rude to teachers and not do as they
Most key informants and teachers noted that the main impact of pupils’ psychological problems was on pupils’ participation in class and, subsequently, their performance. A few noted that this can eventually lead to drop out. Other participants acknowledged that any effects on schooling depended on the attitudes and character of the individual child.

During interviews with young people affected by HIV/AIDS, several spoke of the times of their parents’ death or ill-health prior to death as times of great anxiety and sorrow. Unused to self-reflection, comments were often sparse, but are believed to be indicative of their feelings. A few mentioned concern over the loss of material support:

I was not happy when going to school, since I had lost the person who was assisting me. 
*Male pupil, Duma*

Others spoke feels of isolation and unhappiness:

I was very lonely, because most of my friends I chat with have parents.
*Female pupil, Namalongo*

My life changed because when she was alive I used to be proud and happy, but when she passed away I wasn’t really happy.  
*Male pupil, Duma.*

Young people’s description of the psychological impact of the death or sickness of a parent or guardian on their schooling varied amongst participants, with no clear pattern emerging across schools. During discussion of classroom experiences, both pupils and out-of-school youth said that they had generally participated well in class. However, of those young people who spoke of their emotional state during times of crisis (e.g. bereavement), the majority (8 out of 14) acknowledged a negative impact on their participation in class. Several pupils indicated that they had been determined to continue at school, but had had difficulties engaging in class activities:

Sometimes I could be lost in thoughts and later remind myself that I am in class.

I was just sitting – I had a lot of thoughts.

In class I could follow a little, but I was full of sorrow…I was telling somebody else to answer instead of me.

A few noted that, while saddened by the death of a parent, they did not feel this had significantly affected their performance at school. They related this to coming to terms with the bereavement and the need to think
of their future. In each of these situations the young person in question had earlier spoken of strong support from a surviving parent or guardian.

In sharp contrast, for two boys, the psychological impact of the ill health and death of a parent was directly associated with an extended period of withdrawal from school. For example, a 16 year-old boy from Pamoza spoke of an earlier withdrawal from school following the death of his father (see Bornwell’s story, Appendix 7).

I. What effect did the death of your father bring to your life?
R We were living sorrowfully, my mother was crying throughout. This affected me

I. Did the death of your father affect your schooling?
R Yes, my mother’s attention from me was taken away, she was deeply touched. She could not even help me with my school work.

I. So, this affected your schooling?
R Yes, and because I was also deeply touched by his death… I dropped because I was thinking of the situation at home.

These findings show that young people’s psychological resilience and engagement with school during traumatic life events differs greatly between individuals and is likely to be dependent on several factors, including their own personal motivation and the amount of emotional support received.

5.4.3 Motivation, agency and decision-making

Interviews with in-school pupils from HIV/AIDS-affected households generally indicated a strong motivation to learn and stay in school. Many expressed the belief that this would afford them a ‘bright future’, such as allowing them to secure future employment. Such attitudes were attributed in part to the successes of others observed in their communities.

Amongst the out-of-school youth interviewed most expressed regret at having left school and several said they continued to associate with friends who were still in school. Several noted a desire to have remained in school if circumstances had been different. One young man from Kamunda who had left school at the insistent of his grandfather, said.

When my friends have knocked off from school I ask them what they have written… I think if I was still at school I would have learnt this.
Several pupils from Mzimba schools emphasised the importance of education for becoming self-reliant and independent, and future education and employment opportunities. This was perceived as particularly important because of their orphan status.

One 17 year-old female pupil said:

When we are educated then this means the end of being an orphan. .. because we will be self reliant.

5.4.4 Peer pressure and social networks
A perception amongst several school-based key informants and teachers was that pupils, especially boys, are often pressurised by their peers to absent themselves from class or drop out from school permanently. This was rarely mentioned in relation to the impact of HIV/AIDS, but was seen as a more general concern. Although a few pupils mentioned incidents of themselves and friends skipping classes, this type of peer pressure was not seen as major cause of absenteeism amongst the young people themselves. It was also ranked low as a reason for dropout (see Appendix 4). In fact, some pupils stated a wish to distance themselves from those considered ‘dropouts’. Amongst the young people interviewed, only one young man gave this as the sole reason for his drop out. He explained:

People were saying ‘you just leave school. You are too old for Standard 6…so I dropped, why should they tease me?’

Older children who had made poor progress through school were considered ‘over-age’ for their class and may be made to feel uncomfortable. Interviews with out-of-school youth indicated, however, that that age was not a factor in isolation, but linked to household or individual coping strategies, including work and early marriage. In the majority of cases, the young people said that they themselves had made the final decision to leave school.

Envy
A more common form of peer pressure that emerged – and one linked specifically vulnerable children - was that of nsanje (envy/jealousy). A consequence of this was a desire to copy or acquire what their friends had. During FGDs, several discussions highlighted how orphaned children envy pupils from less impoverished households, particularly in terms of their clothing. This was mentioned particularly in relation to girls and their feelings of shyness and shame at their own appearance. In the Phalombe schools, discussions highlighted envy of their more well-to-do peers as one of the root causes of girls entering into sexual relationships - largely transactional in nature – and subsequent pregnancy or marriage and withdrawal from school (see 5.4.1). In Namalongo, out-of-school youth ranked this as one reason for pupil drop out. One of the
out-of-school girls, who herself dropped out of school after starting an affair with a relatively wealthy young man, explained:

What I did not like when I went to school, it was like there were people from well-to-do families who were properly dressed and had money to spend at school.

Community and teacher FGDS described an inevitable drift from the envying of friends - fuelled by poverty - into sexual liaisons and drop out. However, one female teacher at Namalongo, stressed that this depended on the individual child and guidance received. She noted:

I have examples of some girls who continue with school with a single cloth… others concentrate at looking at others, to say, today so-and-so has worn this, instead of taking their time and waiting for their future. They need encouragement.

**Friendships and peer networks**

Discussions with pupils from households affected by HIV/AIDS suggest that friendships formed within peer groups can *reinforce* positive attitudes to education and provide support for their learning and retention at school. Across all four schools, the majority of pupils interviewed (12 out of 14) identified their closest friends as fellow pupils. When asked what they did when spending time with their friends, the majority emphasised discussion of school-related issues. In several cases, mostly amongst girls, this involved encouraging each other to work hard in order to finish school and find employment, and to avoid behaviour that would put them at risk of exclusion, such as involvement in sexual relationships.

We encourage each other to work hard in class ... *Female pupil, Namalongo*

...we do advise each other not to have relationships with boys … advise each other not to fall in love!  
*Female pupil, Duma*

A few pupils (predominantly girls) described how their close friends would provide support during difficult circumstances: lending clothes or school materials, discussing problems or offering consolation when feeling sad or mocked by others.

I and my friends we talk of the problems that we are facing, like lack of soap to wash clothes, lack of body lotion, lack of pocket money to buy food when at school…I am happy when I’m with my friends as I forget my problems ...  
*Female pupil, Duma*

Sometimes when my sister has refused to give me soap, she gives me some from her house. [pause] My friend is kind.  
*Female pupil, Pamoza*

We share everything and help each other …Like maybe you are walking in the road and you can meet someone who keeps saying something to you that you don’t like… I do ask my friend to help me sort out the issue.  
*Female pupil, Namalongo*
In addition to such support, over half of the pupils described how they and their friends study together and assist one another with school work. In line with cultural norms of social distance amongst adolescent boys and girls, the majority of pupils (9 out of 14) said that their peer groups and close friends were of the same sex.

5.5 **School-related factors**

As highlighted in Chapter 2, the primary education system in Malawi is struggling with poor internal efficiency and low educational quality. Whilst the focus of this discussion is the school experiences of orphaned and vulnerable young people, some of the quality issues affect all pupils.

5.5.1 **School environment**

**School location and infrastructure**

Issues of infrastructure and teacher numbers are important considerations in the quality of education provided in primary schools in Malawi, and the participation and performance of pupils (Chimombo, 2005). In this study there were clear differences between schools regarding participants’ perspectives of their learning environment. During mini-workshops, the distance required to travel to school was ranked as a major reason for absenteeism and dropout by young people at Namalongo and Duma. Both schools were described by key informants as ‘popular’ – Namalongo because of the school feeding programme; Duma because of high pass rates – and had large catchment areas, despite the presence of other primary schools in the area. It might be, ironically, that household or individual decisions based on the perceived benefits of the schools put children under pressure to travel long distances to school. For those from HIV/AIDS-affected households, this might not always be compatible with other household responsibilities, thus increasing the risk of absenteeism. At Pamoza, teachers explained that during the rainy season, many pupils find it difficult to reach school because of surrounding flooded wetlands and rising rivers.

Apart from travel to schools, most of the participants who raised concerns related to school environment were those from Kamunda, a remote school with poor infrastructure and insufficient classrooms. At mini-workshops, several pupils said that they felt uncomfortable sitting on dust floors, especially as they had few clothes and did not always have soap to wash the clothes. During bad weather, those learning outside would often be absent from school.

**Teacher numbers and motivation**

Understaffing was also a major concern at Kamunda. With only five teachers to teach eight classes and a total enrolment of close to 1000 pupils, the school has adopted a split shift system. The school head admitted that
teachers rarely taught to the required timetable. The PEA for Kamunda said that teachers were de-motivated, but had little choice but to continue as they were. During the mini-workshop, pupils ranked the lack of teachers as the main reason for absenteeism. One female pupil stated:

Teachers are few and children do not have enough lessons, others [pupils] decide not to go to school as they do not learn a lot…we might learn only two classes a day.

A culture of teacher absence can also contribute to pupil absenteeism (Moleni and Ndalama, 2004). Observations and comments from participants at both Kamunda and Pamoza revealed that teachers at these schools often engaged in private businesses to raise extra cash, activities that took them away from the school during teaching hours.

In relation to vulnerable pupils, key informants across schools said that with few teachers and large class sizes, teachers had little time, or motivation, to assist struggling pupils. This was emphasised by the PEA responsible for Kamunda, who noted that chronic understaffing had had a serious impact on the provision of learning support and pastoral care of pupils. At Pamoza, teachers revealed a reluctance to take on the additional task of reaching out to vulnerable children:

It is difficult, because … already the teacher has his pupils in class, which is already a burden, trying to make every child understand, and one is absent because of problems at home. So, tomorrow one should sit down with the one who was absent so that s/he knows what the others learnt? That can be difficult for a teacher.

Male teacher, Pamoza

5.5.2 School culture, discipline and abuse

School culture in Malawi is often authoritarian and highly gendered, with teachers using discipline and their power of authority to exert social control over pupils (Kadzamira, Moleni and Kunje, 2006; Leach et al., 2003). Social distance between pupils and staff is upheld as an ideal and teachers expect to be respected and obeyed. Often this is abused, with pupils at the beck and call of teachers who expect them to run personal errands or provide manual labour at their homes. Schools rarely have forums for pupils to raise concerns or participate in school decisions. Corporal punishment – though officially banned in Malawi – is still prevalent in many schools.

Punishments

During problem tree analyses, boys’ groups at three of the four schools - Duma, Kamunda and Pamoza - identified harsh or unfair punishments as contributing to absenteeism. At Pamoza, this was also ranked amongst the three top reasons for dropout by out-of-school youth (see Appendix 4) Punishments described as harsh commonly involved heavy physical labour, such as digging pit latrines or up-rooting tree stumps. One guardian interviewed at Duma complained that punishments given out by teachers were “not compatible with
their age.” Other punishments were described as inappropriate and degrading (e.g. telling a boy to clean out the girls’ toilets) or with little justification.

Much of the disciplining of pupils is left in the hands of the class teacher and pupils noted that they are frequently sent out of class as punishment for any number of offences, often decided upon in a seemingly *ad-hoc* manner. Several of the young people interviewed complained of pupils being whipped or beaten by teachers. Such corporal punishment was more often mentioned at Duma and Pamoza schools.

The direct impact of harsh discipline on pupils’ participation at school was shown to be two-fold. Punishments were often given out during class time, thus denying them access to learning, or pupils would absent themselves from school rather than carry out a particular task. The mother of one female pupil at Pamoza, complained:

> At times you will find out that some children do not attend classes. They are always out from classes, performing punishments: today it’s someone’s child, tomorrow it is the others’. We think the child is in class yet she has been given a punishment.

Exposure to punishments seen as harsh or unjust can lead to fear and bitterness, poor relations with the teachers responsible and disengagement from the schooling process. In some situations, pupils may even withdraw completely from school. Young people who lack emotional support from parents or have suffered from psychological trauma may be particularly disaffected. A troubled 16 year-old boy who lost both his parents to AIDS and had a history of withdrawal and repetition at school, gave the following explanation for his drop out from Pamoza (see Bornwell’s story, Appendix 7):

> That time I had a severe cough; then the teacher asked me if I had gone to the hospital. I told him that I had already gone, but he was thinking I was lying then chased me out of class. Before going out I asked him if the coughing was enough reason to send me out. He then said I was rude. He whipped me with a stick … since then I did not go back to school.

At Pamoza, there was a sense of hostility from the male out-of-school youth towards their former teachers, not only in terms of punishments they had received, but also the practice of ascribing errands to individual pupils during school hours. A young man described how teachers would send him on his bicycle to take maize to the nearest maize mill for grinding – a distance of some 14kms. This meant that he often missed an entire day’s classes.

**Sexual harassment**

During mini-workshops with pupils at Namalongo, participants noted that girls’ excessive punishments, harsh treatment or “conflicts” with male teachers might occur as a result of their refusal of the teachers’ sexual advances. A Standard 8 girl, explained:
This happens when a teacher shows interest and proposes to the girl. Because you refused to be in a relationship with a teacher so the teacher always finds faults in you. They talk bad things against such girls and that discourages them.

Incidences of teachers’ sexual harassment of girls also arose at Duma and Pamoza. At Duma, two of the young people interviewed independently confirmed that the school head had a reputation for touching girls’ breasts and other inappropriate behaviour. One of the female pupils also noted that he would humiliate girls in class. At Pamoza, one teacher was well known for propositioning female pupils and was held responsible for at least one girl’s pregnancy and subsequent dropout from school. This was discussed openly at mini-workshops with both pupils and out-of-school youth. Participants explained that whether a girl accepted or refused the teacher, both scenarios had serious repercussions for their continued access to schooling. A Standard 7 girl, who lived with an elderly grandmother and who had been propositioned herself, spoke eloquently on the difficulties faced by girls unfortunate enough to catch the interest of this teacher.

The teacher sends the girl to leave her exercise books in the office and the teacher follows the girl to make a proposal and because others fear to answer no they say I will answer tomorrow. They then stop coming to school because of fear … The girls are afraid to tell their parents, because they feel shy when they have been proposed, so they prefer staying at home…if the girl comes to school then the teacher can become angry and threaten that she will fail…if the girl accepts the teacher then she can become pregnant and drop out.

Later, during an interview, she spoke of her own experiences, illustrating how abuse found at school can push out children already struggling in difficult home situations:

I have been absent for the first weeks of this term because of what Mr. Chisi did to me, proposing to me and telling me whatever I do I will not pass examinations…When I fail something he is fond of telling me that I am one of the rude children in class. When I go to him to mark my work he beats me… So I feel it is not important to continue with school, especially as we face so many problems at home ….

Discussions with the SMC chair confirmed that the teacher’s behaviour was known to school management, and that steps were being taken to tackle the issue, although it was not clear what form this action would take. Two guardians said that the behaviour of this teacher was a source of tension between the school and the community.

Teachers’ sexual harassment and abuse of female pupils was part of a wider issue of school-based violence, which included not only the use of corporal punishment mentioned above, but bullying and gender violence in pupil interactions. Several of the young people interviewed mentioned bullying and fighting as their main

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27 Unfortunately, during a follow-up visit a few months later, it was discovered that this pupil had since left school permanently and was married.

28 During subsequent visits, school management confirmed that the teacher had been removed from the school, but was still teaching elsewhere.
dislike about school, and out-of-school youth at Pamoza (both boys and girls) ranked this amongst the top three reasons for dropout. A few female pupils also spoke of boys’ unwanted sexual advances, both verbal and physical.

5.5.3 Stigma and discrimination in schools

School heads and representatives of SMCs at Namalongo, Kamunda and Pamoza were adamant that children from households affected by HIV/AIDS faced no discrimination at school from teachers. PEAs and school heads supported this, saying that teachers interact well with orphaned children would treat them no differently from other pupils; such views were confirmed by the young people themselves. During interviews both pupils and out-of-school youth denied, even on continued probing, that teachers had treated them any differently because of their orphan status or home circumstances. They also denied that teachers made any discriminatory comments or insulted them. Where young people reported negatively on teacher behaviour, this was related either to issues of sexual harassment or punishments perceived as unfair (see 5.5.2).

Teachers across all four schools concurred that children from HIV/AIDS-affected households should not be singled out for special attention. This was compounded by the (false) assumption that such children were most likely to be HIV positive themselves. Their comments reflected an underlying discourse that required ‘equal treatment’ for vulnerable children. One male teacher at Namalongo spoke of a training session on HIV/AIDS.

> I learnt a few things; that you need to treat every pupil equally those suffering from HIV/AIDS and others. Treat every pupil equally as a teacher and find means as a teacher so that the pupil feels the teacher treats me same as other pupils. Don’t be sorry [feel pity] as a teacher.

Maintaining a stance of ‘equal treatment’ creates a tension, however, with supporting the emotional and educational needs of such children. It may also compound feelings of rejection and low self-esteem amongst pupils. A comment by another male teacher from Namalongo illustrates this:

> And what happens with these orphans is that the moment you reprimand them on certain things, they think you are troubling them, while it’s not that. Every child is reprimanded if something goes amiss, but not with orphans, they think you are troubling them.

Key informants from school management across all schools were keen to present an image of their schools as institutions free from stigma or discrimination. All argued that pupils interacted freely with each other, and that children from HIV/AIDS-affected households were not targeted by fellow pupils. Teachers’ concerns about raising the ‘suspicions’ of fellow pupils through preferential treatment suggest a different picture, however. One female teacher at Namalongo gave the following example.
There was a time when some pupils quarrelled and one shouted, ‘get lost, you who take ARVs’… and I had to call the pupil who was shouting to find out. I advised the boy … I told him that he can be sued. But I don’t know how the boy knew of his friend’s status on ARVs.

Ironically, the increased availability of ARV medication in the rural areas has increased the visibility of affected households, potentially making them more vulnerable to stigma and discrimination. During a FGD at Duma, one teacher indicated such an occasion:

During the HIV testing week some boys went … to the centre for HIV testing and when they came back they said “so and so have been given medication that they will be taking” meaning that something has happened. We have this week - it is announced on the radio so children rush there.

At Duma, the local CBO secretary spoke of discrimination faced by pupils. She stated:

Children who live close to them might mock [them]. For example, their parents tell them that in such-and-such a family the parents get ARVs… children might mock those from the affected family, saying their parents are living on mauniti a moyo²⁹

The PEA for the area, opined that whilst discrimination at school was not common, it could “follow a child there from home.”

The majority of the young people interviewed gave examples of teasing and name-calling by fellow pupils (Table 5-2). For those from Mzimba South schools, such examples of verbal abuse were generally directly related to parents’ death from AIDS. In Phalombe, comments related to their impoverishment.

Experiences differed, however. Ten out of twenty-four of the young people interviewed stated that they had not experienced such teasing at school or, if they had, it was just by a few pupils and not to be taken seriously. None of the young people interviewed offered such discrimination as a major factor in absenteeism or dropout, or as having a significant effect on performance. However, such daily experiences of schooling are likely to contribute to feelings of exclusion, isolation and sorrow, which in turn can affect their participation. Again, the CBO secretary from Duma commented:

Because of this mockery, the children develop a negative attitude towards going to school, as the mockery makes them feel uneasy at school.

²⁹ literally, ‘life units’. A modern metaphor associating ARVs with units bought to recharge mobile phones – living on borrowed time.
### TABLE 5-2: EXAMPLES FROM YOUNG PEOPLE AFFECTED BY HIV/AIDS, REGARDING DISCRIMINATION FROM FELLOW PUPILS

<table>
<thead>
<tr>
<th>Responses</th>
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<tbody>
<tr>
<td><strong>In school</strong></td>
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<tr>
<td>Sometimes I feel sad, especially when we quarrel and they start saying ‘you don’t have your mother’…I start thinking, are these friends saying this because both their mother and father are still alive? I just keep these things in my mind and days go by.</td>
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<tr>
<td><em>Age 15 boy, Duma</em></td>
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<tr>
<td>They say, your father is dead so don’t provoke us</td>
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<td><em>Age 15 boy, Kamunda</em></td>
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<tr>
<td>They ask where my father is, they think I killed him, they also boast that their parents are still alive. They say ‘your mother died of the deadly disease’.</td>
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<td><em>Age 16 girl, Pamoza</em></td>
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<tr>
<td>They say we were pompous when our father was alive and now that we lost him and some of our wealth…they say we are now equal and others say they are better off than myself and my relatives.</td>
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<tr>
<td><em>Age 17 girl, Pamoza</em></td>
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<tr>
<td><strong>Out-of-school</strong></td>
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<tr>
<td>If you put on the same clothes every day, without washing them, bathing without body lotion or Vaseline you could not look nice… Your friends could laugh at you.</td>
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<tr>
<td><em>Age 19 young man, Duma</em></td>
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<tr>
<td>Friends would be laughing when I was in poverty</td>
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<tr>
<td><em>Age 22 young woman, Duma</em></td>
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<tr>
<td>Yes, they were saying my father died because of his own carelessness - they said my father died of AIDS.</td>
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<tr>
<td><em>Age 16 year boy, Pamoza</em></td>
<td></td>
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<tr>
<td>They were talking about my late parents, they were saying they died of AIDS, they were just envying me because I was their head girl.</td>
<td></td>
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<tr>
<td><em>Age 16 girl, Pamoza</em></td>
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</table>
5.5.4 Classroom teaching of HIV/AIDS

In classrooms, open references to HIV/AIDS, if not treated sensitively, can exclude children. One male teacher at Pamoza raised this concern in relation to HIV positive children.

Teacher: The child is positive and is in your class? Well, you can be concerned …This can affect your teaching of HIV/AIDS if the child has disclosed his/her status. You will be careful when mentioning that it’s not only AIDS that kills people, but malaria as well as cholera, but if the child has not disclosed [his/her status] each time you mention AIDS he/she will be thinking that you are talking about him/her.

Facilitator: So it means that if the child is HIV positive you can have problems teaching the topic?

Teacher: If he/she hasn’t disclosed, yes. Actually, it’s the child who will have problems. It will be like you are frightening them.

The SMC Chair at Pamoza noted:

The orphan will have problems in class, because there is AIDS information in class, so when the teacher mentions this s/he will feel as if the teacher is targeting her/him. This will make her/him feel depressed.

Observation of a Life Skills lesson at Duma school provides an example of the tone used by teachers with regard to HIV/AIDS. The following extract from field notes states:

The topic is ‘Entrepreneurship’… issues are integrated from introduction onwards. T encourages pupils to do small businesses in order to avoid prostitution, “girls should do other businesses rather than enticing men”… “behind prostitution is death”…‘Planning’ - T states that businessmen [sic] should not employ someone who is “too sexy”, if married then husbands will come and vandalise shop! [Focus appears to be on girls/women as perpetrators of prostitution and by implication spread of HIV]

…T makes further references to AIDS, which carry strong negative connotations – “killer disease”, “this sickness is the enemy of development”. [? Does this exclude children who have lost parents/mothers to this disease – constant refrain of low moral character leading to death]

Similar use of language was observed during sessions of AIDS Toto clubs at Namalongo and Duma. There is need to consider how the strong medical and moral stance of teaching HIV/AIDS topics might contribute to feelings of exclusion and isolation amongst affected children.

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30 HIV and AIDS topics are integrated in all subjects in the primary school curriculum, as a vehicle to promote awareness and HIV prevention.
5.5.5 Exclusionary policies and practice

Requirement for school uniform

As noted in Chapter 1, the requirement to wear school uniform was removed at the onset of FPE in Malawi. When asked about current Ministry policy on uniform, the PEA at Duma reiterated:

The policy is that learners are allowed to wear any clothes, shirt and shorts for boys, skirt or dress for girls. Uniform is there, but children are allowed to learn. Teachers do not send them back.

However, discussions during mini-workshops, revealed - with strong commonality across schools – that this directive was being flouted. Pupils were being sent home by teachers if consistently found not wearing uniform. Young people expressed much bitterness about this enforced absenteeism, noting that teachers had little sympathy for the difficulties they faced at home. At three of the schools – Duma, Namalongo and Kamunda – this practice was also ranked as a major reason for drop out (see Appendix 4). One female out-of-school youth from Kamunda described their experiences:

Teachers are harsh, they send children without uniform out of school. The teachers do not consider that some children are coming from poor families. They only allow the Standard One children at school without uniform… Because the children fail to get money for themselves they drop [out of school]. The children without uniforms can cry to the teachers to allow them at school, but teachers totally refuse those without uniform.

At Duma, researchers observed the school head pulling pupils not wearing uniform out of line at school assembly and then sending them home.

At Namalongo and Duma, pupils said that this practice was extended to clothes worn on Wednesday – a day when children were exempt from wearing uniform\(^{31}\) - if they were felt to be inappropriate. Similarly, pupils might be sent home if their uniform or clothes were or torn or dirty. Pupils’ embarrassment and shame at coming to school in poor clothing - possibly to face teasing from fellow pupils – is thus further compounded by teachers’ exclusionary practices.

While such practices impact on all poor families, children from households affected by HIV/AIDS can find themselves particularly disadvantaged, as they can be amongst the most impoverished and have little recourse to support for their schooling needs. Enforced and continued absenteeism can lead to eventual withdrawal from schooling. Chisomo, spoke of his own exclusion whilst at school (see Chisomo’s story, Appendix 7):

I was feeling ashamed and the teachers wanted every pupil to be in uniform so they were sending us back… I was not pleased with this because they were sending us back when we had no money to buy such things.

\(^{31}\) This is common practice in Malawian schools – allowing children time to wash their uniforms midweek.
Later he described difficulties faced by his younger brothers:

Last year they failed to go to school because of problems that we had…Whenever they went to school they were being sent back because of uniform and I had no money to buy it, so the children got disappointed. They just started herding animals since each time they went to school they would be sent back…this year I tried very hard, doing ganyu, until I bought the uniform.

Another young man, a school dropout from Kamunda, put it succinctly:

I dropped out. I did not have shirts to wear… If there were no uniforms I would have continued with school.

Whilst some teachers acknowledged the difficulties vulnerable children face finding money to buy school uniform, none reflected on their own role in the pupils’ exclusion from learning. Conversely, during discussions with teachers at Duma, the deputy-head advocated for further enforcement of the wearing of uniform, since “children don’t envy each other and all are equal.”

**Additional school costs**

As noted earlier, many households struggle to cover basic school costs (see 5.3.3). In addition, households are expected to pay for any number of ad-hoc costs levied at the discretion of the schools, thus further increasing the financial burden on households (e.g. development projects, mock exams). Several of the young people interviewed noted that teachers had sent them home because they did not have notebooks or pens. One key informant at Namalongo explained how the failure of households to make monetary contributions to the building of school blocks would result in their children being sent home. During mini-workshops at Namalongo, additional school costs were ranked as one of contributing factors to drop out by out-of-school youth.

Both pupils and out-of-school youth specifically raised the issue of extra part-time classes (private tuition) arranged by teachers in the afternoons, which had to be paid for. Orphans and other vulnerable children were not exempt from such payments, which were felt to be prohibitive and discriminatory. Only two of the twelve pupils that participated in the mini-workshops actually attended these classes, the others all said they could not afford the fee required. Those that did attend did ganyu to raise the money. Pupils complained that some timetabled lessons were cut short, only to be finished off during afternoon sessions as a means to force pupils to attend.

**5.5.6 Support provided by schools for vulnerable children**

Key informants were asked how their schools directly support the inclusion of their more vulnerable pupils. All four PEAAs acknowledged that schools provided little or no specific support for vulnerable.
Learning Support

Very little, if any, additional learning support is provided for pupils at risk of educational exclusion. Teachers’ concept of learning support was generally limited to verbally ‘encouraging pupils’ and, contrary to any sort of remedial or supplementary help, ‘treating everyone equally.’

School heads and PEAs were unable to provide details of opportunities for individual learning. Generally school heads were reluctant to allow pupils to take supplementary readers or textbooks home, and homework tasks were limited. There was no indication at any of the schools of a system in place to provide homework or notes for an absent child to ensure continuity of learning. School libraries were present at Kamunda and Pamoza (with books supplied by the National Library Service), but they were poorly housed and it was unclear how often these books were actually used by pupils. A few participants mentioned part-time classes as an opportunity for additional learning and revision, but, as highlighted above, few vulnerable children had access to these.

Psychosocial support

Earlier research into the impact of HIV/AIDS in schools in Malawi revealed that primary schools did not provide any formal guidance and counselling services to pupils (Kadzamira et al., 2001). Despite strong policy recommendations that such services be introduced, a decade later none of the schools visited in this study had any such activities in place. In reference to ‘counselling,’ key informants described incidences of teachers offering general advice on acceptable pupil behaviour and the importance of education, rather than professional, psychological support. At Kamunda, responsibilities for this were the remit of the Discipline Committee. Given cultural norms and the authoritarian nature of the schools, any advice offered was likely to be more akin to lecturing, well-meaning or otherwise, on the part of the teachers.

Teachers believed that pupils should be encouraged not to ‘think too much’ about any trauma they have faced or any ongoing difficulties, but to ‘concentrate on school’. There was no reference to opening up communication to allow children to talk through or try to resolve their problems.

I then saw that there is a big problem at their home. I just counselled them that they should not be absent from school because of this.  

Male Teacher, Duma

Specialised Training

Although all teachers were fully qualified and many had benefited from in-service training programmes, at only one school – Namalongo – had teachers received training related to HIV/AIDS. None of the teachers had received training on counselling, child rights and welfare, dealing with stigma and discrimination or the specific learning needs of orphaned and vulnerable children. One PEA noted that passing references on “how
to handle” orphaned children may have been integrated into other training seminars. Despite the important potential role played by the SMC in linking schools with parents and guardians, none of the SMC members had received any training on how to support orphaned or vulnerable children.

During interviews young people and their guardians were asked what support they had received from the school during times of difficulty (e.g. ill-health or bereavement). All from Duma, Kamunda and Pamoza schools said they had not received any assistance. At Namalongo, three of the households mentioned that they had received a one-off donation of maize (presumably through the WFP school feeding programme). Two boys from Namalongo noted that teachers had assisted by ‘telling them not to be absent.’

School heads at Namalongo and Pamoza suggested that extra-curricular clubs provide encouragement and empowerment for young people, including those made vulnerable by HIV/AIDS. At Pamoza, the school head described one such club, a youth club that included training in a range of vocational activities. Unfortunately the patron for this club was the same teacher identified as responsible for sexually harassing female pupils. It is also worth noting that of all the young people interviewed only one was a member of any extra-curricular club – an anti-AIDS club at Namalongo.

5.5.7 Identification, monitoring and follow-up

The identification and monitoring of vulnerable children with poor participation and attendance, and at risk of permanent dropout requires accurate record-keeping. Namalongo and Duma schools were able to provide lists of orphaned children on request, taken directly from school records. At Namalongo such records were a requirement of their school-feeding programme. At Mzimba South schools, however, there was little evidence of schools keeping accurate, up-to-date records. None of the schools kept records on other groups of pupils made vulnerable by HIV/AIDS, such as those caring for sick parents or staying without adult support, nor any other vulnerable group, such as children with disabilities.

In all school catchment areas additional information on households affected by HIV/AIDS, was kept by local CBOs and HSAs. However, there appears to have been little attempt share information with the schools. In addition there was little evidence of links between schools and Village AIDS Committees (VACs).

At all schools, records of pupil attendance were poorly kept. Although registers were available few appeared to be regularly up-dated. In this there was much variation between individual teachers within the same school.

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32 'Mphamvu kwa Chinyamata’ (MKC) funded by the USAID MTTA programme,

33 A worrying concern raised by some district-level key informants was that some schools tend to inflate figures for orphans in their EMIS statistical returns in the hope of benefiting from current or future programmes to support orphans.
with some keeping records up-dated daily, others – on inspection – had not filled in information for the entire term. This suggests a lack of supervision by school leadership. Registers did not record the personal circumstances of children (e.g. orphan status), thus schools could not easily track the attendance of vulnerable children, even if registers were kept up-to-date. At two schools – Duma and Namlongo – reasons for absenteeism were recorded in some registers. At none of the schools were reasons for dropout recorded.

Follow-up of individual children identified as regularly absent or at risk of permanent dropout appears to have been done in a fairly ad-hoc way at some schools, whilst almost non-existent at others. At Duma, the school head said that parents or guardians were called to the school to explain why their child had been absent. The example he gave, however, was more akin to calling a general PTA meeting, rather than individual consultations. All of the young people interviewed at Duma said that they had never been visited, neither when absent nor when they left school permanently. At Namalongo there was a similar picture, although one young woman said she had been visited by teachers when pregnant and advised to return to school after the birth of her child.

Kamunda and Pamoza presented a mixed picture. There some teachers making the effort to visit households on hearing of bereavement or if a child had reported sick. But in other cases guardians noted that teachers would simply enquire after an absent child if they “happened to meet on the road”. Worryingly in two cases at Kamunda, guardians of out-of-school youth said that when teachers had visited following an extended period of absenteeism, they advised their children not to return to school.

It appears that much of the impetus to follow-up on a child lies with the individual teacher. Thus, teacher motivation plays an important role. One male teacher at Pamoza commented, “We are few, so after knocking off, for you to get prepared and go therefore to visit the child, it is difficult.” Discussions with teachers indicated that when they wished find out the reason for a child’s absence this was often done after the child’s return to school. An alternate strategy was to assign SMC members to visit pupils who reside in their own villages. However, this appears to have been very limited in practice.

5.6 TOWARDS A CONCEPTUAL FRAMEWORK

Discussions with vulnerable children and young people described in this chapter, revealed, in many cases, a series of events and shocks that impacted negatively on their schooling, such as ill-health of parents or guardians, household impoverishment, multiple deaths and re-location. How young people responded to such events varied between individuals. In some situations, critical events and their accompanying psychosocial effects would result in distinct, de-limited periods of erratic attendance and/or temporary withdrawal from
school, followed by a return to more regular schooling. For other young people, the cumulative impact of such events would lead to permanent drop out from school. For those who are able to maintain regular attendance during times of crisis or changed family circumstances, findings indicated that the psychological impact of HIV/AIDS (such as grief, anxiety and low confidence) affected their participation and performance in class.

Findings presented in this chapter illustrate that, within the contexts of poor, rural communities, the extent to which children made vulnerable by HIV/AIDS experience educational exclusion depends on a range of factors operating at (1) household and community, (2) school and (3) psychosocial levels (both individual and peer-related). Although these spheres of influence (see 5.1) are represented graphically as distinct from each, they frequently overlap, with factors converging to reinforce and compound constraints on access to learning. Issues of discrimination were present in household and school situations. Early entry into marriage was often strongly influenced by household and community pressures, but was of ultimate consequence at the individual level: marking children’s permanent exit from school. Coping strategies at the household and individual level were also important influences, but ones that could both hinder and support retention.

Drawing on empirical findings, this conceptual framework includes factors that can positively influence access or, if strengthened, play a useful supportive role. This has been an invaluable outcome of the research findings, and one that addresses an important gap in the reviewed literature where a deficit approach to addressing access tends to dominate (Chapter 2). These constraining or supportive factors in turn intersect with children’s characteristics (e.g. gender, position in household, age), and children’s ability to access external support (e.g. community care, social protection programmes).

Critically, the conceptual framework shown in Figure 5-2 below not only highlights important economic and demand-related factors that dominate much of the reviewed literature, but also includes social processes, both positive and negative, that can influence access (Kabeer, 2000; Lewin, 2007a; Rose, 2003). A key finding has been the importance of informal social networks and other positive, psychosocial influences. Furthermore - as older children and adolescents - personal agency and resilience appear to have played a contributing role, influencing a number of decisions regarding their continued schooling. Inclusion of factors at the peer and individual level addresses another important knowledge gap, one found in the literature from Malawi and reflective of current models for promoting inclusion. This is discussed further in Chapter 9.
FIGURE 5-2: EMERGING CONCEPTUAL FRAMEWORK OF FACTORS INFLUENCING EDUCATIONAL ACCESS AND RETENTION OF CHILDREN AFFECTED BY HIV/AIDS IN RURAL MALAWI

Identification and access to external support:
- orphan-care/community-based programmes
- social-cash transfers
- Targeted take-home rations

Constraining Factors

School-related:
- School costs
- School capacity & teacher motivation
- Poor monitoring & follow-up
- Authority, discipline & abuse
- Teacher attitudes to HIV/AIDS

Individual & psychosocial
- Teasing & isolation
- Psychosocial problems
- Peer pressure & envy
- Transactional sex & pregnancy
- Ill-health and disability

Family & community:
- Family crises, ill-health & bereavement
- Poverty & food insecurity
- Household responsibilities & adult roles
- Lack of family support
- Discrimination & social exclusion

Educational Access & Exclusion

Participation & progress

Disengagement

Erratic Attendance

Temporary Withdrawal

 dropout

Supporting Factors

Family:
- Remittances for school costs
- Encouragement
- Children’s work supplements school needs

Teachers:
- Equal treatment of OVC
- Teachers as role models to motivate learners

Individual & psychosocial
- Social networks
- Attitudes to education
- Self-motivation
- Resilience

Pupil characteristics
- Age
- Gender
- Position in household
5.7 Chapter Summary

This detailed chapter has presented key issues emerging from a cross-case analysis of factors influencing the access and retention of children from households affected by HIV/AIDS. In exploring the circumstances and challenges faced by vulnerable children, this analysis has focused on meso-level factors directly associated with pupils’ participation in primary school, and on young people’s reasons for dropout. The chapter has shown that the impact of morbidity and death associated with HIV/AIDS on children’s schooling is multifactorial and often cumulative, with children’s education put at risk by multiple shocks. However, it has revealed how educational exclusion can be dynamic, with changes in circumstances or additional supportive factors promoting a greater participation. This echoes the conceptualisation of wider social exclusion as a two-way continuum (Silver, 2007), and highlights how timely and appropriate intervention has the potential to reverse the risk of permanent dropout.

The findings presented in this chapter show that there can be complex and sometimes competing influences at play, as children’s and families’ coping strategies, schools’ expectations and social and cultural dynamics contribute to decisions surrounding pupils’ schooling. The conceptual framework presented above (see Figure 5-2) indicates that the extent of the impact of HIV/AIDS is dependent on several inter-locking considerations, including: household composition and circumstances, children’s household responsibilities, their gender and position within the household, children’s motivation and individual resilience to times of trauma, and the availability of both material and emotional support for their schooling. Schools’ exclusionary practices, ethos and environment can present barriers to learning, and outreach to vulnerable children was erratic at best. The interplay between constraining and supportive factors was critical in building understanding of the dynamics of pupils’ participation and retention, and had important implications for developing strategies to intercede, address barriers to learning and support retention.

Identified barriers were both specific to the impact of HIV/AIDS on households and individual children (e.g. bereavement, trauma, care-giving, stigma and discrimination and lack of adult care and support), as well as more general constraints on pupils’ access to learning and retention, which could have a disproportionate effect on children made vulnerable by HIV/AIDS (e.g. food insecurity and poverty, school costs, poor learning environments and violence and intimidation in schools). Such findings suggest that whilst general changes to increase the accessibility and quality of schools for all groups would benefit children affected by HIV/AIDS (UNESCO, 2010), promoting their retention requires educational responses that acknowledge their specific disadvantages and needs. A brief discussion of how these and other implications from this first stage of the research were used to develop and adapt a school-based intervention can be found in Chapter 6.
PART IV: The Intervention

CHAPTER SIX: DEVELOPMENT AND IMPLEMENTATION OF THE INTERVENTION

This section of the thesis discusses the intervention. This first chapter, Chapter 6, introduces the SOFIE model, its development, adaptation and implementation during the intervention in Malawi.

6.1 CHAPTER OVERVIEW

This chapter bridges the previous chapter with subsequent chapters that present findings from the intervention (Chapters 7 and 8). It describes the process of development of the SOFIE model and its adaptation for the Malawi context. It also provides a description of the intervention’s key strategies and components, the extent of their uptake and the fidelity of the implemented model.

6.2 DEVELOPING THE SOFIE MODEL

6.2.1 Developing the model

The SOFIE model was intended to help mitigate some of the key challenges faced by children made vulnerable by HIV/AIDS, intervening to address consequences for their educational access. Its purpose was to promote a flexible approach to education provision, utilising ODL strategies and resources to deliver the curriculum more flexibly, enrich formal schooling and, through this process, disrupt patterns of educational exclusion and dropout. Self-study guides were combined with opportunities for face-to-face support, collaborative learning and peer mentoring. Further strategies were included to mobilise a range of stakeholders at school and community level, and build their capacities to support vulnerable learners at risk of dropping out of school or failing to progress to the next grade. Attention was paid to the promotion of enabling conditions for the intervention the provision of training and materials to support teachers’ monitoring of vulnerable pupils.

The development of the SOFIE model was informed by research literature, findings from country case studies and a series of consultations at regional, national and local levels. The rationale for this intervention model was informed by literature in the fields of education, development and health-related responses to HIV/AIDS mitigation (see also Pridmore and Yates, 2006). Its development built on lessons learnt from ODL
programmes and innovative, flexible approaches to enhance access and effective learning for underserved groups\textsuperscript{34}. Several of these have been reviewed in Chapter 3.

Of particular influence was the \textit{Esceula Nueva} programme. Supported by earlier literature (Boler and Carroll, 2003; Pridmore, 2008b), the project team drew on this programme’s use of modular self-study learner guides as a means to help children affected by HIV/AIDS when unable to attend school regularly. Also considered were the successes and limitations of ‘caring schools’ initiatives (Williams, 2010) and complementary education programmes provided through community schools (DeStefano \textit{et al.}, 2006).

In Malawi, adaption of the SOFIE model drew on two particular projects of interest:

- The USAID-funded PSSP-SFP pilot designed to increase access to quality primary education, particularly amongst orphaned and vulnerable children (USAID/Malawi, 2008b). One component of this programme felt to have possibilities for the SOFIE model was the recruitment of youth volunteers to work with school clusters to coordinate extra-curricular activities and group learning.

- The Malawi government’s Complementary Basic Education (CBE) programme that delivers an equivalent primary curriculum to out-of-school children through low-cost, community-based learning centres, run by trained secondary school leavers (Allsop and Chiuye, 2010).

These suggested that it was feasible to intervene through primary schools and to reach out to vulnerable learners using flexible approaches to learning with support from community volunteers.

A critical first step in developing the model was face-to-face discussions amongst project team members during the first team workshop hosted by the South African Institute of Distance Education (SAIDE) in Johannesburg in September 2007. Participants had the opportunity to highlight issues arising from reviews of the literature, share local knowledge and discuss implications for the design of the intervention. The team also met with representatives of South African initiatives that support children affected by HIV/AIDS. This included the ‘Circles of Support’ project developed by the Soul City Institute and rolled out to several SADC countries (see Chapter 3). Concepts of mobilised support networks within school communities were adopted and extended by the SOFIE project to include youth volunteers and school-based peer support (buddies).

\textsuperscript{34} As part of this review process a series of background papers were produced and consultations held at regional and national level. As a member of the SOFIE project team I was able to benefit greatly from participating in these activities, as well bring my own experiences of research in Malawi to the table.
A second project workshop was held in Malawi in June 2008. At this, a visual representation of the proposed model developed by the team leader, Professor Pat Pridmore, provided a focus for discussions (see Figure 6-1). Team members discussed implications from the first phase of the field research - both from Malawi and Lesotho - and key components of the final model were agreed upon: a ‘school-in-a-bag’ containing self-study guides, a buddy system, after-school clubs run by youth volunteers, training for teachers and community action.

©SOFIE PROJECT

6.3 Adapting the SOFIE Model for the Malawi Context

The first phase of the field research revealed a range of inter-locking factors at the household, school and individual level that, in the context of HIV/AIDS, constrain children’s access to upper primary schooling and can lead to permanent dropout (see Chapter 5: Figure 5-2). Findings confirmed the poor provision of support for orphaned children and others affected by HIV/AIDS in schools, compounded by exclusionary practices.

35 This was presented at the Fifth Pan Commonwealth Conference on Open and Flexible Learning in London in July 2008 (http://www.pcf5.london.ac.uk/programme). This provided another valuable opportunity for feedback and critical comment.
and inadequate monitoring and follow-up. This underlined the importance of building capacity amongst stakeholders (e.g. in record-keeping, pastoral support), included in subsequent training workshops. Analysis also revealed important supportive factors that can have a positive influence pupils’ access to education. These findings highlighted specific means and opportunities for the intervention in Malawi to address pupils’ engagement and continuation in school.

Working within a transformative framework, it was important to gather local perspectives on the development and adaptation of the model, particularly from those likely to be involved in any future implementation (Mertens, 2007). Suggestions from participants collected during the case studies’ fieldwork informed the model design and provided insight into potential challenges for future implementation. During the June 2008 workshop, an early version of the model was discussed with school heads from the four schools that had participated in the case studies, and also with school and community representatives and pupils during a visit to one of the schools. 36

Participants’ comments, recommendations and concerns – both anticipated and unanticipated – were invaluable during these final stages of the model’s adaptation for Malawi and highlighted issues that would need particular attention during training activities. Discussions with school heads revealed tensions between a reported desire to assist vulnerable pupils and the perception that the SOFIE model was ‘rewarding’ pupils for poor attendance. Discussions also re-iterated an anticipated concern amongst team members that understaffing and low motivation amongst teachers would limit the extent to which they would involve themselves in project activities. Using support from communities to address this potential gap was seen as a viable option, although any discussion of community involvement raised debate about the need for incentives.

During August and September 2008, further consultations were held with key informants at national and district level. Key informants included Ministry of Education officials and representatives of donor-funded state and NGO-run basic education programmes, (including the PSSP-SFP pilot and CBE programme mentioned above), as well as district-level education and community development officers. The district-level visits also served to maintain links established during previous visits, build ownership and plan for research and implementation activities.

36 These later activities also provided me with the opportunity to present the main findings from phase one, gather feedback and discuss the implications of the initial research; strengthening the validity of the findings.
The final model was introduced during training activities for school and district level participants and the intervention implemented over one school year (January to November 2009) in 20 primary schools in Mzimba South and Phalombe.

6.4 THEORY OF CHANGE

The SOFIE model uses self-study guides to enhance the flexibility of educational provision and help improve vulnerable children’s access to learning during times of crisis, or when household responsibilities and work disrupt regular school attendance. These and the other learning materials provided in a school-in-bag also reduce school costs, which may also reduce absenteeism and exclusion from class. After-school clubs run by youth volunteers can further increase opportunities for learning and provide additional learning support, allowing children to improve their knowledge and skills and catch-up with fellow class-mates. A buddy system reinforces this learning support and can help children improve social interaction skills; whilst trained youth volunteers and teachers can provide psychosocial support. This, in turn, can provide encouragement and emotional support, and reduce isolation and anxiety, thus improving their participation in school activities. This may ultimately contribute to achieving positive educational outcomes (Chitiyo, Changara and Chitiyo, 2008). The model also mobilises community members to identify and support vulnerable children through small actions that can improve their well-being and retention at school. Working with teachers and school management to identify policies and practices at school that present barriers to the full participation of vulnerable children, in particular those affected by HIV/AIDS, will help promote a more inclusive school environment.

6.5 IMPLEMENTING THE INTERVENTION

During training activities and evaluation workshops in Malawi, it proved useful to visualise the adapted SOFIE model as a ‘core’ of ODFL elements (e.g. resources for independent study, a buddy system, clubs for collaborative learning and support) within wider strategies to strengthen the capacity of schools and communities to support vulnerable learners and build an ‘enabling’ environment for successful implementation (see Figure 6-2).

This section describes these key components in more detail, and the extent to which they were implemented.
6.5.1 Training
Training activities were conducted in target districts in January 2009. District, school and community-level participants were familiarised with the SOFIE project in an initial one-day workshop; and further training was provided for teachers and club leaders, including counselling skills, the use of SOFIE resources and monitoring and record-keeping (See Appendix 9 for details). Training resources included the club leaders’ manual and a manual on adolescent counselling and HIV/AIDS. Teachers and club leaders were provided with an at-risk register and sets of monitoring forms to monitor and follow-up pupils identified as at-risk.

6.5.2 Identification and registration of at-risk pupils
A key issue in the design of the intervention was how to identify children made vulnerable by HIV/AIDS who were at risk of educational exclusion. Research literature and the case studies conducted for this study suggested that orphan status should not be the only criterion for targeting such children. Evidence from the earlier fieldwork had found that periods of chronic ill-health of a parent or guardian could cause significant disruption to children’s schooling. Furthermore, the death(s) of relatives outside the immediate family also impact on a pupil’s access to learning, through the withdrawal of material or emotional support. Thus it was deemed important to build consensus on a wider definitions of vulnerability – and to avoid being overly prescriptive.
A set of guidelines was developed during training workshops with school and community representatives (see Appendix 10). These included household circumstances (with a focus on orphaned children, but also those living with elderly, infirm of chronically-ill adults or in sibling-headed households), as well as school-related factors (repetition, irregular attendance and poor participation and performance) and welfare and discrimination (hungry, poorly dressed, lacking school materials, withdrawn and socially isolated).

For each participating school, resources were provided for a maximum of 15 at-risk pupils in Standard 6. Pupils were identified by a community-appointed SOFIE sub-committee. Overall, 259 pupils were registered, making up 9.4% of all Standard 6 pupils in the 20 schools implementing the intervention. Table 6-1 shows that greater numbers were selected in Phalombe district (152 pupils) compared to Mzimba South (106 pupils). Approximately equal numbers of girls and boys were registered in Phalombe district. In Mzimba South, fewer girls were registered than boys (just 38.7% compared to 61.3%).

**TABLE 6-1: FREQUENCY AND PERCENTAGE OF AT-RISK PUPILS, BY GENDER & DISTRICT**

<table>
<thead>
<tr>
<th>At-risk pupils</th>
<th>Female</th>
<th>Male</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mzimba South</td>
<td>41 (38.7%)</td>
<td>65 (61.3%)</td>
<td>106</td>
</tr>
<tr>
<td>Phalombe</td>
<td>76 (49.7%)</td>
<td>77 (50.3%)</td>
<td>152</td>
</tr>
<tr>
<td>All schools</td>
<td>118 (45.2%)</td>
<td>143 (54.8%)</td>
<td>259</td>
</tr>
</tbody>
</table>

Whilst no specific stipulations had been made regarding the proportion of boys and girls to be registered, this finding was surprising given frequent references by participants to the greater vulnerability of girls, especially orphaned girls, and their higher risk of dropout (see Chapter 5).

None of the Mzimba schools registered the maximum of 15 pupils, and 5 schools registered less than 10, with resources remaining unused. Over a quarter of all at-risk pupils (28.6%) were registered in the second term, following a later distribution of remaining resources. A small number of pupils were not registered until the third term (9.4% from Mzimba; 3.9% from Phalombe), replacing pupils who had dropped out or transferred.

6.5.3 ODFL resources and activities

**School-in-a-bag**

On registration, all selected pupils received a ‘school-in-a-bag’: a small, waterproof back-pack containing textbooks, pens and notebooks and a set of self-study learner guides (see Table 6-2).
Study guides

The self-study guides, developed for the SOFIE project, were designed to ‘wrap-around’ the Standard 6 government textbooks, allowing pupils to keep up with the taught curriculum, even when out of class. They were designed to allow independent study and consistent access to learning for pupils whose attendance may be erratic (e.g. working children or care-givers). To address concerns over poor reading skills in English of some learners, selected instructions were also translated into the local language, Chichewa.

<table>
<thead>
<tr>
<th>School-in-a-box</th>
<th>School-in-a-bag:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Club leader manual</td>
<td>• Waterproof bag (rucksack)</td>
</tr>
<tr>
<td>• Self-Study guides (English &amp; Mathematics)</td>
<td>• Self-study guides (English and Mathematics)</td>
</tr>
<tr>
<td>• Grade 6 Textbooks (English &amp; Mathematics)</td>
<td>• Grade 6 Textbooks (English and Mathematics)</td>
</tr>
<tr>
<td>• Supplementary readers on child rights, child labour and gender violence</td>
<td>• Notebooks and pens</td>
</tr>
<tr>
<td>• HIV/AIDS board game ‘Choices &amp; Decisions’, Writing materials</td>
<td>• Ruler</td>
</tr>
<tr>
<td>• Football</td>
<td></td>
</tr>
<tr>
<td>• Wind-up Radio</td>
<td></td>
</tr>
</tbody>
</table>

All groups at evaluation workshops agreed that the format of the study guides was clear and easy to use. However, the majority of the groups (13 out of 16) stated that pupils needed support from others in order to work through the guides on their own: support provided for in the SOFIE model by club leaders and buddies. Answers to given exercises were included in the guides, causing some initial concern that pupils would simply copy these - making it difficult to assess pupils’ progress. To address this, several schools decided that pupils would not write directly in the guides as designed, but would first write exercises in their notebooks, before referring to the guides.

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37 The guides were written by volunteer students at the Institute of Education, under the training and supervision of project staff. Proof-reading and translations were carried out by staff and students at my own institution: Chancellor College, University of Malawi.

38 Details of this educational board game are available at http://www.choicesanddecisions.co.uk
SOFIE clubs

Youth volunteers were recruited by a committee of school staff and community members. All youth came from within the schools’ catchment areas and ranged in age from 20 to 31 years. The majority (80%) held a Malawi School Certificate of Education (MSCE), a minimum of 4 years secondary schooling; the remainder held the Junior Certificate of Education (JCE). Six (30%) of the volunteers selected were female. All but one of the club leaders participated for the full year.

The purpose of the clubs was to provide additional opportunities for pupils to work through their study guides and to receive face-to-face tutoring and learning support in a friendly, fun and informal environment – also addressing some of the pupils’ emotional and social needs. A key finding from this study was the importance of pupils having someone to provide active encouragement for their schooling (olimbiktsa). It was hoped that for those lacking family support, these clubs would provide a forum where pupils could receive such encouragement and motivation. Youth volunteers were encouraged to listen to pupils’ problems and concerns, provide emotional support and to facilitate extra-curricular activities to promote healthy life skills. Although
approaches to leading the clubs varied, in general youth volunteers were viewed as sympathetic, approachable and supportive (see below).

To set up and run these clubs each youth volunteer received training, a club leader’s manual and a portable resources kit - a ‘school-in-a-box’ containing learning materials, books and games (see Table 6-2). The youth volunteer received a bicycle to transport him/herself to the club venue, support other SOFIE activities and to provide an incentive to sustain commitment. Buddies were also invited to attend the club meetings and share in activities.

The clubs met on or near school premises either after-hours or at the weekends, at times agreed by the pupils. Club meetings were held regularly over the school year, ranging from 18 to 36 meetings per school (M=30) (Table 6-3). Attendance of at-risk pupils at clubs was varied, with absenteeism an ongoing problem for some, particularly in the latter half of the year. For some pupils, the number of clubs attended depended on when they had first registered (i.e. in term 1, 2 or 3), but for others the pattern of attendance remained sporadic. In a few cases pupils withdrew completely, due to their transfer out of the school or dropout. On average, pupils attended between 17 and 20 club meetings over the school year (under two-thirds of all meetings held), with no significant difference according to gender or district\(^39\). Reasons for poor attendance are discussed in 7.5.4.

**TABLE 6-3: NUMBER AND PERCENTAGE OF CLUB MEETINGS ATTENDED, BY GENDER AND DISTRICT**

<table>
<thead>
<tr>
<th>Club meetings</th>
<th>Mzimba South</th>
<th>Phalombe</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
<td>Male</td>
<td>Total</td>
</tr>
<tr>
<td>No of club meetings attended (mean)</td>
<td>16.6</td>
<td>17.1</td>
<td>16.9</td>
</tr>
<tr>
<td>Percentage of club meetings attended (mean)</td>
<td>(58.6%)</td>
<td>(60.4%)</td>
<td>(59.7%)</td>
</tr>
</tbody>
</table>

**Buddy system**

Buddies (mentor pupils) were selected by teachers to act as a link between schools and at-risk pupils: providing encouragement and support for learning; following them up when absent and, if required, carrying self-study guides to and from school for marking and assignment of further tasks. Buddies accompanied at-

\(^39\) Non-parametric tests were run for gender (Mann-Whitney test statistic = 7592.5, \(p=0.361\)) and district (Mann-Whitney test statistic = 6974.5, \(p=0.119\))
risk pupils to club meetings. The number of buddies recruited per school varied greatly – from 2 to 10 buddies – so that at some schools pupils were partnered in pairs, whilst at others buddies were responsible for several at-risk pupils.

Overall, 119 buddies were initially recruited, although several withdrew during the course of the year. In Phalombe over two-thirds (68.0%) of buddies were male, and the majority (88.0%) were fellow pupils in Standard 6. In Mzimba, girls were recruited in greater numbers than boys (58.0% and 42.0%, respectively) and almost two-thirds (62.8%), drawn from higher grades. One consequence of this – that perhaps should have been anticipated - was higher levels of withdrawal of buddies from SOFIE activities in Mzimba. Of the 23 pupils that withdrew in Mzimba, over three-quarters (76.2%) were Standard 8 pupils who had sat their final exams early in the third term and were no longer required to attend school. In Phalombe, 6 buddies withdrew, with teacher records noting their frustration at a lack of incentives (see 7.5.3).

6.5.4 Promoting an enabling environment

Clubs, the buddy system and the use of self-study guides were designed to be an integral part of schools’ activities. Teachers were expected to work hand-in-hand with club leaders, as well as other community volunteers. Strategies to promote an enabling environment for these core ODFL activities were built into the intervention.

Record-keeping, monitoring and follow-up

During the case studies, inadequate record-keeping and follow-up of absentee pupils was found to be a particular constraint to supporting vulnerable learners. As noted previously, training in record-keeping, an at-risk register and a set of simple monitoring forms were provided for teachers and club leaders. Class registers for recording attendance were distributed to all schools with on-site training provided in their use.

In the vast majority of intervention schools (90%), Standard 6 teachers regularly up-dated class registers, an increase from just over two-thirds (65%) in 2008. The majority of intervention schools (80%) also kept up-to-date registers of at-risk pupils, which included comments on their participation and progress – both in class and with tasks set in study guides. All schools, including control schools, kept track of additional information on their pupils, such as orphan status.

40 A set of notebooks and pens were provided for all buddies. However, these resources appear not to have been distributed in Phalombe schools.

41 Distribution of class registers took place during the pre-test survey in November 2008.
Teachers were also expected to mark pupils’ work in the self-study guides regularly (every two weeks). However, school checklist data shows that this was only implemented in 14 schools (5 Phalombe schools and 9 Mzimba schools). In all but one of the Mzimba schools club leaders were also involved in marking study guides, on occasion solely responsible for this task.

Schools – working with community members - were encouraged to follow up children frequently absent or performing poorly. Thirteen of the intervention schools reported actions to follow up at-risk pupils absent from class. In some instances these actions also extended to other pupils. According to data from evaluation workshops, such actions predominantly involved home visits to pupils and/or their guardians.

**Community involvement**

Community involvement was encouraged through the setting up of SOFIE sub-committees at each school. The committees ranged in size from just 3 members to 13 members (M = 8). Membership included the school head, Standard 6 teacher and youth volunteer, as well as community representatives either drawn from existing school committees (the SMC and PTA) or seconded/elected from the wider community. At none of the schools was the suggestion that a pupil representative should sit on the committee taken up. The majority of committee members were male (59.7%), reflecting their predominance in staffing positions at the schools. All but two of the SOFIE sub-committees remained in place throughout the school year, meeting a minimum of once a term (M = 4 per year).

Sub-committees were expected to carry out the selection of at-risk pupils to join SOFIE clubs, monitor SOFIE activities and follow up at-risk pupils. In conjunction with the SMC, SOFIE sub-committees were also responsible for exploring ways of improving school and community support for pupils’ welfare. Just under half of all schools (8 schools) initiated small-scale fund-raising to support SOFIE club members – either through making contributions themselves or through income-generating activities. This was more common in Mzimba schools than in Phalombe, where only 2 schools made attempts at fund-raising. **Textbox 2** lists examples of community actions to support vulnerable pupils, as described during evaluation workshops and school visits.
Fourteen intervention schools (8 in Mzimba and 6 in Phalombe), took steps to inform and mobilise community members with regard to the project. A common strategy involved the school head calling community members to gather at the schools; a familiar practice used when a meeting of the PTA was required. Community representatives of school management (e.g. the SMC chair) were also involved in facilitating these meetings. At some schools, meetings were used to call for volunteers to sit on the SOFIE sub-committee; at others these sub-committees were already in place. At several schools the meetings were also used to explain the criteria being used to select the at-risk pupils. Although participants were keen to attest that the SOFIE project was warmly welcomed by surrounding communities (at least initially), securing community support and active involvement threw up several critical challenges. (This is discussed in more detail in 7.5).

**Counselling and pastoral care**
All Standard 6 teachers and club leaders received training in counselling skills and working with young people from HIV/AIDS-affected households. However, the extent and nature of the counselling used in practice was somewhat at odds with that advocated during training. During evaluation meetings, representatives of only 12 out of the 20 schools stated that they had made formal provision for counselling at-

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**Textbox 2: Actions by community members to support vulnerable pupils.**

- Contributions paid by committee members to raise funds for ‘at-risk’ pupils.
- SMC cut down blue-gum trees and grass and sold these to raise funds for the SOFIE committee to assist pupils.
- Fundraising activities to provide porridge for vulnerable pupils
- ‘At-risk’ pupils provided with extra pens and notebooks.
- Flour and money contributed and distributed to those vulnerable.
- Community & club leader assisting ‘at-risk’ children with pens and soap
- Fundraising (buying and selling sugar) to buy soap for vulnerable pupils
- SMC committee chair bought uniform for ‘at-risk’ pupils.
- SOFIE committee paying ‘at-risk’ pupils’ contributions to the schools’ feeding programme/exempt from school costs.
risk pupils. A more common strategy was for participants to work with groups of young people, rather than on a one-to-one basis (see 7.3.3).

Re-examining policies and practices
The case studies highlighted exclusionary school-level policies and practices - compounded by an authoritarian school culture - that had a negative impact on the educational access of vulnerable children (see 5.5.5.). Schools were encouraged to address these issues; and space was provided during training sessions for teachers and school management to reflect on how to make their schools more inclusive. This included training activities to raise awareness of child rights and promote positive gender values.

TABLE 6-4 SCHOOL CHANGE TO ADDRESS EXCLUSION

<table>
<thead>
<tr>
<th>School policy and guidelines</th>
<th>School and classroom practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uniform not compulsory</td>
<td>Sitting pupils in mixed ability groups to promote learning and cooperation (unity)</td>
</tr>
<tr>
<td>Not sending pupils back who have no uniform, but call parents and reason with them.</td>
<td>Teachers using T/L materials for motivation</td>
</tr>
<tr>
<td>Formulation of school rules to curb discrimination against vulnerable learners</td>
<td>More frequent assignments for vulnerable pupils to help improve performance</td>
</tr>
<tr>
<td>Enforce strict rules on bullying and bad language</td>
<td>Encourage group work so that vulnerable learners can learn from others</td>
</tr>
<tr>
<td>Re-admission policy allowing pupils to return to school if they did wrong unknowingly</td>
<td>Discrimination curbed through regular sensitisation</td>
</tr>
<tr>
<td>Latecomers not sent back as punishment, but given work to do after class.</td>
<td>Punctuality and absenteeism addressed by drama displays by club members and choirs during assembly</td>
</tr>
<tr>
<td></td>
<td>Participation in games like football</td>
</tr>
</tbody>
</table>

Just under half of all intervention schools took steps to promote greater inclusion through amending exclusionary school-level policies (9 schools) and addressing issues of discrimination and classroom practice (8 schools). Table 6-4 lists examples given during evaluation workshops.

6.6 Chapter Summary
This chapter has provided an overview of the processes involved in the development of the SOFIE model, and its subsequent adaptation for the Malawi intervention central to this study. It has highlighted several key influences from existing literature and practice, both internationally and within Malawi. The implemented model has been presented in some detail, and key inputs and quantifiable outputs described. These related to (1) core ODFL elements and (2) strategies to open up access and build an enabling environment for the intervention.
Findings indicate that core activities to support flexible learning were consistently implemented in intervention schools. All 20 schools registered at-risk pupils and distributed resources, set up a ‘buddy’ system, recruited youth volunteers and hosted regular club meetings. The majority of schools also monitored the participation and progress of at-risk pupils and, to a lesser extent, made provision for learning support and counselling. There was a lower uptake of strategies to promote a more inclusive and enabling environment within schools.

Several differences were observed between the two districts. In Phalombe there was limited involvement of communities in resource mobilisation to support vulnerable pupils, a greater number of teacher transfers (that may account for lower adherence to activities such as marking of study guides), and buddies were not provided with incentives. Such differences have implications for the fidelity of the model in the respective locations, and the relative success of the intervention within districts.

Further exploration of the perceived benefits and challenges of the implemented intervention is presented in Chapter 7.
Chapter Seven: Benefits and Challenges of Implementing a Flexible Learning Model of Schooling

Chapter 7 presents further findings in relation to the intervention and addresses the second research question:

In what ways can a flexible model of schooling benefit orphaned and vulnerable children in high HIV prevalence communities in rural Malawi and support their access to learning and retention? What challenges might be faced?

7.1 Chapter Overview

This study examines the successes and challenges of implementing a model of flexible schooling, and its potential for improving access to learning for vulnerable children in high HIV prevalence communities. The purpose of this chapter is to offer insights into the implementation of the developed intervention model, grounded in the specific contexts of schools in rural Malawi. The findings presented here build on the process and output data presented in Chapter 6. This chapter draws on qualitative data gathered during post-intervention visits to the four case-study schools and evaluation workshops. Thus, this chapter ‘unpacks’ key processes and highlights the perceived benefits of the schools’ engagement with the intervention. This discussion is structured according to the ‘core’ and ‘enabling’ components of the intervention model. The remainder of this chapter highlights challenges faced by participants in implementing the intervention.

7.2 Core ODL Resources and Activities

7.2.1 School-in-a bag

Key informants across all four case-study schools noted the importance of the ‘school-in-a-bag’ in providing vulnerable pupils with their own materials (textbooks, study guides). Against a context where schools did not guarantee textbooks for every pupil, this was seen both as important in easing the “scramble for books” during class time, and allowing study at home. One community member from Duma stated:

The school-in-a-bag gives the pupils a chance of going through books during their own time at home. The textbooks that we get from the government are not enough to be distributed to every child… most of the pupils had no books for home study.

The school-in-a-bag was also viewed by participants as being of important intrinsic value. Key informants across all four case schools emphasised the importance of the bags (small, waterproof backpacks) for the safe-keeping and protection of school materials. This was also the consensus of pupils, most of whom had no
means of carrying their notebooks, except by “just picking our books in our hands”, as one girl from Pamoza noted. Participants also described how receiving the ‘school-in-a-bag’ helped address the burden of school costs on households, although a few suggested that the materials included were not sufficient (below).

Several interviewed pupils readily acknowledged a financial benefit. One 14 year-old girl stated:

The bags [school-in-a-bag] have assisted us, as we now have books, pens and bags that guardians could not afford to buy...we lacked these before SOFIE came. (female pupil, Duma)

The headteacher at Duma went so far as to suggest that this provision of school materials could reduce girls’ exposure to risky behaviour, such as transactional sexual relationships:

Different ways of getting the money to buy notebooks can lead them [girls] to contract HIV, but the coming of SOFIE has really managed to keep them away from these dangers.

Another theme emerging from discussions with participants across schools was how the provision of the ‘school-in-a-bag’ and other SOFIE resources had strongly motivated pupils, resulting in a renewed interest in school. Community representatives from Namalongo and Pamoza stated that pupils had felt “proud” on receiving the ‘school-in-a-bag’ as they had now looked “the same as the rest of their friends.” In other words, some of the material disadvantages of these vulnerable pupils comparative to fellow pupils had been reduced (a disparity perhaps more visible in the larger trading centres). This has implications for addressing stigma and discrimination from fellow pupils (Chapter 5) Discussions with pupils in Pamoza highlighted how the provided resources helped in ‘levelling the playing field’ within the school.

Acknowledging the importance of the resources as a motivating factor, interview data revealed how two schools – Namalongo and Pamoza – used their removal as a ‘threat’ to ensure attendance. The club leader and teacher at Namalongo confirmed this, the former stated:

[The distribution of materials] encouraged pupils to continue coming to school and the club as well, because they thought that the school was going to take the bags away from them when they were absent.

This happened to Mfumu, a 16 year-old boy from Namalongo who lived in a sibling-headed household and supported his school needs through ganyu. He explained:

I was sent to fetch some medicine from Muloza for my sister and was gone for some days. When I reported back to school, I was told to go to the office [head teacher]. I didn’t go and the head sent some pupils to come and confiscate the school bag from me.

He withdrew from the SOFIE club shortly after this incident.

42 Muloza is a distant trading centre in the next district. This trip was most likely to collect traditional medicine.
This and other instances highlight a possible misunderstanding of the model’s concepts of flexibility and inclusion. It is one example of tensions between the realities of pupils’ lives and schools’ expectations of pupil discipline.

7.2.2 Study Guides

A key component of the ‘school-in-the-bag’ was the inclusion of English and Mathematics self-study guides. During evaluation workshops and school visits, groups of participants assessed the use of study guides in their schools. In case-study schools, pupils ranked the use of study guides as one of the most important activities of SOFIE clubs (see Table 7-2 below). Most of the interviewed pupils (15 out of 22) agreed that the guides were easy to use. Several noted that when they did find difficulties they would approach their club leader or buddy for assistance. For a few, the main difficulty faced was their poor reading skills. Several pupils spoke favourably of the use of Chichewa translations of instructions, not only to clarify what was required, but as means to enhance their own knowledge and use of English. One boy from Duma said:

There were some Chichewa translations of English words so I was able to understand those words and have confidence that I can use the words.

Others noted that translated instructions were particularly helpful in understanding mathematical problems.

The school heads and teachers in Duma, Namalongo and Pamoza spoke of improved skills and knowledge amongst at-risk pupils, noting that a number of them were now capable of achieving higher scores in class tests than previously. During FGDs, several pupils described how they had gained new skills, often as simple as reading and understanding basic words in English or solving sums.

Reinforcement and classroom enrichment

The teaching and learning strategies adopted to use the self-study guides differed between the four schools. At Kamunda and Pamoza pupils were encouraged to work through their guides systematically and often followed fairly structured learning schedules during club meetings. At Duma, the guides were used, instead, to focus on particular topics or questions that had given difficulty in class (or missed due to absence). One of the ‘at-risk’ pupils said:

... when we meet at the club we are asked “which sums did you not understand the past week?” I then say which one I didn’t understand and I get help.

Interview data across the four schools indicated that the guides were also commonly used by pupils to reinforce and revise topics covered in class, either in clubs and/or when studying at home or with friends. For example:
I used the guides to practice what I have learnt at school, using the exercises that are in the guides and the text books. 18 year-old boy, Pamoza

When I had the guides and text books with me, I would sit down with my friend and we could help each other solving and practicing mathematics and English
15 year-old girl, Pamoza

I had problems solving sums. Soon after the teacher stops explaining I would forget and go home without remembering anything, but after the coming of SOFIE I could use the guides and grasp what was meant. 14 year-old boy, Duma

Interview and FGD data also suggested that the guides helped to ‘fill in the gaps’ left by teachers’ lack of knowledge, especially in mathematics: During a FGD at Duma, one female pupil noted:

When a teacher fails to answer a problem in mathematics, we can do calculations till we find the solution that is written in the study guide.

Similarly, the class teacher from Namalongo, explained:

The materials provided by SOFIE were helpful. Sometimes it happens that in books [government textbooks] there can be an exercise that the teacher does not have the answers to. It can happen that in the study guides the answers are there, so the teacher can do the exercise easily; the teacher is relieved

Several teachers at the evaluation workshop also acknowledged that they made use of the study guides in preparing their own class lessons.

Home study and collaborative learning

Pupils also used the study guides to learn independently and keep up with their school work if unable to attend classes or clubs. Many of pupils interviewed (14 out of 22) confirmed that they referred to the guides when absent from class: a key objective of the SOFIE model. Thandi, a 13 year-old boy from Pamoza who was staying with his mother and several orphaned cousins in impoverished circumstances, explained:

I am told to go and farm in my family’s garden, but the tasks do not affect my schooling as after the tasks I go and study a bit using my study guides or go to the SOFIE club.

At the same school, Adam, an older boy who worked as a domestic servant for the local pastor in exchange for his keep, stated:

If I have been sent away [from school] due to late coming after completing my chores, I get the study guides and start to use them or I could go to the club in the afternoon.

In several instances, pupils described how the ‘buddy’ system further supported this: with their buddy visiting to up-date them on what topics had been covered in class and/or carrying set exercises back to the school for marking (see below).
Pupils often learnt collaboratively, studying together with other classmates or friends, or working through particular topics with their buddies outside of club meetings. One 15 year-old girl from Mzimba stated:

When I was with [my classmate], when I had the guides and books with me, we would help each other solving and practicing Mathematics and English.

Participants at the evaluation workshop in Mzimba highlighted the importance of the SOFIE resources and learning support in promoting a ‘culture of reading’ amongst pupils, particularly with regard to independent study. The school head at Pamoza stated:

When the SOFIE project came one saw a change in the support given to these children, especially in learning, because at first they didn’t have the heart to read on their own at home, but after encouraging them to do so now they are used to doing so. Even now when teachers give them homework they do it properly.

In a related aside, key informants, community members in particular, argued that such a “hard-working spirit” also benefited pupils by “keeping them busy” i.e. when engaged in school work pupils were less likely to get involved in risky or delinquent behaviour. Teachers noted an improvement in discipline amongst some pupils.

7.2.3 Buddy system

Visits to case-study schools revealed different experiences with the ‘buddy’ system (Table 7-1). Kamunda was the only intervention school that did not manage to sustain a functional ‘buddy’ system and three girls who were originally recruited as buddies later dropped out. In the other three schools, all at-risk pupils were assigned buddies. The majority of at-risk pupils reported positive experiences, although this was largely dependent on the level of commitment of individual buddies.

In addition to the learning support provided, another important outcome of the buddy system was that several at-risk pupils (particularly boys) derived motivation and emotional support from friendships established with their buddies. Lewis, a 16 year-old boy from Duma, described his relationship with his buddy, another boy from Standard 6.

I have a class buddy ... he is very helpful because he assists me in school work...We do homework together and we usually chat about me being an orphan, though he has both parents alive, and he comforts me when my granny has shouted at me (insulted me).

Similarly, Stanley, a 15 year-old boy from Duma, who stays with an elderly grandparent and works to support the household, said of his buddy:

I am closest to [named buddy]. He encourages me not to lose heart, but to be hoping for a better future.
TABLE 7-1: STRATEGIES TO WORK WITH BUDDIES

<table>
<thead>
<tr>
<th>Buddy strategies</th>
<th>Duma</th>
<th>Namalongo</th>
<th>Kamunda</th>
<th>Pamoza</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Buddies from same class. Learning support at clubs and as required, follow-up if ‘at-risk’ pupil was absent, carrying assignments for marking and communication with school.</td>
<td>Buddies from same class. Learning support at clubs, follow-up ‘at-risk’ to find reasons for absence. Sometimes used to lead club sessions.</td>
<td>No functional system in place.</td>
<td>Buddies drawn from higher grades. Learning support at clubs and as required. Carrying assignments for marking &amp; communication with school.</td>
</tr>
<tr>
<td>Comments from pupils</td>
<td>Generally helpful, a few inactive.</td>
<td>Helpful, but learning support limited to club meetings. Several inactive.</td>
<td>Unclear about role of buddies.</td>
<td>Helpful, but many left before end of year and were not replaced</td>
</tr>
</tbody>
</table>

Chosen buddies were expected to be high achievers, regular attendees and active in class. Qualitative data suggests, however, that a number of schools used the recruitment of buddies to spread some of the perceived benefits of SOFIE activities to those not registered with the at-risk group, but believed to be vulnerable. At Namalongo, there were high numbers of orphaned children eligible to join the SOFIE club, but not included due to limited spaces. The school head confided that such children were encouraged to become buddies. Similarly, in some schools in Mzimba, greater numbers of girls were recruited as buddies; an attempt to address the gender imbalance of the at-risk groups.

Several key informants argued that buddies also benefited from their involvement with at-risk pupils, through their presence at SOFIE clubs, sharing of resources and collaborative learning. Teachers at Duma, Pamoza and Namalongo noted:

- It [buddy system] provided opportunities for revision and extra learning for the buddies
- Class buddies also gained knowledge
- It [buddy system] promoted a hardworking spirit in both learners and buddies
7.2.4 SOFIE Clubs

Flexible scheduling of clubs

At three of the schools, the clubs met after school on Fridays, a time often allocated for extra-curricular activities. At Duma, the club met on a Sunday afternoon\(^{43}\), more often set aside for rest or leisure activities. The consensus from pupil FGDs was that they were happy with when the club meetings were held, as this generally accommodated their household responsibilities. However, during individual interviews a few of the pupils that attended clubs on Fridays noted that it was difficult for them to go home after school and return in time; staying meant they were likely to forgo a meal. Community members at Namalongo raised this as a concern:

> Some of these children live very far away from the school, so with the time that SOFIE activities start it was difficult for these children to go and come back for the club. So, most of the times the children were just staying - without eating nsima- until they knocked off from SOFIE.

Late-coming at clubs was a concern raised by both pupils and club leaders (see 7.5.4), although few could suggest an alternative time or place.

Some instances of flexible timetabling were found. At Pamoza, the club leader noted that attendance dropped when meetings clashed with choir practice or other social activities. To resolve this he shifted the time of the meetings and met twice a week to accommodate those pupils engaged elsewhere. Club leaders’ diaries revealed that club members were reluctant to attend when schools were on holiday, and, after discussion, their clubs also took a break at this time. Some comments arising from this suggest that at-risk pupils wanted to be treated ‘the same’ as other pupils\(^{44}\). The club leader from Duma - where older children frequently involved in ganyu - explained that it was common practice for vulnerable pupils to use the school holiday as a time to earn money.

Approaches to learning support

Approaches to conducting club meetings and delivering learning support varied. In both Mzimba schools, club leaders and teachers worked together to draw up ‘lesson plans’ for each meetings, with pupils covering set tasks. The club leader at Kamunda described this arrangement:

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\(^{43}\) Although not mentioned explicitly, Duma was the only case study school with a significant Muslim population, which may also have influenced the choice of time.

\(^{44}\) This phenomenon was also found amongst learners on the non-formal CBE programme, who, although attending their own learning centres, were reluctant to attend when formal schools were on holiday (Moleni and Nampota, 2007).
I am not a trained teacher. The [Standard 6] teacher was giving me a plan, telling me, “this time the children should learn this - sometimes Maths, sometimes English – this is the topic that the children should read this week; this is what will be in the next lesson.”

In Kamunda, where there was no effective buddy system place, learning activities were led by the club leader, in a style more similar to a classroom setting; and with less regard for collaborative learning. In the two Phalombe schools, the meetings were less structured, more pupil-led; with more emphasis on the social aspects of the clubs. Opportunities were provided to discuss issues affecting orphaned and other vulnerable pupils. Although such differences may have been influenced by expectations of the school leadership, they also reflect differing backgrounds and expectations of the club leaders themselves (see below).

**Club activities**

During mini-workshops, pupils were asked to brainstorm and list club activities and then agree on the six they felt were the most important. Working in groups, pupils then ranked these activities. Table 7-2 below shows the combined results of these ranking exercises, with position 1 being the most important and position 6 the least important. It lists the activities and the position each activity was ranked for each school.

Opportunities to improve knowledge and skills ranked highly amongst pupils. Using the study guides to work through Mathematics and English topics and exercises was ranked highest by Duma school and second highest by the other three schools. Revision and homework also ranked highly. Additional, non-academic resources and activities (e.g. sports, board games and listening to the radio) were also important. According to club leaders these resources encouraged pupils to attend clubs and were a source of motivation. At Namalongo and Duma footballs were shared within the school to support wider school activities, encouraging interaction between the club attendees and other pupils.

When asked what they disliked about the SOFIE clubs, only a few pupils expressed any concerns. These complaints related to the lack of punctuality or absenteeism of others, dislike of some of the physical activities and “gossiping” amongst club members. Several girls said they felt uncomfortable being expected to play alongside boys and male club leaders in football and other physical games (‘ice-breakers’).
TABLE 7-2: PUPILS’ RANKING OF SOFIE CLUB ACTIVITIES, BY SCHOOL.

<table>
<thead>
<tr>
<th>SOFIE Club activities</th>
<th>Ranking order (showing schools)*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 (most important) 2 3 4 5 6 (least important)</td>
</tr>
<tr>
<td>Academic/study time</td>
<td></td>
</tr>
<tr>
<td>Using study guides (to solve Maths &amp; Eng problems)</td>
<td>D  NKP</td>
</tr>
<tr>
<td>Revising class work</td>
<td>K</td>
</tr>
<tr>
<td>Homework tasks</td>
<td>P  K</td>
</tr>
<tr>
<td>Practicing writing skills (composition, letter writing)</td>
<td>N</td>
</tr>
<tr>
<td>Games &amp; other activities</td>
<td></td>
</tr>
<tr>
<td>Debate</td>
<td>N</td>
</tr>
<tr>
<td>Drama</td>
<td>D</td>
</tr>
<tr>
<td>Listening to the radio</td>
<td>P  DK</td>
</tr>
<tr>
<td>Playing football/netball</td>
<td>N  D  P  K</td>
</tr>
<tr>
<td>Playing ‘edutainment’ HIV /AIDS board game</td>
<td>P  K  N  D</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Receiving school bags</td>
<td></td>
</tr>
<tr>
<td>Advice &amp; counselling</td>
<td>D  P</td>
</tr>
</tbody>
</table>

*Abbreviations are used to represent the four schools: D = Duma, N = Namalongo, K = Kamunda and P = Pamoza. For ranking 1 = highest ranked, 6 = lowest ranked.

Social and learning outcomes

Participation in club meetings, and attendant opportunities for support and collaborative learning, led to a number of benefits for vulnerable pupils. A few of the interviewed pupils – both boys and girls - said they liked attending the club because it gave them the chance to interact with others. One boy from Duma said:
At the club if I have something that I do not understand things I ask the club leader and he explains it to me, and also that I like the freedom of expression that is there because as for me in the past I was very shy I could not interact well with my friends but at the club I have learnt to interact.

This association of clubs with a sense of ‘freedom’ – to speak, to learn together, to express ideas – was a common theme amongst respondents. Several key informants noted that clubs provided at-risk pupils’ with opportunities to interact freely in a group and have their contributions heard. This was felt to be important in “reducing shyness”. The club leader at Namalongo reasoned that pupils might feel freer to ask for help in a club setting, as they were not required to ask questions in English, as would be the case in class.

Another important finding is that involvement in club activities – and opportunities to interact with others – contributed to greater self-confidence amongst some of the at-risk pupils. Teachers noted an improved participation in classroom activities, with one teacher commenting that at-risk pupils “no longer fear to answer question in class.” Several pupils spoke of reduced anxiety and shyness during lessons. A female at-risk pupil from Duma stated,

My participation has changed because, like, in class, Mathemetic and English were difficult subjects for me, but when I joined SOFIE club I am able to do better than before... and also I was a very quiet person so my quietness made me not to be active in class. Whatever was difficult for me, I was not asking for help from my friends, but since I joined SOFIE, I got used to my friends and I started to ask them [about] whatever things were difficult for me.

Access to learning support provided through clubs was also believed to have helped improve pupils’ performance in formal lessons. One female community member from Pamoza noted:

They go to school twice... Then, when you go into the class where they are learning, it clearly shows that they understand what they are doing...the children are performing better than before when they were attending normal classes only. Even their parents/guardians don’t want them to be absent from school.

A few key informants also noted that clubs provided pupils with opportunities to discuss problems they faced in their lives, thus providing much-needed emotional support. As noted earlier, for some pupils this support was extended to outside club meetings, through friendships built up between themselves and their buddies and/or fellow club members. Such new friendships appear to have been almost exclusively amongst boys, of whom over half made mention of either a fellow club member or buddy as their close friend or confidant. Girls generally spoke of wider social networks and existing friendships, unrelated to the club or even the school.

During training workshops concerns were raised that inclusion in SOFIE clubs might stigmatize those chosen, a concern that had also dogged the development of the SOFIE model. Despite these earlier concerns, the majority of participants at the evaluation workshops disagreed with the statement that “children attending
SOFIE clubs were teased by fellow pupils. Key informants across all four schools were adamant that clubs, in combination with the buddy system, helped address issues of discrimination by promoting interactions between vulnerable pupils and those less disadvantaged. The club leader at Duma also observed that inviting buddies to join the clubs reduced the association of clubs with orphaned children:

Without class buddies, people could have had a negative attitude, that it was a club for orphans, but the presence of buddies changed that image.

However, interviews with at-risk pupils, revealed a more nuanced picture, with some instances of verbal teasing from fellow pupils. Adam, from Pamoza stated:

Some of my friends discouraged me that I have joined a useless club, and that this shows how poor and orphaned I am, this made me to think of quitting the club, but I stayed on.

Others described discouraging remarks from fellow pupils and community members that referred more generally to clubs being ‘a waste of time’, but put these down to jealousy rather than discrimination. In contrast, several at-risk pupils described how friends and neighbours had actively encouraged them to attend clubs, even, on occasion, walking with them to the club meetings.

**Club Leaders**

Both of the volunteers at the Phalombe schools were members of CBOs working with vulnerable young people. The club leader at Kamunda had previously been a volunteer teacher at the same school, a task that she returned to during the period of the intervention. The club leader at Pamoza also had aspirations to be a teacher, and was the son of the SMC chair. When asked how they saw their role as club leader, all four highlighted the provision of learning support. Those from Duma, Namalongo and Pamoza also acknowledged an element of emotional support – listening to problems, following up issues at home and counseling pupils. In addition, the club leader at Namolongo perceived himself as an advocate or ‘champion’ of the ‘at-risk’ pupils, helping to mobilize others to provide support. In contrast, the club leader at Kamunda saw her role as primarily that of ‘teaching’ the pupils – giving them exercises, leading other club activities and marking assignments.

During FGDs, pupils at all four schools spoke of their club leaders as encouraging, friendly and fair – treating all of them equally and, in contrast to the formal setting of the schools, without shouting at them, ridiculing them or dealing out punishments. This latter point is likely to be significant, as harsh and unfair punishments

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45 Under schools’ own initiative, five out of the ten youth volunteers recruited as club leaders at the Mzimba schools were also acting as volunteer teachers, informally employed by the SMC to address issues of understaffing. At Kamunda, the club leader was responsible for Standard 3.
were seen as found to have been a contributing factor to exclusion and withdrawal from school (see 5.5.2). In addition, the three male club leaders were seen as approachable and able to participate freely with the pupils. Greater social distance existed between pupils and the club leader at Kamunda, likely based on her position at the school, but perhaps also due to the difference in gender between her and the pupils (all of whom were male). However, none of the pupils interviewed explicitly raised concerns about clubs being led by a member of the opposite sex.

7.3 PROMOTING AN ENABLING ENVIRONMENT

7.3.1 Record-keeping, monitoring and follow-up.

Table 7-3 contrasts the strategies put in place in each of at the case-study schools to follow-up at-risk pupils when absent from class and/or club meetings. Despite the variation in approaches, key informants across Duma, Namalongo and Pamoza schools noted that close monitoring and follow-up of at-risk pupils had been effective both in identifying pupils’ reasons for absence and supporting their continued attendance at school. A few believed that at-risk pupils, realizing that they were being monitored, made greater effort to attend school regularly. Others – from Pamoza - noted improved support from parents/guardians following home visits. The strategies used appear have been more effective when there was clear understanding of roles and commitment from those responsible. At Kamunda, interviews with the club leader indicate very limited success in addressing pupils’ reasons for absence.

Several of the pupils attested to a reduction in their absence from classes, noting that now they were only absent for ‘real reasons’. Others gave examples of how they had adapted coping strategies to reduce their absenteeism. For example, one boy at Duma described how he had re-negotiated his household responsibilities so that he only went to work at the lake at the weekends where previously he had often worked during school hours. These discussions also emphasised the role of pupils’ personal agency and decision-making in school attendance.

Another important finding was that interventions schools’ greater engagement with monitoring and follow-up of absent pupils may have extended to other pupils, not just those receiving targeted support, a spill-over effect widening the benefits of the intervention. For example, at Kamunda, the class teacher explained:

As a class teacher I have learnt a lot [from the SOFIE project], like the importance of following up absentees. For example, as we are going around following up ‘at-risk’ pupils, we were also finding the opportunity to follow up non ‘at-risk’ pupils who were also absent. And also when we were encouraging those in the SOFIE club not to be absent from school, we were at the same talking to other pupils.
An important issue arising from pupils’ interviews was that far fewer girls reported having been followed-up when absent compared to the boys\textsuperscript{46}. Whilst the numbers of interviewed were small, this is cause for concern. One explanation might be that male club leaders and teachers were reluctant to visit girls at home in case this would have been misconstrued.

### TABLE 7-3: STRATEGIES FOR FOLLOW-UP OF ‘AT-RISK’ PUPILS.

<table>
<thead>
<tr>
<th>Described strategies for ‘follow-up’</th>
<th>Duma</th>
<th>Namalongo</th>
<th>Kamunda</th>
<th>Pamoza</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dependend on information from fellow pupils and ‘buddies’. Additional follow-up where necessary by club leader or nearby teacher.</td>
<td>School head would refer to records to find out absentees, then responsibility for follow-up given to club leader and teacher, but delegated to buddies. Regular absentees called in (with parents or guardians) to discuss absenteeism.</td>
<td>Club leader and teacher responsible for follow-up, meeting with pupils and/or home visits. SOFIE committee members or school head called in to assist with persistent absentees.</td>
<td>Follow-up was responsibility of the club leader through home visits. Teacher informs club leader of class absentees. Committee members involved with home visits.</td>
<td></td>
</tr>
<tr>
<td>Comments from key informants</td>
<td>Only partial success because of confusion over who should follow-up.</td>
<td>Some initial success, confusion over responsibility for follow-up after teacher had been transferred to another class.</td>
<td>Some success, but some parents and guardians unwilling or unable to persuade pupils to attend.</td>
<td>Worked well until last few weeks when club leader was increasingly absent.</td>
</tr>
</tbody>
</table>

7.3.2 Community involvement

Table 7-4 summaries various aspects of communities’ involvement in the intervention. To integrate SOFIE activities into existing school structures, schools were encouraged to set up a small SOFIE sub-committee reporting directly to the SMC. However, with the exception of Duma, the case-study schools set up large, independent committees with varying degrees of interaction with the SMC. At Namalongo, the SMC chair was an important link between the two committees, taking a lead in SOFIE activities; the PTA chair was also an active member. At Pamoza, several SMC members sat on the SOFIE committee, including the Chair. At

\textsuperscript{46} Under a third of all girls interviewed (28.6\%) compared to over three-quarters of boys interviewed (76.9\%).
Kamunda, in contrast, SMC members were excluded from the SOFIE committee and, instead, a large number of community members (initially 10) were elected. Whilst this suggests a potential for widening and democratising community involvement, volunteering to sit on the committee was seen by some community members as a means to benefit from the project. Such expectations of personal gain were a critical challenge to implementation (see 7.5 below). The club leader implied:

Some people whose children did not meet the [selection] criteria wanted to push their way onto the SOFIE committee, hoping that, since their child would not be benefiting from SOFIE, then they would, by virtue of being on the committee.

TABLE 7-4: COMMUNITY INVOLVEMENT

<table>
<thead>
<tr>
<th>Community sensitisation</th>
<th>Duma</th>
<th>Namalongo</th>
<th>Kamunda</th>
<th>Pamoza</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two public meetings held, introducing SOFIE project &amp; objectives. Led by school head, SOFIE chair and GVH.</td>
<td></td>
<td></td>
<td>Public meeting to explain criteria for selecting at-risk pupils and elect SOFIE committee. Led by school head, SMC and SOFIE chair.</td>
<td>No initial sensitisation. Subsequent announcements in churches and communities to tell parents to send children to school.</td>
</tr>
<tr>
<td>Community representation on SOFIE committee</td>
<td>SOFIE committee met regularly, chaired by PTA chair. Two SMC members; females underrepresented.</td>
<td>SOFIE committee met several times. Representation from local youth organisation and ‘mothers group’. VH, SMC and PTA chair also included.</td>
<td>Large SOFIE committee met several times. Community members with no prior links with school committees.</td>
<td>SOFIE committee met regularly. Included SMC members, VH and other community members.</td>
</tr>
<tr>
<td>Support for pupil welfare</td>
<td>Income generation through sale of grass &amp; trees (by pupils &amp; SMC). For support of ‘at-risk’ pupils – school materials.</td>
<td>No fundraising. SMC chair purchased uniform for one ‘at-risk’ pupil and assisted with school contributions.</td>
<td>Contributions from SOFIE committee to support pupils, but not all paid.</td>
<td>Contributions from SOFIE committee purchased notebooks &amp; soap for at-risk pupils.</td>
</tr>
<tr>
<td>Follow-up</td>
<td>None</td>
<td>None</td>
<td>Home visits to absentees and drop-outs</td>
<td>Occasional home visits</td>
</tr>
</tbody>
</table>
At all four schools, none of the SOFIE committee members were parents or guardians of the selected pupils (see Table 7-4). This belies concerns that committee members had used their influence to include their children on selection lists. However, this also indicates that no specific efforts were made to include parent/guardian representatives on committees.

**Resource mobilisation**

Community involvement in Phalombe was relatively limited (Table 7-4). Duma was one of only two Phalombe intervention schools where community members took an active role in supporting pupil welfare through resource mobilisation. Why Duma was more effective in securing community support is unclear, although taking steps to sensitise community members might have contributed to this. A change in school leadership also seemed to have breathed new life into the school. At the two Mzimba schools, fundraising was limited to collecting membership contributions from the SOFIE committee – another reason why some members were reluctant to attend regularly. At Pamoza, these funds (MK100\(^47\) per member) were used to purchase additional notebooks and laundry soap for at-risk pupils. At Kamunda, it proved difficult to pinpoint what funds had been spent on: none of the pupils spoke of receiving material support, beyond the resources provided by SOFIE.

During training sessions on mobilising support for pupils, participants were encouraged to strengthen or establish links with local organisations working with orphaned children, vulnerable households etc. Several such organisations had been identified during initial planning visits for the SOFIE project and earlier school visits. Despite this, there was little evidence of intervention schools adopting such a strategy, losing an important opportunity for widening ‘circles of support’ for vulnerable children. One exception was Namalongo school. Here the SOFIE committee included representation from a community youth organisation and a girls’ education NGO (see Table 7-4). The club leader had also initiated visits from the youth organisation to the SOFIE club. However, none of the intervention schools had approached existing community or district-level organisations or private enterprises to mobilise resources or raise funds.

**7.3.3 Pastoral care: counselling and emotional support**

Several intervention schools did make efforts to provide counselling for at-risk pupils (see 6.5.4). What was less clear is what form this provision took. Visits to the case-study schools offer insight into this. Generally, respondents made little mention of one-to-one counselling, except when linked to specific incidents of pupil absence. Interviews and FGDs with at-risk pupils indicate that some discussion of problems faced by pupils

\(^{47}\) Approximately £0.40.
took place at clubs, led by the club leader, often prompted by topics from radio programmes, supplementary readers and playing ‘Choices & Decisions’. Pupils across all schools spoke of receiving advice and encouragement from teachers, either as follow-up or in a general classroom setting.

Key informant interviews indicate that counselling was not confined to trained teachers and club leaders, but was also taken up by school heads and members of school committees. At Kamunda, the school head noted how SOFIE committee members would come to clubs “...to advise them how to continue with schooling and achieve their goals”.

There was also evidence that such activities reached beyond the at risk groups to include other vulnerable children. At Kamunda, the school head noted:

When we were providing guidance and counseling to SOFIE club members we were also talking to the other pupils, so they should know how they can help themselves to go ahead with their schooling and how they can achieve their goals without dwelling much on their problems like poverty.

Interviews with key informants suggest the provided ‘counselling’ (whether in groups or individually) was constructed as the giving of “advice” to pupils, often centred on the importance of education and need to work hard. Another common theme was the perceived importance of addressing pupil discipline and behaviour; particularly prominent at the Mzimba schools. At Kamunda, whilst the club leader and teacher saw counselling as a means to help pupils address their problems, the school head spoke of its importance in dealing with pupils “who misbehave.” Community representatives across all schools spoke almost exclusively of addressing ‘bad’ behaviour amongst the pupils, perhaps strengthened by assumptions that orphaned children are often ill-mannered, aggressive and prone to risky (sexual) behaviour.

At Duma, several at risk pupils said their club leader encouraged them to talk about any difficulties they may have been facing at home. At other schools, however, pupils’ responses largely confirmed the approaches and content of the counselling outlined above. Many spoke of club leaders and teachers advising them not to be absent from school, to work hard and not to dwell on their problems. A few pupils, predominantly girls, also noted that they were advised not to “be childish” and to “avoid boys.” One girl at Duma said,

My teacher encourages me not to be indulging in sexual relationships with boys because they can ruin my future by impregnating me. He also encourages me to read very hard so that I should not find difficulties during exams.

Thus, it seems that the child-led, exploratory approaches to counselling advocated during training had been modified to fit the more traditional, culturally-familiar practice of ‘advice-giving’ by elders, likely compounded by the involvement of untrained community members. As such, the ‘counselling’ provided may
not have differed greatly from that previously available at the school, although it almost certainly took place with much greater regularity, involved a wider range of actors and targeted many of the pupils identified as vulnerable to dropout. Interestingly, despite the often admonitory tone of the ‘counselling’, at-risk pupils tended to perceive it as a form of ‘encouragement’ and several noted how such attention motivated them to take their schooling more seriously.

Analysis of pupil interviews revealed frequent references to verbal encouragement and emotional support from teachers (mentioned by 18 out of 22 pupils). This is an important finding in that it contrasts strongly with earlier case study findings, which clearly highlighted the absence of such support from teachers (see 5.5.6). For a few boys, this also included seeing their (male) teachers as role models. Ziwa, a 14-year old boy from Pamoza, who, after his father’s death, lived in great poverty with his mother, said:

My teacher encourages me to work hard despite the problems I face in everyday life, because he also went through the same experience, so I get the inspiration from my teacher.

7.3.4 Re-examining policies and practices

During phase one of this study, a number of school-level policies and practices were identified that discriminated against poorer children and those with significant household responsibilities. These played a key role in absenteeism and dropout amongst children affected by HIV/AIDS (see 5.5.5.). The most insidious of these was the informal ‘uniform’ policy, which excluded children from class because of their lack of uniform or ‘poor dressing’ – torn, dirty or ‘inappropriate’ clothes. The case study schools offer examples both of schools that took active steps to curb exclusion by amending existing school policy (e.g. Duma), and those that did not (e.g. Kamunda and Pamoza) (see Table 7-5).

<table>
<thead>
<tr>
<th>TABLE 7-5: STRATEGIES ADDRESSING EXCLUSIONARY POLICY AND GUIDELINES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Changes in policy and guidelines</strong></td>
</tr>
<tr>
<td>No pupils sent home due to lack of uniform.</td>
</tr>
<tr>
<td>At-risk pupils no longer forced to pay school contributions, if cannot manage.</td>
</tr>
<tr>
<td>Vulnerable pupils given priority in distribution of school materials.</td>
</tr>
</tbody>
</table>


At Duma, following a change in leadership at the school, pupils were no longer sent home if they did not have a uniform. Parents and guardians were encouraged to find ways to obtain a uniform and, in one case, a teacher purchased a uniform on behalf of one of the pupils.

Although the SOFIE committee and school leadership at Pamoza did not change school policy on uniform, they were not unaware of the situation and responded by purchasing and distributing bars of laundry soap to at-risk pupils. At Kamunda, at-risk pupils had not been sent home for a lack of uniform, but because they had been able to borrow or buy a uniform (some resorting to additional ganyu to pay for it). Entries in the club leader’s diary showed that pupils were frustrated with the school’s failure to engage with pupils’ financial difficulties and this had led to a temporary boycott of the clubs. Namalongo offers a somewhat confused picture: a ‘carrot-and-stick’ approach to improving participation. Whilst vulnerable pupils’ inability to pay school contributions was taken into consideration, personal circumstances that resulted in pupils being late or absent from classes, were not.

7.4 Benefits to Schools and Communities

Key informants and community members were asked how the schools and surrounding communities had benefited from the SOFIE project. Community members from all case-study schools said that by hosting the intervention their schools “had become known” amongst surrounding schools and “exposed” further afield, thus acting both as a role model to other schools and opening up the possibility of attracting future support.

Teachers were said to have benefited from the training received. Improved record-keeping and monitoring skills were identified by school heads and teachers as critical to building individual and school capacities. It was also suggested -though not by the teachers themselves - that teachers’ workloads had been reduced, a result of club leaders stepping in to provide extra learning support. Perceived, resultant improvements in pupils’ knowledge, participation and discipline were said to benefit the teacher by making classroom teaching more manageable. A few key informants also referred to material benefits: additional learning resources and games provided for the intervention.

Some participants noted that their involvement in the intervention had helped to build better working relationships between school staff and community representatives. Respondents at all schools except Kamunda spoke of opportunities to share ideas, enhanced unity amongst committee members and the ability to work together amicably. One elderly female SOFIE chairperson spoke of her improved leadership skills. Club leaders also appear to have benefited in a similar way. They spoke of improved skills in working with
young people, experience of working collaboratively with a high level of personal responsibility, and gaining respect for work done\textsuperscript{48}. One young man stated,

\begin{quote}
I am able to relate well with people in the villages and at school. In the past, I could not stand before elders, because that would be interpreted as arrogant, but because of SOFIE I have learnt that though young I have a role to play in the development of the community.
\end{quote}

During evaluation workshops, the majority of district and school representatives expressed willingness to continue with aspects of the model seen as successful (e.g. monitoring systems, the work of youth volunteers and buddies). However, several called into question the intervention’s sustainability in the absence of structured supervision and incentives.

\section*{7.5 Challenges to implementation}

During summative evaluation workshops participants were asked to individually list, discuss and analyse the main challenges they faced in their role as implementers of the SOFIE model. These are grouped and summarised in Table 7-6. Several key issues are discussed below, supplemented with data from school visits

\subsection*{7.5.1 Selection of at-risk pupils}

The process of selecting pupils to be on the at-risk register was seen as a major challenge by many participants at the workshops. For both budgetary and logistical reasons inputs for the SOFIE project were limited to a maximum of 15 pupils per school. Larger schools, such as Namalongo, found this particularly restrictive. Conversely, in some smaller schools in Mzimba, the maximum number of pupils was not selected and resources remained unused. This was the case with Kamunda: the reason given by the school head for this was that there were not sufficient numbers of pupils that fitted the agreed criteria.

\textsuperscript{48} It is encouraging to note that at least two of the club leaders went on to be selected for training as primary school teachers under the government's ODL teacher training course.
**TABLE 7-6: CHALLENGES TO IMPLEMENTATION: PARTICIPANTS’ RESPONSES**

<table>
<thead>
<tr>
<th>Main challenges</th>
<th>Mzimba N=38</th>
<th>Phalombe N=39</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Use of targeted support</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selection of at-risk pupils</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Limited number of beneficiaries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Pressure to select children</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Insufficient resources and learning materials for at-risk pupils (in –school-in-a-bag)</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td><strong>School -Community issues</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Limited community participation in SOFIE activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- SOFIE committee members inactive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Lack of resource mobilisation activities</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>Expectations of incentives and handouts from communities and participants</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>Poor community relations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Inadequate sensitisation of community members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Hostility over selection process</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Discouraging volunteers</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>Parental attitudes and values</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td><strong>Access to learning</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pupil late-coming and absenteeism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Vulnerable pupils still experience difficulties at home</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Pupils’ lack of participation in learning activities and poor progress</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Unable to complete study guides</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td><strong>Enabling environment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Workload and time constraints of teachers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Understaffing</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Difficulties in follow-up of absentee pupils</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Long distances and lack of transport</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Unequal of sharing responsibilities and poor coordination between teachers, youth leaders and committee</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Lack of supervision from district staff</td>
<td>0</td>
<td>5</td>
</tr>
</tbody>
</table>

*some participants gave multiple responses.*
Several participants also noted that community members were putting pressure on them to include their wards, and that if they did not they were being accused of favouritism. In Phalombe, tension around the selection of at-risk pupils linked to raised expectations (see below) resulted in open hostility from community members at some schools. Participants described verbal insults and accusations of schools squandering resources. Inadequate sensitisation of parents and guardians as to the objectives and aims of the intervention may have contributed to this. The club leader at Namalongo described the situation at his school:

Community members were saying insults...that we were not fair in choosing only 15 pupils when [this] is a big school with almost 400 orphans. Not all people were happy to see the at-risk pupils benefiting...I could just see the angry faces of some parents.

7.5.2 Insufficient resources

Another concern raised was that the notebooks and pens provided for at risk pupils were insufficient to last the school year. At Kamunda, where expectations of material support were very high, the class teacher stated:

This project is a good intervention, but it can change its approach in some ways, like gifts that they give. For example, the bags, pens, notebooks are given in very small quantities, which makes the pupils feel that they have not been assisted much, because the pupils receive 4 note books from SOFIE project and yet the school distributes 20 notebooks to each child, then the child cannot notice the impact of the gifts.

This comment reflects the situation in schools where pupils receive a minimum number of notebooks at the start of the school year (usually far less than 20). These are rarely sufficient and the ensuing shortfall was found to present difficulties to children from impoverished households (see Chapter 5).

Others noted that additional materials, such as soap or food, should have been included, as this would have helped to support pupils’ attendance by addressing some of their basic needs. However, several school committees, including Duma, Namalongo and Pamoza, had actively addressed this concern by sourcing and distributing additional materials (see 7.3.2). At Kamunda, the provision of resources was perceived as the responsibility solely of the project.

With regard to the study guides, a few workshop participants suggested that pupils would have benefited from a wider range of subjects, beyond that of English and Mathematics.
7.5.3 Expectations and Incentives

Another challenge was that of dealing with expectations of material gain – handouts of maize, money, clothes etc. – held by many community members, parents and pupils.

If we call for a meeting with parents of at-risk pupils they expect hand-outs at the end of the meeting.

*SOFIE chair, Phalombe*

A few workshop participants also noted that when some at-risk pupils did not receive expected material support (e.g. soap or clothes) they were “disappointed” and their attendance at clubs waned as a consequence.

One of the reasons given for the inactivity of some SOFIE sub-committee members was that initial expectations of incentives were not forthcoming. FGDs at case-study schools indicated that some committee members were anticipating a small stipend to attend meetings, and/or material resources. Several participants also noted that their continued engagement with the intervention – in the absence of incentives – led to ridicule from other community members. Youth volunteers, in particular, were accused of “wasting their time.”

Such expectations are a common problem in Malawi, based on communities’ previous experience of relief or development programmes that frequently use incentives to procure community participation. Rather than deflecting such false expectations, community sensitisation activities may have inadvertently compounded the problem by calling large, public meetings to inform communities about the intervention, thus increasing the anticipation of widespread benefits.

7.5.4 Pupil late-coming and absenteeism

The lateness and absence of some pupils from SOFIE club meetings was a cause of concern amongst workshop participants. Several club leaders noted that this impacted on their ability to complete planned activities and maintain continuity in pupils’ progress through the study guides. One male club leader stated:

...it was difficult for me to find extra time for late-comers to learn what their friends had learnt.

This was emphasised at schools following a relatively structured approach to club sessions and progress through guides (e.g. Kamunda and Pamoza). For a number of at-risk pupils, club attendance was infrequent and sporadic (see 6.5.3). Absence from clubs was associated with pupils’ household responsibilities: chores, assisting to farm the family fields or looking for *ganyu*. Interviews with pupils at case-study schools

49 Writing materials for use by the SOFIE sub-committees were distributed at training sessions. One bicycle was provided per school, predominantly for use by the club leader, but with the agreement that it could also be used for follow-up visits or other SOFIE activities to be negotiated by the sub-committee.
confirmed such explanations, with a few boys noting that they were also sent on errands after school. One boy noted that frequent funerals in the area also contributed to his absence. At Kamunda, the school head explained that attendance at clubs had dropped during the winter months (June to August), a time when social events are more frequent (e.g. weddings, dances, football matches). However, the club leader argued that during that period pupils were deliberately absent or had lost interest, disillusioned by a perceived lack of support from the school (see 7.3.4).

In Pamoza, as with several other schools in, the majority of buddies were in Standard 8. An unfortunate consequence of this strategy was that these pupils withdrew after completing their final examinations. This proved a de-motivating factor for some at-risk pupils, leading to absence and withdrawal. For example, Mable, a 16 year-old girl who had a history of poor attendance at school, spoke of her experiences with her buddy:

I had a class buddy ... but she left after Standard 8 and got married at Mzimba boma, and since she got married I also stopped attending the SOFIE club, I was just disinterested. Before she got married she used to help me a lot with my studies. I was given another class buddy, but she never visited me.

Despite testimony at evaluation workshops to improved class attendance and engagement of many of the at-risk pupils, absenteeism from school remained a challenge. Reasons given by workshop participants related to factors mentioned above - predominantly pupils’ household responsibilities - whilst their schools’ own exclusionary practices remained largely unproblematised. Several schools, including Pamoza and Kamunda, had maintained school rules that saw pupils sent home from school if found without a clean uniform. These two schools also tightened up rules relating to pupil discipline, with the intention of improving punctuality and reducing absenteeism. However, pupils’ lateness to school often meant that they were not allowed entry to classes – excluding them from that day’s learning.

7.5.5 Parental Attitudes and Values

Several workshop participants linked pupil absenteeism and lateness to a perceived lack of support from parents and guardians. They noted that priority was instead given to the contribution of pupils’ labour to the household. The chair of the SOFIE committee in Namalongo explained, “Parents said I was disturbing their children as they couldn’t concentrate on household chores.”

A few workshop participants noted the continued pressure put on pupils to marry early. This was a particular concern in Mzimba district, where traditional strictures on marriage are more common. Responses from interviewed pupils at case-study schools were mixed. Some said their parents’ encouraged them to work hard and make the most of opportunities afforded by the SOFIE project. Other pupils spoke of a lack of interest
from their parents and guardians and a continued demand for chores and errands at the expense of their participation in clubs.

7.5.6 Learning and progress

A small number club leaders and teachers (9 in total) listed a ‘mixed-bag’ of issues relating to at-risk pupils’ learning and their participation in clubs (Table 7-6). This included comments on some pupils’ lack of interest, or their greater interest in the games and sports offered by the clubs than the learning activities. Others noted that some were unwilling to carry out homework tasks or simply copied answers from study guides rather than working through the exercises.

Related to this was a concern about the slow progress made through the study guides. A few participants expressed the view that the time allocated for topics within the guides was insufficient. Very few pupils from the schools visited, if any, had completed the study guides by the end of the academic year, yet the reasons for this were unclear. Some pupils argued that, given heavy chores at home, they had insufficient free time to study. However, it may also be that pupils were reluctant to establish their own pace of learning and ‘go ahead’ of lessons covered in club sessions, particularly where clubs used a fairly structured work plan. As such, absence from club meetings would also have slowed down the pace of learning.

7.5.7 Staffing and teacher transfers

Another challenge mentioned specifically by teachers and school heads was high workloads – resulting from understaffing – which put constraints on the time they had available for intervention activities. The transfer of teachers and school heads was also likely to have had an impact on the effectiveness of teachers’ support for the intervention. In Phalombe, the problem was particularly acute, with 6 teachers and 4 school heads transferred. Teachers from Duma and Namalongo had been transferred, and those taking their place complained of a lack of training. Changes of teachers affected the coordination of SOFIE activities and a few participants noted resultant difficulties in monitoring and follow-up of pupils, confusion over roles or poor relations between teachers and club leaders.

7.6 Chapter summary

This chapter has expanded on the process data and quantitative outputs presented in Chapter 6. It has shown how implementation strategies and activities were contested and adapted according to school contexts and participants’ expectations and understanding of the model, and their roles therein. Of note is that the study guides were not only used for independent study at home or with friends, but became an important tool for revision and re-enforcement of classroom teaching. Also of interest is the ongoing tension between greater
flexibility in educational provision, as advocated by the SOFIE model, and some schools’ tendency for more structured, time-bound approaches to learning. Similar tensions existed between support for vulnerable pupils and schools’ adherence to concepts of discipline.

The examples of Duma - and to a lesser extent at Namalongo – show that by adopting school-level policy change to support vulnerable pupils, school leadership was able engage with inclusionary concepts and address barriers inherent in the school context - predominately those related to school costs. In the other schools, however, school management maintained the view that barriers to learning were largely external to the school.

This chapter has also identified several qualitative outputs related to improved practices, support for learning, and increased motivation and well-being of pupils. Those implementing the intervention attested that many at-risk pupils had become more capable and confident learners. Several of the interviewed pupils confirmed improvement in reading and writing skills and, in particular, of greater ability in mathematics. Pupils’ experiences with face-to-face support, buddy systems and clubs revealed how the intervention model has the potential to produce important psychosocial benefits for children affected by HIV/AIDS (Textbox 3).

**TEXTBOX 3: KEY QUALITATIVE OUTPUTS OF INTERVENTION MODEL**

- Independent study to maintain continuity in learning
- Enrichment of classroom teaching and learning
- Capable and confident learners; some improvement in basic skills
- Improved participation in classroom activities
- Reduced discrimination amongst pupils
- Building of social networks; reduced isolation and anxiety (especially boys)
- Access to emotional support and encouragement (improved teacher support)
- Pupil motivation and re-engagement with school
- Improved school capacity in record-keeping, monitoring and follow-up

This chapter has also presented examples of a widening of benefits to pupils not targeted for support, through the sharing of ODL resources, guidance and counselling activities, improved school capacity in monitoring and follow-up and changes in discriminatory school policies.
Importantly, several outputs and changes were considered not only of intrinsic value to participants, but as instrumental in improving pupils’ participation and re-engagement with school, thus contributing to positive educational outcomes (the impact of the intervention is quantified and presented in Chapter 8).

Key challenges to the process of implementing the intervention included: mobilising and sustaining community involvement; community expectations and concerns regarding the selection process; some pupils’ poor attendance at clubs; pupils’ household responsibilities and socio-cultural pressures to leave school; and some schools’ continued stance on discipline and exclusion. Gender differences were noted, with boys appearing to have shown greater benefit from engagement with the intervention.
CHAPTER EIGHT: IMPACT OF THE INTERVENTION ON DROPOUT, PROMOTION AND ATTENDANCE

This is the second of two chapters presenting findings from the evaluation of the school-based intervention. It addresses the research question:

To what extent can a more flexible model of schooling reduce dropout and repetition amongst orphaned and vulnerable children in high HIV prevalence communities in rural Malawi?

8.1 CHAPTER OVERVIEW

This chapter presents results from the statistical analysis of the quantitative data collected during Phase Two of this study’s research design. It assesses the short-term impact of the intervention on dropout and promotion amongst Standard 6 pupils in the sampled primary schools.

Following a description of the school sample and pupil sample, the results of a preliminary analysis of school-level data on class dropout and promotion rates are presented. This is followed by the results of a logistical regression analysis of pupil outcomes, which largely confirmed the school-level results. These analyses find evidence of significantly lower dropout of Standard 6 pupils from intervention schools. To examine the extent to which more vulnerable pupils benefited from the intervention effects on dropout, exploratory loglinear analysis was carried out for different sub-groups of pupils within the intervention schools. With reference to a comparison group created for the SOFIE project using propensity match scoring, intervention effects on children selected for at-risk membership are also examined.

8.2 DESCRIPTION OF THE SCHOOL SAMPLE

Analysis\(^{50}\) of school characteristics shows that the process of random assignment of schools to control or intervention group had achieved equivalence between groups in almost all observed variables, creating a balance between groups (see Table 8-1).

Although school and class size did not differ significantly between experimental groups, they varied widely within groups. School enrolment ranged from 353 to 2982 pupils in the intervention group and 385 to 2426 pupils in the control group. Standard 6 classes ranged from 23 to 217 pupils in the

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\(^{50}\) Each continuous variable was tested for assumptions of normality (Kolmogorov-Smirnov test) and homogeneity of variance (Levene’s test). Two variables that violated these assumptions were analysed using a non-parametric Mann-Whitney U test for differences in means (school size, teacher GPI), those that did not were analysed using the t-test statistic. Categorical variables were tested using Pearson’s chi-square test.
intervention group and from 17 to 152 pupils in the control group. Schools in Phalombe (M = 1452 pupils) were consistently larger than those in Mzimba South (M = 723 pupils).

One difference between experimental groups was the gender parity index (GPI) ratio calculated for school enrolment. A lower mean GPI in the control group (0.93) compared with the intervention group (1.03), suggests that, on average, there were proportionally fewer girls enrolled in control schools. However, this figure masks wide variation across schools. Control schools ranged from GPI 0.75 to 1.19, whilst intervention schools ranged from GPI 0.83 to 1.22. Cross tabulations indicate that the difference in the average GP was due to a few large schools in the intervention group – located in fishing and trading areas of Phalombe - with particularly high GPI (i.e. where far fewer boys were enrolled). Whilst this pattern is also reflected in GPI for Standard 6 classes, these differences did not approach significance.

The pupil: teacher ratio (PTR) in both control and intervention groups reached almost 100 pupils per teacher (97:1 and 98:1, respectively). Overall, less than a third of the teaching staff was female. The average GPI of teaching staff was particularly low for schools in the intervention group (0.27), although differences were not statistically significant (Table 8-1). The greater GPI for the control group (0.53) was skewed by the presence of three outliers: large schools in Phalombe located at busy trading centres. Female teachers are more commonly deployed in semi-urban or urban settings in Malawi (DeStefano, 2011). All Standard 6 teachers in intervention schools were male, whilst in control schools four were female. All but two Standard 6 teachers were fully qualified (95%). Similar, but limited, numbers of teachers within the two groups had received training prior to the intervention on issues relating to vulnerable pupils (Table 8-1).

In Phalombe, six intervention schools and eight control schools were receiving assistance under the WFP feeding programme – creating an approximate balance across schools in this district. There was no school feeding programme in Mzimba South.

8.3 Description of Pupil Characteristics

8.3.1 Overall

Table 8-2 lists characteristics of pupils in intervention and control schools. These data were collected from instruments designed by the researcher for the SOFIE project: school tracking records and questionnaires administered during school visits at baseline and post-intervention (described in Chapter 4). Variables listed are either from the baseline or assumed to be unaffected by the intervention.
Pupils were evenly matched across the two experimental groups with regards age and gender. The mean age for both groups was 13 years (Table 8-2). Ages ranged from 9 to 20 in the intervention group and 11 to 20 in the control group. There were approximately equal numbers of male and female pupils within the two groups. Although there was a smaller proportion of girls compared with boys in the control group, this was not statistically significant.\(^{51}\)

Overall, there was a high degree of equivalence between the two groups. The only significant difference between the groups was among the sub-group of pupils who took the baseline English test administered for the SOFIE project. Scores in this test were higher for the control group. There was apparently a large difference in the proportion of children reporting having no breakfast in 2008, but this difference did not approach significance. The baseline difference in test scores was controlled for with regression analysis (section 8.5).

\(^{51}\) Pearson chi-square = 1.036 (1), \(p = 0.309\)
### TABLE 8-1: SCHOOL AND GRADE CHARACTERISTICS, BY EXPERIMENTAL GROUP

<table>
<thead>
<tr>
<th>School/Grade Characteristics</th>
<th>Intervention Group</th>
<th>Control Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>School size (enrolment)</td>
<td>890.7</td>
<td>501.5</td>
</tr>
<tr>
<td>Gender parity index(^{52}) (school)*</td>
<td>1.03</td>
<td>0.12</td>
</tr>
<tr>
<td>Standard 6 enrolment (term 1)</td>
<td>75.00</td>
<td>46.38</td>
</tr>
<tr>
<td>Gender parity index (Std 6)</td>
<td>1.03</td>
<td>0.29</td>
</tr>
<tr>
<td>Pupils per teacher</td>
<td>97.60</td>
<td>27.36</td>
</tr>
<tr>
<td>Gender parity index (teachers)(^{‡})</td>
<td>0.27</td>
<td>0.22</td>
</tr>
<tr>
<td>School performance (PLSCE)(^{53})</td>
<td>31.56</td>
<td>3.56</td>
</tr>
<tr>
<td>School Feeding programme</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Previous training (Std 6 teacher):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>6</td>
<td>(30)</td>
</tr>
<tr>
<td>OVC &amp; special needs</td>
<td>1</td>
<td>(5)</td>
</tr>
<tr>
<td>MOEST guidance &amp; counselling</td>
<td>5</td>
<td>(25)</td>
</tr>
</tbody>
</table>

\(^*\) p<0.05, **p<0.01; \(^{‡}\)significant evidence against assumption of equality of variance within groups

\(^{52}\) Gender parity index shows the proportion of females relative to males in a given sample. A ratio of 1 reflects equal numbers of females to males.

\(^{53}\) Percentage of Standard 8 pupils selected to secondary school, based on performance in Primary School Leaving Certificate Examination (PLSCE), 2007.
**TABLE 8-2: PUPIL CHARACTERISTICS IN INTERVENTION AND CONTROL GROUPS.**

<table>
<thead>
<tr>
<th>Overall</th>
<th>Overall N</th>
<th>Intervention Group</th>
<th>Control Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Freq</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>Female</td>
<td>2,767</td>
<td>783</td>
<td>(49.6%)</td>
</tr>
<tr>
<td>Single orphan</td>
<td>2,651</td>
<td>302</td>
<td>(19.8%)</td>
</tr>
<tr>
<td>Double orphan</td>
<td>2,651</td>
<td>81</td>
<td>(5.3%)</td>
</tr>
<tr>
<td>Repeating St 6 (2009)</td>
<td>2,767</td>
<td>230</td>
<td>(14.6%)</td>
</tr>
<tr>
<td>Transferred in (2009)</td>
<td>2,767</td>
<td>146</td>
<td>(9.2%)</td>
</tr>
<tr>
<td>Household status (2008)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living with both parents</td>
<td>1452</td>
<td>534</td>
<td>(63.7%)</td>
</tr>
<tr>
<td>Living with mother only</td>
<td>1452</td>
<td>132</td>
<td>(15.8%)</td>
</tr>
<tr>
<td>Living with grandparents</td>
<td>1452</td>
<td>76</td>
<td>(9.1%)</td>
</tr>
<tr>
<td>No breakfast (2008)</td>
<td>1,485</td>
<td>497</td>
<td>(62.2%)</td>
</tr>
<tr>
<td>Household received assistance (2008);‡</td>
<td>1,485</td>
<td>432</td>
<td>(55.0%)</td>
</tr>
<tr>
<td>Parent employed (2009)</td>
<td>2,004</td>
<td>164</td>
<td>(14.4%)</td>
</tr>
<tr>
<td>Absent at survey (2008)</td>
<td>2767</td>
<td>248</td>
<td>(15.7%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>M</th>
<th>SD</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>2,767</td>
<td>13.45</td>
<td>(1.64)</td>
<td>1,579</td>
<td>13.36</td>
<td>(1.67)</td>
</tr>
<tr>
<td>Baseline Maths exam score (2008)</td>
<td>1,662</td>
<td>4.52</td>
<td>(3.87)</td>
<td>963</td>
<td>4.79</td>
<td>(3.83)</td>
</tr>
<tr>
<td>Baseline English exam score (2008)*</td>
<td>1,662</td>
<td>5.78</td>
<td>(4.56)</td>
<td>963</td>
<td>6.60</td>
<td>(4.12)</td>
</tr>
</tbody>
</table>

* p<0.05 ‡ household receives remittances from other family members, within or outside Malawi.
TABLE 8-3: PROFILE OF PUPILS IN INTERVENTION GROUP, SHOWING AT-RISK MEMBERSHIP:

<table>
<thead>
<tr>
<th>Intervention Group</th>
<th>N</th>
<th>At-Risk Group</th>
<th>Not At-Risk Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Freq</td>
<td>%</td>
</tr>
<tr>
<td>Female</td>
<td>1578</td>
<td>117</td>
<td>(45.3%)</td>
</tr>
<tr>
<td>Orphaned (one or both parents)**</td>
<td>1527</td>
<td>211</td>
<td>(82.1%)</td>
</tr>
<tr>
<td>Single orphan**</td>
<td>1527</td>
<td>152</td>
<td>(59.1%)</td>
</tr>
<tr>
<td>Double orphan**</td>
<td>1527</td>
<td>59</td>
<td>(23.0%)</td>
</tr>
<tr>
<td>Repeating St 6*</td>
<td>1506</td>
<td>52</td>
<td>(20.3%)</td>
</tr>
<tr>
<td>Transferred in*</td>
<td>1521</td>
<td>16</td>
<td>(6.2%)</td>
</tr>
<tr>
<td>Older pupils (14 years or more)</td>
<td>1492</td>
<td>134</td>
<td>(52.1%)</td>
</tr>
<tr>
<td>Household status**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living with both parents</td>
<td>1149</td>
<td>35</td>
<td>(16.7%)</td>
</tr>
<tr>
<td>Living with mother only</td>
<td>1149</td>
<td>79</td>
<td>(37.6%)</td>
</tr>
<tr>
<td>Living with grandparents</td>
<td>1149</td>
<td>43</td>
<td>(20.5%)</td>
</tr>
<tr>
<td>Living in sibling-headed household</td>
<td>1149</td>
<td>5</td>
<td>(2.4%)</td>
</tr>
<tr>
<td>No breakfast 2008*</td>
<td>1337</td>
<td>110</td>
<td>(48.7%)</td>
</tr>
<tr>
<td>Household received assistance</td>
<td>1484</td>
<td>58</td>
<td>(44.3%)</td>
</tr>
<tr>
<td>Mzimba South</td>
<td>1578</td>
<td>105</td>
<td>(40.7%)</td>
</tr>
<tr>
<td>Phalombe</td>
<td>1578</td>
<td>153</td>
<td>(59.3%)</td>
</tr>
</tbody>
</table>

* p<0.05; **p<0.01
8.3.2 At-risk group

Table 8-3 lists characteristics of pupils from the intervention group only: showing those who were registered for targeted support (at-risk) alongside those not selected (not at-risk). Older pupils (14 years and above) were recruited into the at-risk group in approximately equal numbers as younger pupils (52.1% and 47.9%, respectively), with no significant difference between the at-risk group and those not at-risk. Overall, there was no significant difference in the proportion of girls and boys registered as at-risk, with just under half of all at-risk pupils being female (45.3%). This masks variation between districts. Fewer girls were registered as at-risk in schools in Mzimba South compared with boys. Subsequent chi square tests found this difference to be significant ($p<0.05$).

Table 8-3 highlights several key characteristics by which the at-risk sub-group differs from other Standard 6 pupils in intervention schools. Most notably, the vast majority of at-risk pupils (82.1%) had lost one or both parents, compared to a relatively small proportion of those not at-risk (13.6%); a figure comparable with the national rate of 13% (NSO and ORC Macro, 2011). This association between orphan status and inclusion in the at-risk group was highly significant ($p<0.01$) overall and across both districts. Almost a quarter of at-risk pupils (23.0%) were double orphans, compared to just 1.7% of those pupils not selected. In Phalombe district this rose to almost a third of all at-risk pupils (30.3%). Just over a fifth (20.3%) of the at-risk pupils were repeating Standard 6, a figure slightly, but significantly higher than the proportion of repeaters amongst those not selected (14.3%). Pupils that had transferred into the intervention schools during the school year were less likely to be found in the at-risk group.

As a crude measure of poverty and vulnerability the variable for whether a pupil reported having had breakfast showed significant association with inclusion in the at-risk group ($p<0.01$). Almost half of pupils in the at-risk group reported having no breakfast (48.7%), compared with 34.8% of pupils not at-risk. Greater

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54 Pearson chi-square test = 2.251(1) , $p = 0.134$
55 Pearson chi-square test = 4.114(1) , $p = 0.043$
56 Pearson chi-square test = 532.5 (1), $p = 0.000$
57 Calculated odds ratios (OR) show that the likelihood of an orphaned pupil being included in the at-risk group was 30.5 times higher than those with both parents living
58 Pearson chi-square test = 5.88 (1), $p = 0.015$
59 Measures were computed from pupil questionnaire data, but such information was not available to schools at the time of the selection process. Thus, selection by school and community members was done independent of results from the baseline, but based on their own knowledge and observations.
60 This proportion is nonetheless very high, suggesting that the at-risk group did not include all pupils vulnerable in terms of poverty or hunger.
proportions of at-risk pupils reported staying in female-headed households (mother only), with grandparents or in sibling-headed households (Table 8-3).

8.4 Preliminary Analysis

8.4.1 Class dropout and promotion

The impact measures used in this study were dropout and promotion rates, both at school (class) and pupil level. Table 8.4 lists the mean class dropout\textsuperscript{61} and mean class promotion\textsuperscript{62} rates for intervention and control groups, by district. Overall, mean class dropout rates were lower in the intervention group (7.34\%) than the control group (12.81\%), and lower in Mzimba South schools across both groups. Class promotion rates were slightly higher for schools in the intervention group, but this was not found to be significant.

Analysis of mean dropout and promotion rates was carried out using the Mann Whitney U test for significance. Although assumptions of equality of variance and normal distribution were tested for and met, concern over the small sample size led to the decision to use a non-parametric test.

**TABLE 8-4: MEAN DROPOUT AND PROMOTION RATES, BY GROUP AND DISTRICT**

<table>
<thead>
<tr>
<th>Group/District</th>
<th>Dropout rate (%)</th>
<th>N</th>
<th>Promotion rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean  SD  Range</td>
<td></td>
<td>Mean  SD  Range</td>
</tr>
<tr>
<td>Intervention</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mzimba S</td>
<td>4.14  3.35 0.0 to 11.1</td>
<td>10</td>
<td>64.44 12.84 43.5 to 83.3</td>
</tr>
<tr>
<td>Phalombe</td>
<td>10.55 4.58 4.4 to 19.2</td>
<td>10</td>
<td>68.56 12.52 46.1 to 81.7</td>
</tr>
<tr>
<td>Total</td>
<td>7.34  5.10 0.0 to 19.2</td>
<td>20</td>
<td>66.50 12.51 43.5 to 83.3</td>
</tr>
<tr>
<td>Control</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mzimba S</td>
<td>10.98 7.82 2.9 to 22.7</td>
<td>10</td>
<td>60.25 23.56 22.5 to 90.7</td>
</tr>
<tr>
<td>Phalombe</td>
<td>14.63 6.92 5.7 to 27.1</td>
<td>10</td>
<td>63.09 15.56 31.9 to 76.3</td>
</tr>
<tr>
<td>Total</td>
<td>12.81 7.42 2.9 to 27.1</td>
<td>20</td>
<td>61.67 19.49 22.5 to 90.7</td>
</tr>
</tbody>
</table>

\textsuperscript{61} Percentage of pupils per class that withdrew from school during 2009 for a minimum of 8 weeks and had not returned by the end of the school year, as a proportion of class enrolment (excluding transfers out).

\textsuperscript{62} Percentage of pupils per class selected for promotion at the end of 2009, as proportion of class enrolment (excluding transfers out).
Overall, the mean class dropout rate was significantly higher in the control group ($p= 0.011$). This provides evidence to reject the null hypothesis of an absence of impact on dropout. It indicates a significant reduction in dropout in the intervention group compared with the control group over the course of the school year. For promotion rates, there was no evidence to conclude that any observed difference between experimental groups was significant ($p = 0.583$).

### 8.4.2 Pupil Outcomes

Overall, 128 pupils (8.1%) of those enrolled in Standard 6 dropped out from schools in the Intervention group compared to 147 pupils (12.4%) in the control group. Of those remaining in school (excluding transfers out), 1000 pupils (63.3%) from the intervention group were selected for promotion to Standard 7, compared with 726 pupils (61.1%) in the control group (see Table 8-5). Promotion was based on pupils’ performance in end-of-year exams.

During the school year, 10 at-risk pupils (3.9%) transferred to another school (1.9% in Mzimba, 5.2% in Phalombe) and 13 (5.2%) dropped out (2.9% in Mzimba, 5.9% in Phalombe). All but two of those who dropped out did so to get married. Of those who were registered as at-risk, 179 (72.2%) were selected for promotion to Standard 7.

#### TABLE 8-5: PUPIL OUTCOMES BY EXPERIMENTAL GROUP

<table>
<thead>
<tr>
<th>Pupil outcome</th>
<th>Intervention</th>
<th>Control</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Freq</td>
<td>%</td>
</tr>
<tr>
<td>Dropped out*</td>
<td>128</td>
<td>(8.1%)</td>
</tr>
<tr>
<td>Promoted to Std 7</td>
<td>1000</td>
<td>(63.3%)</td>
</tr>
</tbody>
</table>

* $p<0.05$

Cross tabulations of experimental group versus pupil outcomes and subsequent chi-square tests of association indicate that there was a significant association between experimental group (whether intervention or control) and whether or not pupils dropped out ($p= 0.000$). The odds ratio calculated from observed frequencies (OR = 0.62) suggest that the intervention reduced dropout by approximately 40%. No significant association between experimental group and pupils’ selection for promotion was found ($p= 0.762$).

---

63 Pearson chi-square = 15.51, $p= 0.000$, 5% level of significance  
64 Pearson chi-square = 0.92 (1), $p= 0.762$
8.5 **Regression Analysis**

Logistic regression analysis was used to examine further the likelihood of pupils in the intervention group dropping out or being selected for promotion, whilst controlling for possible group differences and baseline covariates. The binary dependent variables of dropout and promotion used in the regression model excluded those pupils that had transferred out (156) or died (2) during the school year. The dependent variables dropout was coded so that 0= did not dropout and 1=dropped out. The dependent variable for promotion was coded so that 0=not selected for promotion and 1=selected for promotion.

From preliminary analysis, district was expected to be a significant predictor of pupil outcomes and was controlled for in regression models. To control for possible variance *between* schools and observed differences between experimental groups at baseline, several school-level variables (school and class size, gender parity, pupil: teacher ratio, presence of school feeding programme) were included when building the regression models. Collinearity diagnostics indicated a limited collinearity between school size (enrolment) and class size. It was decided to run analysis with just one variable representing enrolment: school size. None of the school-level variables included were found to be significant predictors of dropout or promotion and were discarded from final models. Clustering of the effects of school-level factors *within* schools was also addressed. Standard errors were adjusted using school ID (40 clusters) when running logistic regression.

For pupil characteristics, variables for age and gender were included as covariates in regression models. Dummy variables for orphan status (single orphan and double orphan) were created from data collected by school tracking records. Pupils’ previous performance at school was expected to have influence on pupil outcomes, especially promotion. Furthermore, baseline English test scores appeared to be a genuine group difference between experimental groups (see Table 8-6). Baseline scores for English and Mathematics tests for the SOFIE project were included as covariates.

A proportion of pupils in the final pupil sample was not present for the baseline tests for reasons as summarised in the participant flow chart in Appendix 12 (absent, transferred in or repeated in 2009). Missing values for these baseline variables were imputed based on observable pupil characteristics. Prior to imputation, a comparison was made of characteristics of pupils present for the pre-test and those not present, to account for possible bias. No significant differences in pupil characteristics were found between these two sub-groups, apart from the fact that a greater proportion of pupils who had not sat the pre-test later joined the SOFIE clubs (Appendix 15).
Examination of collinearity diagnostics indicated that the models presented were fairly robust, with minimal shared variance between predictors and no appreciable difference between condition indexes, suggesting small changes in predictors would be unlikely to overly influence the models used (Field, 2009).

Table 8-6 summarises intervention effects on dropout and promotion, presenting both unadjusted estimates and adjusted estimates. Adjusted estimates control for group differences and/or other covariates. Further details of models run to control for various covariates are found in Appendix 14.

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Unadjusted Odds Ratio</th>
<th>Adjusted Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dropout</td>
<td>0.61**</td>
<td>0.60**</td>
</tr>
<tr>
<td></td>
<td>(0.408 – 0.913)</td>
<td>(0.417-0.852)</td>
</tr>
<tr>
<td>Promotion</td>
<td>0.75</td>
<td>0.80</td>
</tr>
<tr>
<td></td>
<td>(0.374-1.48)</td>
<td>(0.367- 1.75)</td>
</tr>
</tbody>
</table>

** p<0.01, * p<0.05; 95% confidence intervals in parentheses

### 8.5.1 Logistic Regression for Dropout

Logistic regression analysis confirmed that membership of the intervention group had a significant effect on the likelihood of pupil retention, with a 40% reduction in the odds of pupils in the intervention group dropping out. Table 8-7 summarises the final logistic regression model for the dependent variable dropout run and presents key covariates.
Table 8-7: Logistic regression analysis of pupil dropout

<table>
<thead>
<tr>
<th>Variables</th>
<th>B</th>
<th>Robust Standard Error</th>
<th>Significance (p value)</th>
<th>95% Conf. Interval</th>
<th>Exp (B) Odds ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>-0.517</td>
<td>0.109</td>
<td>0.005</td>
<td>(0.417-0.852)</td>
<td>0.60</td>
</tr>
<tr>
<td><strong>Covariates</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>District (Mzimba South)</td>
<td>-0.514</td>
<td>0.133</td>
<td>0.021</td>
<td>(0.387-0.924)</td>
<td>0.60</td>
</tr>
<tr>
<td>Sex (Female)</td>
<td>0.602</td>
<td>0.245</td>
<td>0.000</td>
<td>(1.402-2.375)</td>
<td>1.83</td>
</tr>
<tr>
<td>Age</td>
<td>0.490</td>
<td>0.108</td>
<td>0.000</td>
<td>(1.434-1.859)</td>
<td>1.63</td>
</tr>
<tr>
<td>Single Orphan</td>
<td>0.094</td>
<td>0.204</td>
<td>0.614</td>
<td>(0.763-1.581)</td>
<td>1.09</td>
</tr>
<tr>
<td>Double Orphan</td>
<td>0.176</td>
<td>0.311</td>
<td>0.500</td>
<td>(0.715-1.990)</td>
<td>1.19</td>
</tr>
<tr>
<td>Repeating Std. 6</td>
<td>0.122</td>
<td>0.219</td>
<td>0.531</td>
<td>(0.772-1.653)</td>
<td>1.12</td>
</tr>
<tr>
<td>Baseline Math Test</td>
<td>-0.013</td>
<td>0.020</td>
<td>0.110</td>
<td>(0.964-1.030)</td>
<td>0.99</td>
</tr>
<tr>
<td>Baseline Eng Test</td>
<td>-0.010</td>
<td>0.020</td>
<td>0.809</td>
<td>(0.952-1.041)</td>
<td>0.99</td>
</tr>
<tr>
<td>Constant</td>
<td>-9.268</td>
<td>0.001</td>
<td>0.000</td>
<td>(0.000-0.011)</td>
<td></td>
</tr>
</tbody>
</table>

Model Wald chi-square value (9 d.f.) = 119.76 p<0.01
Standard errors adjusted for 40 clusters (school ID)
89.9 % of variance for dropout
N = 2,767

**District**

School-level analysis suggests that dropout differs significantly according to district (section 8.4). The analysis presented here also indicates that the district variable was strongly associated with dropout. Estimates show that the odds of pupils dropping out were significantly lower if located in Mzimba South (OR=0.60).

The differential effects by district on the level of dropout amongst pupils are not independent of the intervention. A significant District x Intervention interaction exists (OR= 0.51) (see Model 2, Table A14.1 Appendix 14), suggesting that the intervention was more effective at reducing dropout in Mzimba South. This resonates with process data, which demonstrated greater uptake and fidelity of the intervention model in Mzimba South (see Chapter 6). Figure 8-1 below shows the differential effect of the intervention between the two districts, illustrating the relatively greater reduction in dropout for schools in Mzimba South.
Age was also significantly associated with dropout. The model presented in Table 8-7 shows that each year added was associated with 63% increase in the odds of dropping out (OR=1.63). In intervention schools this trend was reversed. The significant Age x Intervention interaction shown in Model 5 (Appendix 14) indicates that intervention was particularly effective at reducing the likelihood of older children dropping out (OR=0.81). Figure 8-2 illustrates the increased probability of dropout as pupil age increases, with a substantial reduction in dropout for older pupils in the intervention group compared with the control group. There is an absence of any differential effects for children younger than twelve.
Gender

The sex of the pupil is also significant predictor of dropout. The model in Table 8-7 shows that when controlling other covariates, including district and age, the odds of dropping out was significantly higher if the pupil was female (OR = 1.83). The odds ratio for the Intervention x Sex interaction (OR = 0.80) indicates some reversal in this trend, but the interaction was not significant. (Model 5, Table A14.1 Appendix 14).

Other covariates

Independent of intervention effects, the orphan status of pupils was not significant in predicting dropout amongst pupils. Although somewhat surprising, this underlines evidence presented in Chapter 2 that for primary age children orphan status alone is not a strong determinant of whether a child is or is not attending school. There was no significant interaction between the intervention and orphan status variables. Any impact of the intervention on dropout was thus fairly evenly spread between orphaned and non-orphaned children.
The variables for English and Maths test scores were not significant predictors of dropout, nor was the variable for whether pupils were repeating their grade. There were no significant interactions between the intervention and any of the remaining variables.

8.5.2 Logistic Regression for promotion
Logistic regression analysis confirmed that membership of the intervention group had no substantive effect on the likelihood of pupils being selected for promotion. Both unadjusted and adjusted odds ratio estimates were not significant (see Table 8-6). Table 8-8 below lists the adjusted estimates for the regression model for promotion. (see also models 1 – 5, Table A14.2 Appendix 14).

District and school-level covariates
The district pupils were located in made no significant difference to whether they were selected for promotion or not (see Table 8-8). Neither was there significant interaction for District x Intervention indicating a lack of impact of the intervention on promotion (Model 2 Table A14.2 Appendix 14).

The teacher:pupil ratio had a small, but significant effect on the odds of promotion (See Model 5 Table A14.2 Appendix 14). No other school level variables were significant in predicting promotion, nor were there any significant interactions between any school-level variables and the intervention variable.

Pupil characteristics
Table 8-8 indicates that age was a significant predictor of promotion, with estimated odds ratios (OR=0.86) showing that for each additional year the odds of promotion were reduced by 24%. The sex of the pupil was not a significant predictor of promotion. However, when controlling for school-level variables and interaction effects between intervention schools and sex, the odds of girls being promoted was reduced significantly (OR=0.60). This suggests that girls’ chances of being promoted might be particularly sensitive to school factors compared with boys. As with dropout, pupils’ orphan status, or whether they were repeating the year had no significant effect on the likelihood of promotion. There were no significant interactions between variables for these pupil characteristics and the intervention.

Pupils’ performance in SOFIE baseline tests were found to have a small, but significant effect on the likelihood of promotion – for each point increase in test scores in English, the chances of being promoted increased slightly by 17% (OR =1.17).
TABLE 8-8: LOGISTIC REGRESSION ANALYSIS OF PROMOTION

<table>
<thead>
<tr>
<th>Promotion</th>
<th>B</th>
<th>Robust Standard Error</th>
<th>Significance (p value)</th>
<th>95% Conf. Interval</th>
<th>Exp (B) Odds ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>-0.222</td>
<td>0.319</td>
<td>0.578</td>
<td>(0.366-1.750)</td>
<td>0.80</td>
</tr>
<tr>
<td><strong>Covariates</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>District (Mzimba South)</td>
<td>1.198</td>
<td>0.417</td>
<td>0.604</td>
<td>(0.605-2.37)</td>
<td>1.19</td>
</tr>
<tr>
<td>Sex (Female)</td>
<td>-0.220</td>
<td>0.113</td>
<td>0.120</td>
<td>(0.608-1.059)</td>
<td>0.80</td>
</tr>
<tr>
<td>Age</td>
<td>-0.156</td>
<td>0.438</td>
<td>0.002</td>
<td>(0.774-0.946)</td>
<td>0.86</td>
</tr>
<tr>
<td>Single Orphan</td>
<td>0.143</td>
<td>0.273</td>
<td>0.466</td>
<td>(0.785-1.670)</td>
<td>1.09</td>
</tr>
<tr>
<td>Double Orphan</td>
<td>-0.153</td>
<td>0.311</td>
<td>0.500</td>
<td>(0.715-1.990)</td>
<td>1.15</td>
</tr>
<tr>
<td>Repeating Std. 6</td>
<td>0.217</td>
<td>0.324</td>
<td>0.405</td>
<td>(0.745-2.071)</td>
<td>1.24</td>
</tr>
<tr>
<td>Baseline Math Test</td>
<td>-0.016</td>
<td>0.428</td>
<td>0.706</td>
<td>(0.903-1.071)</td>
<td>0.98</td>
</tr>
<tr>
<td>Baseline Eng Test</td>
<td>0.154</td>
<td>0.020</td>
<td>0.809</td>
<td>(0.952-1.041)</td>
<td>1.17</td>
</tr>
<tr>
<td>Constant</td>
<td>9.397</td>
<td>1.315</td>
<td>0.041</td>
<td>(1.093-8.780)</td>
<td></td>
</tr>
</tbody>
</table>

Model Wald chi-square value (9 d.f.) = 132.67 p<0.01
Standard errors adjusted for 40 clusters (school ID)
70.8% of variance in promotion
N = 2,767

8.6 SUB-GROUP ANALYSIS

Having established evidence of the positive impact of the intervention on dropout, a set of log-linear analyses was conducted to examine the effects of the intervention on various subgroups of pupils within the intervention group\(^65\). This explores whether pupils most vulnerable and at greater risk of dropout were reached. Some inferences can also be made with regard to the spread of the impact – whether benefit was confined primarily to those who received the additional targeted support for pupils registered as at-risk, or whether others had also benefited.

\(^65\) A set of loglinear analyses was also run for the promotion variable. Final models produced were a poor goodness-of-fit, with no significant higher order interactions (3-way or 2-way), highlighting the absence of significant effects of at risk membership or pupil characteristics on promotion. This further underlined that likelihood of promotion was independent the intervention. Details of this analysis are not presented here.
Clearly, pupils fall into more than one of the sub-groups analysed. However, this exploratory analysis is useful as it identifies trends in dropout within the intervention group; and between those at-risk and those not. Such conclusions can only be drawn with the caveat that the at-risk group was relatively small (259 pupils) and observed trends should be best interpreted as indicative only.

Across all log-linear analyses reported below, the two-way at-risk x dropout interaction was found to be significant ($p < 0.05$)\(^{66}\), indicating a significant association between at-risk membership and dropout. Cross-tabulation of these two variables (Table 8-9) indicates that a smaller proportion of pupils registered as at-risk had dropped out (5.2%) compared with those not at-risk (9.1%). The calculated odds ratio shows that overall the chances of dropping out were reduced by almost half for those with at-risk membership (OR = 0.55).

### Table 8-9: Cross-tabulation of at-risk membership x dropout, within intervention group

<table>
<thead>
<tr>
<th>At-risk membership</th>
<th>Dropout</th>
<th></th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Dropped</td>
<td>Not dropped</td>
<td></td>
</tr>
<tr>
<td>At-risk</td>
<td>13 (5.2%)</td>
<td>235 (94.8%)</td>
<td>248</td>
</tr>
<tr>
<td>Not At-risk</td>
<td>114 (9.1%)</td>
<td>1136 (90.9%)</td>
<td>1250</td>
</tr>
<tr>
<td>Total</td>
<td>127 (8.5%)</td>
<td>1371 (91.5%)</td>
<td>1498</td>
</tr>
</tbody>
</table>

### Age Group

Table 8-10 shows the proportion of pupils in the intervention group who dropped out and indicates whether they had been registered in the at-risk group or not: these figures are presented separately for older and younger pupils. Log-linear analysis examined whether any observed differences were significant.

### Table 8-10: Pupil dropout by at-risk membership and age group, within intervention group

<table>
<thead>
<tr>
<th>Age group</th>
<th>Pupil Dropout (%)</th>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Not at-risk</td>
<td>At-risk</td>
</tr>
<tr>
<td>Older (14 years or more)</td>
<td>675</td>
<td>78 (14.3%)</td>
<td>10 (7.8%)</td>
</tr>
<tr>
<td>Younger (13 years or less)</td>
<td>737</td>
<td>33 (5.3%)</td>
<td>3 (2.5%)</td>
</tr>
</tbody>
</table>

The log-linear analysis produced a final model where the three-way interaction of age group x at-risk x dropout was not significant (i.e. it provided a poor goodness-of-fit for a model to explain dropout). However, the model retained the two-way interactions for age x dropout and at-risk x dropout. There was a non-

\(^{66}\) Pearson chi-square test statistic = 6.086 (1), $p = 0.0136$. 

200
significant association between age group and at-risk group\(^67\), indicating that there were approximately equal proportions of older and younger children within the at-risk group and amongst those not at-risk. This reflects the profile of at-risk pupils presented earlier (Table 8-3). The age group x dropout interaction was significant \((p < 0.01)\)\(^68\) confirming that pupils' age is a strong predictor of dropout amongst Standard 6 pupils. The at-risk x dropout interaction was also significant, \((p < 0.05)\)\(^69\), reflecting the significant association between at-risk membership and dropout.

However, the 3-way age x at-risk x dropout interaction was not significant\(^70\). This result indicates that, within the intervention group, the effect of at-risk group membership (i.e. a reduction in dropout) was similar for both younger and older pupils.

Earlier regression analysis between experimental groups indicated that, overall, the intervention had a significant association with age and impacted primarily on older pupils (see 0). Here, the absence of differential effects of at-risk membership on older pupils suggests that the reduction of dropout amongst older pupils also accrued to those not registered as at-risk. This is suggestive of impact through other means, such as spill-over effects from targeted activities or wider aspects of the intervention.

**Gender**

In examining gender differences, it was found that dropout was relatively low for male at-risk pupils, compared with female at-risk pupils, but that amongst those pupils not registered as at-risk, girls and boys dropped out in similar numbers (Table 8-11).

**Table 8-11: Percentage dropout, by at-risk membership and gender**

<table>
<thead>
<tr>
<th>Gender</th>
<th>Pupils Dropped Out (%)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Not at-risk</td>
<td>N</td>
<td>At-risk</td>
</tr>
<tr>
<td>Girls</td>
<td>745</td>
<td>57 (9.1%)</td>
<td>116</td>
<td>10 (8.6%)</td>
</tr>
<tr>
<td>Boys**</td>
<td>753</td>
<td>57 (9.2%)</td>
<td>132</td>
<td>3 (2.3%)</td>
</tr>
</tbody>
</table>

\(*p<0.01\)

---

\(^67\) Pearson chi-square test statistic = 2.753 (1), \(p = 0.0971\)

\(^68\) Pearson chi-square test statistic = 30.454 (1), \(p = 0.000\)

\(^69\) Pearson chi-square test statistic = 6.086 (1), \(p = 0.0136\),

\(^70\) Pearson chi-square test statistic = 0.026 (1), \(p = 0.8714\)
Log-linear analysis produced a final model that retained the 3-way interaction effect gender x at-risk x dropout. This highest-order interaction (gender x at-risk x dropout) was found to be significant (p < 0.05).\textsuperscript{71} Two-way interactions are confounded with the three-way interaction and are not reported here (Field, 2009).

To breakdown this three-way interaction effect chi-square tests were conducted on the at-risk and dropout variables, separately by gender. For boys there was a significant association between membership of the at-risk group and whether or not they dropped out (p < 0.01).\textsuperscript{72} For girls, there was no significant association between membership of the at-risk group and dropout\textsuperscript{73}.

Cross tabulation and standardised residuals indicate that differences were largely due to the lower than expected dropout amongst boys in the at-risk group (2.3%) compared to those not at-risk (9.2%). In contrast, there was relatively little difference in dropout for girls who had joined the at-risk group (8.6%) compared to those not at-risk (9.1%) (Table 8-11). The calculated odds ratio (OR= 0.23) indicates that the likelihood of boys dropping out was reduced by 77\% for those registered as at-risk compared with their peers. Whilst for girls (OR=0.94), the likelihood of dropout was only slightly reduced by 6\%. Figure 8-3 illustrates the differential effects of at-risk membership on the proportion of boys and girls dropping out.

\textsuperscript{71} Likelihood ratio = 4.767, $p = 0.029$
\textsuperscript{72} Pearson chi-square test = 7.080 (1), $p= 0.008$
\textsuperscript{73} Pearson chi-square test = 0.023 (1), $p= 0.879$
Pupils repeating their grade

The 3-way log-linear analysis run to examine any association between repetition, at-risk membership and dropout produced a final model where the two-way repetition x at-risk and the at-risk x dropout interactions were retained.

The repetition x at-risk interaction was significant ($p < 0.05$), reflecting the significantly greater proportion of repeaters in the at-risk group compared with those not at-risk (see Table 8-12). Consistent with other models, the at-risk x dropout interaction was again shown to be significant ($p < 0.05$), corresponding to lower dropout amongst pupils registered as at-risk.

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74 Partial chi-square test = 5.163 (1), $p = 0.0231$. 
The repetition x dropout interaction was not significant, however, indicating that repetition was not a significant predictor of dropout within the intervention group. Furthermore, the higher-level 3-way interaction repetition x at-risk x dropout was not significant. This result indicates that the effect of at-risk membership was roughly the same whether pupils were repeating Standard 6 or not. Table 8-12 shows similar patterns of reduced dropout within the at-risk group, for both repeaters and non-repeaters.

Table 8-12: Dropout by at-risk membership and repetition, within in intervention group

<table>
<thead>
<tr>
<th>Repetition</th>
<th>Dropout (%)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Not at-risk</td>
<td>At-risk</td>
<td>Total</td>
</tr>
<tr>
<td>- Repeaters</td>
<td>179</td>
<td>19 (10.6%)</td>
<td>3 (5.8%)</td>
<td>22 (9.5%)</td>
</tr>
<tr>
<td>- Non-repeaters</td>
<td>1195</td>
<td>95 (9.5%)</td>
<td>10 (5.2%)</td>
<td>105 (8.8%)</td>
</tr>
</tbody>
</table>

**Orphans**

Whilst the proportion of children who dropped out was reduced for the at-risk group overall, there was no significant differential effect on dropout between children grouped according to their orphan status. A 3-way log-linear analysis examining the interactions of orphan status (lost one or both parents), at-risk membership and dropout produced a final model that retained the two-way interaction effects: at-risk x dropout and orphan status x at-risk.

The former interaction reflects a significant association ($p < 0.05$) between being registered as at-risk and lower dropout, consistent across all loglinear analyses run. The latter interaction indicates a highly significant association between orphan status and at-risk membership ($p < 0.01$), reflecting orphan status as a key criterion in the selection process (see Table 8-3). However, the orphan status x dropout interaction was not significant, indicating that the orphan status of a pupil was not a significant predictor of dropout within intervention schools.

The highest order effects of the three-way interaction orphan x at-risk x dropout were not significant. This result suggests that the effects of at-risk membership on dropout were similar for both pupils categorised as

75 Partial chi-square test = 0.245 (1), $p = 0.621$
76 Likelihood ratio = 0(1), $p = 0.99$
77 Partial chi-square = 4.67 (1), $p = 0.030$
78 Partial chi-square = 311.29 (1), $p = 0.000$
79 Partial chi-square = 0.292 (1), p = -0.589
orphans and those categorised as non-orphans, with the caveat that the sample size for non-orphans was small and findings are indicative at best.

8.6.1 Effects of at-risk membership
The above loglinear analyses indicate that within the intervention group at-risk pupils were less likely to dropout compared with those not at-risk, but with the effects predominantly benefiting older children and boys. Yet in the absence of an equivalent control for the at-risk group, there remains the possibility that factors independent of the targeted intervention activities may have influenced this effect. To address the absence of a prescribed control group, additional multi-level regression analyses run for the SOFIE project used propensity score matching to identify, post-intervention, a sub-group deemed equivalent to at-risk pupils (see 4.8.2). This allows us to make further inferences from the data (Jukes, Jere and Pridmore, in press).

The first regards the selection of the at-risk group. Adjusted estimates controlling for pupil characteristics suggest that, independent of any interaction with the intervention, pupils in the at-risk groups were less likely to dropout of school (OR = 48) (see Appendix 16). One explanation for this finding is that those individual children selected to join the at-risk group were, in fact, not those most vulnerable to dropout. As highlighted in the regression analysis presented earlier, age and gender were strong predictors of dropout, but neither was used as specific criteria for selection. Conversely, the great majority of pupils registered were orphaned children. Yet analysis suggests that orphan status alone did not confer greater risk of dropout. An additional explanation is that other unmeasured factors may have influenced selection into the at-risk group; factors that precluded, or reduced, pupils’ likelihood of dropout. For example, the selection of pupils may have been influenced by pupils’ perceived merit or social capital. Suggestive of the former, unadjusted estimates indicate that pupils selected as at-risk were more likely to be promoted than those not at-risk (OR=1.34). This was the case for both intervention and control groups and thus independent of the intervention.

A second key finding from the analysis using matched at-risk groups suggests that whilst the reduction in dropout attributable to the intervention was greater among children deemed at-risk (OR = 0.40) than children not deemed at-risk (OR = 0.61), this difference was not significant. Furthermore, there was no significant interaction effect between the intervention variable and at-risk groups suggesting that the impact of the intervention (i.e. reduced dropout) was fairly evenly spread between targeted at-risk pupils and those not selected as at-risk.

One consideration in interpreting the statistical analyses is whether any measured impact on outcomes was simply due to the act of being evaluated, rather than any specific inputs or activities instigated under the
SOFIE project. This consideration becomes more pertinent given the observed absence of differential effects of the intervention on targeted and non-targeted children. The possibility of a Hawthorne effect (Brown and Dowling, 1998) was acknowledged and addressed in the research design (see Chapter 4), but cannot be discounted. This possibility and alternative explanations that support genuine spillover effects are discussed in Chapter 9.

8.6.2 Characteristics of intervention schools successful in reducing dropout

As a holistic package of resources and activities, designed to be implemented together, it is difficult to say with certainty which of the model’s components may have contributed to reducing in dropout, either in isolation or interaction with others. Analysis of separate process variables collected for the SOFIE project revealed little, except for two that were negatively correlated with dropout: schools where teachers had been trained under the SOFIE project and schools that kept up-to-date registers of at-risk pupils. Dropout was lowest (M = 5.2%) for the 13 schools with both of these characteristics compared with the 7 intervention schools with one or neither of these characteristics (M = 10.8%). Improvements in teachers’ record-keeping and monitoring, alongside acquired skills in supporting children affected by HIV/AIDS, were viewed as critical in tackling dropout, according to key informants in case-study schools.

8.7 Chapter Summary

This chapter has presented findings on the short-term impact of the intervention on dropout and promotion amongst Standard 6 pupils in 20 sampled primary schools. It has provided detailed profiles of the control and intervention groups used in the study’s experimental design, which confirm that the process of randomisation was successful. A profile of the at-risk group highlights that orphan status was a key criterion used for the selection of children to join this group. Age and gender appear not to have been major considerations, although these were found to be important predictors of dropout. A higher proportion of double orphans were registered as at-risk in Phalombe compared to Mzimba. This may reflect higher rates of co-infection in families in the southern region of Malawi. Of note is that significantly fewer girls than boys were recruited into the at-risk group in Mzimba.

Results provide evidence of a significant effect of the intervention on the overall retention of Standard 6 pupils, but no significant increase in the likelihood of being promoted to Standard 7. Overall, greater effects were found for older children. Within the intervention group, sub-group analysis showed that the effects of at-risk membership on dropout were consistent across the categories of age group, orphan status and repetition.
Differential effects were observed for gender, with at-risk membership providing little or no additional protective value for girls.

Comparison with a sub-group created to be equivalent to the selected at-risk group indicates that reduced rates of dropout were fairly evenly spread amongst at-risk and pupils not at-risk, and that selected at-risk pupils were not necessarily those most at risk of poor outcomes. Characteristics of schools with the lowest dropout rates were highlighted.
PART IV: Discussion and Conclusions.

CHAPTER 9: DISCUSSION OF FINDINGS

9.1 CHAPTER OVERVIEW

The research questions guiding this study have been addressed in earlier chapters: Chapter 5 presented the context of this study and discussed constraints facing children affected by HIV/AIDS with regard to their access to learning and retention. It also discussed several supportive factors at the personal-household-school interface. Chapters 6 and 7 focused on the intervention outputs and outcomes; the latter emerging from interviews and other evaluation activities carried out with research participants. Chapter 8 examined the short-term impact of the intervention on two key pupil outcomes: retention and promotion to the next grade, and unpacks the extent of the impact on vulnerable children.

The purpose of this penultimate chapter is to discuss key issues emerging from the findings of this study in relation to the literature and theoretical framework that informed the research. It synthesises findings from preceding chapters, drawing on both qualitative and quantitative data. The discussion is guided by concepts of inclusion in education, presented previously in Section 2.3. The chapter firstly reviews the barriers to education faced by children affected by HIV/AIDS in rural Malawi and considers how a more flexible model of schooling can reduce or circumvent these barriers (section 9.2). It then discusses pupil outcomes and additional psychosocial benefits that accrued to at-risk pupils (section 9.3) and highlights issues emerging from the use of targeted support (section 9.4). It finishes with consideration of means to promote greater inclusion in schools, especially for children affected by HIV/AIDS.

9.2 IDENTIFYING AND REDUCING BARRIERS TO ACCESS

The process of educational inclusion involves the identification and reduction of barriers to access and participation (Balescut and Eklindh, 2006; Booth and Ainscow, 2007). The first phase of the research presented in this thesis included the collection, interpretation and analysis of information on factors that constrain vulnerable pupils’ access and retention, in particular those affected by HIV/AIDS. A conceptual framework derived from identified constraints and contributing factors (see Chapter 5) underpinned the development of a package of flexible learning strategies and enabling activities to support learners.
Working within a transformative methodology requires the researcher to engage and give voice to research participants, seeking out those under-represented in traditional discourses (Mertens, 2007). As such, the research process that informs this thesis worked with a wide range of participants from school communities, including children and young people. An important aspect of initial field research (Chapter 5) was the involvement of out-of-school children and youth. Of the few, earlier school-based studies in Malawi that examined constraints on education for children affected by HIV/AIDS, evidence was primarily drawn from discussions with in-school children only (see, for example, Kadzamira et al., 2001). Whilst it is important to consider vulnerable children as being on a continuum of educational exclusion (Silver, 2007) – and may share similar circumstances and characteristics – this study was able to highlight some important differences between those in-school and those who had dropped out permanently: for example, the critical roles of emotional and financial support from significant others.

This study also identifies supportive factors that could be built on to improve access and retention. Such information was crucial to the adaption of the SOFIE model for the Malawi context. This information has also addressed an important knowledge gap in the published literature, which has largely taken a deficit perspective of factors influencing orphaned and vulnerable children’s schooling (see Chapter 2). These findings corroborate South African-based research activities that adopt an asset-based approach to developing inclusive school cultures. This identifies teachers’ and learners’ resources, skills and strengths as central to developing strategies to support vulnerable children (Du Toit and Forlin, 2009). An exploration of existing capacities in the school communities visited in this study revealed fairly positive attitudes amongst teachers towards orphaned and vulnerable children. However, this study also highlights the limited support available in schools, inadequate training and a reticence amongst some teachers to do more, confirming little change since earlier research in Malawi (Kadzamira et al., 2001; Kendall and O’Gara, 2007; Moleni and Ndalama, 2004).

Through the research process, several supportive factors related to pupils’ informal social networks, coping strategies, motivation and resilience emerged. This underlines the importance of individual and peer-related issues in any exploration of factors influencing educational access. These factors were included in subsequent analytical and conceptual frameworks (see Chapter 6). Such findings also speak to literature from childhood studies, which argue against the ‘othering’ of children affected by HIV/AIDS as passive victims and acknowledge their personal agency and competencies (Eloff, Ebersohn and Viljoen, 2007; Kesby, Gwanzura-Ottemoller and Chizororo, 2006; Meintjes and Giese, 2006).
Drawing on the theory of change outlined in Chapter 6, Table 9-1 below provides a detailed summary of some of the means by which the SOFIE intervention was able to disrupt and overcome barriers faced by children affected by HIV/AIDS, and where challenges remained.

Findings from this study support a growing body of research evidence – reviewed in Chapter 2 – that indicates that children affected by HIV/AIDS face educational disadvantages beyond those solely mediated by poverty, and require appropriate interventions to address these additional, specific needs (Kidman et al., 2012; see also Pridmore, 2008a; UNESCO, 2010).

The findings presented and summarised in Chapter 5 identify multiple, inter-related factors - including and beyond poverty - at the school, household and individual level that can influence the process of educational exclusion of children affected by HIV/AIDS. The following sections discuss several of the identified constraints and the lessons learnt with regard to the intervention’s success in overcoming these constraints. Table 9-1 summarises this discussion.
<table>
<thead>
<tr>
<th>Issues</th>
<th>Consequences for education</th>
<th>SOFIE model elements</th>
<th>Lessons Learnt</th>
</tr>
</thead>
</table>
| Lack of Family support            | • Death(s) and ill-health of family members lead to lack of material and emotional support (encouragement) for schooling.  
• Low prioritization of educational needs of orphaned children in host families  
• Poor motivation of learners                                                     | • Youth leaders to support pupils  
• SOFIE clubs for motivation & learning support  
• Provision of learning materials  
• Home visits by school/community & encouragement to stay in school                  | • Youth leaders friendly & supportive  
• Teachers and community members, provide encouragement & motivation.  
• Some buddies were a source of encouragement & motivation. |
| Poverty                            | • Absenteeism and withdrawal during times of food insecurity  
• Poor concentration in class due to hunger  
• Absenteeism/withdrawal because of school costs, inc. uniform.  
• Erratic attendance or withdrawal in order to seek paid work/food.  
• Few resources for independent study (or part-time classes)                       | • Flexible learning options  
• After-school clubs and study guides  
• Community mobilization to support pupil welfare  
• Provision of learning materials  
• Change school policies on uniforms                                                 | • ‘School-in-a-bag’ reduces school costs, improves access to learning materials.  
• Pupils use study guides when absent from class.  
• After-school clubs used for ‘catch-up’ and remedial support.  
• Fails to address hunger – lack of food.  
• Some schools still insist on ‘proper’ dressing and exclude pupils.  
• A few communities organized fundraising – resource mobilization limited  
• Lack of linkages with community organizations for support/referral |
| Household responsibilities         | • Erratic attendance & withdrawal when caregiving for chronically-ill  
• Poor attendance or withdrawal due to chores, paid work & farming.  
• Dropout to take on adult roles (sibling – headed households)  
• Reduced time for study/homework                                                 | • Flexible learning options  
• After-school clubs and study guides  
• Regular follow-up & home visits                                                  | • Pupils use study guides when absent  
• After-school clubs used for ‘catch-up’ and remedial support.  
• Absenteeism from clubs/class still a concern  
• Home visits identify problems, sensitize guardians on sending children to school.  
• Dropout out reduced for older children |
| Family crises and bereavement     | • Withdrawal due to death(s) or ill-health of family members  
• Poor participation and performance due to anxiety, sorrow and low self-confidence  
• Withdrawn or unruly in class                                                      | • Flexible learning options  
• After-school clubs and study guides  
• Provision of psychosocial support  
• Social interaction and support through club activities                           | • Pupils use study guides when absent  
• After-school clubs used for ‘catch-up’ and remedial support.  
• Emotional support from youth leaders/clubs/buddies reduced anxiety.  
• Counseling provided by teachers, but mainly advice on education/discipline |

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<table>
<thead>
<tr>
<th>Issues</th>
<th>Consequences for education</th>
<th>SOFIE model elements</th>
<th>Lessons Learnt</th>
</tr>
</thead>
</table>
| Stigma and discrimination    | • Social exclusion and marginalization; lack of community support  
• Intra-household discrimination and neglect lead to poor attendance, disengagement and/or dropout.  
• Isolation and poor participation at school due to teasing from peers  
• Teaching/ perceptions of HIV/AIDS can contribute to exclusion  
• Exclusion due to inadequate clothing (uniform) & learning materials, late-coming. | • Training of teachers & community members on working with children affected by HIV/AIDS  
• Use of community volunteers to support school/pupils  
• Regular follow-up & home visits.  
• Promote inclusive practices & address discrimination  
• Social interaction and support through club activities | • Increased awareness amongst teachers/ community of needs of vulnerable learners.  
• Home visits identify problems, sensitize guardians on sending children to school.  
• Youth leaders as advocates for ‘at-risk’ pupils.  
• A few schools organized activities to address discrimination; changed anti-poor policies and disciplinary actions that exclude.  
• Reduced teasing and discrimination between pupils  
• Curriculum and teaching of HIV/AIDS still needs to be addressed. |
| School environment            | • Poor identification, monitoring & follow-up  
• Ascribing errands and harsh punishments leads to missing classes, anxiety, absenteeism & dropout  
• Understaffing, teacher absence and poor motivation  
• Distance & poor school facilities | • School & community liaison to identify vulnerable pupils  
• Training & materials for monitoring & follow-up  
• Promote inclusive practices.  
• Use of community volunteers to support school/pupils  
• Training to promote rights & positive gender values | • Selection of ‘at-risk’ pupils source of tension in some communities.  
• Improved record-keeping, monitoring and follow-up of pupils.  
• Youth leaders assist teachers - good working relationship  
• Study guides used in lesson preparation.  
• Issues of quality of learning environment remain. |
| Girls                        | • Erratic attendance & withdrawal due to high demand for chores & care-giving  
• Embarrassment at poor clothing leads to absence  
• Poverty and envy lead to sexual risk, pregnancy & dropout  
• Neglect & family/social pressures lead to school exit and marriage  
• Sexual abuse at school – fear, pregnancy & dropout. | • Flexible learning options when unable to attend school  
• After-school clubs and study guides for ‘catch-up’  
• Follow-up & home visits  
• Training to promote rights & positive gender values  
• Community mobilization to support pupil welfare  
• Psychosocial support and counseling | • Use study guides when absent from class.  
• After-school clubs used for ‘catch-up’ and remedial support.  
• Less follow-up of girls  
• Lack of female adults to provide counselling.  
• Lack of specific activities to promote girls’ participation and retention  
• SRGBV not addressed  
• Girls dropped out to marry |
9.2.1 Poverty and Food Insecurity

School Costs
Poverty is a major determinant of educational access in Malawi (Al-Samarrai and Zaman, 2007; Bennell, 2002; Kadzamira and Rose, 2003; Kidman et al., 2012). As such household wealth is in many ways pivotal in sustaining opportunities for children affected by HIV/AIDS to access learning and persist with their schooling. Research into rural livelihoods in Malawi underlines the serious impact of HIV/AIDS on household productivity, food security and purchasing power, as the labour capability of households is lost through illness and mortality; and scant resources are diverted to the care of the sick and funeral costs (Bryceson, Fonseca and Kadzandira, 2004; Doward, Mwale and Tuseo, 2006; Robson et al., 2006). A pilot SCT scheme in Malawi that targeted ultra-poor and labour-constrained households estimated that 70% of those households selected as in need were directly affected by HIV/AIDS (UNICEF, 2007). Using life histories and in-depth interviews, this study presents illustrative evidence of the cumulative impoverishment of households through HIV/AIDS-related morbidity and death, and, critically, has linked this to negative impacts on pupil attendance, participation and retention.

In Malawi, the removal of primary school fees has not been sufficient to address other school-related costs, and schooling is far from ‘free’ (Kadzamira and Rose, 2003). As with other SSA countries who have implemented FPE policies, poor households pay a high proportion of their income to put their children through school (UNESCO, 2010). Findings from this study confirm that as well as struggling to provide their children with uniform, writing materials and exercise books, households were expected to pay for any number of ad-hoc costs levied at the discretion of the schools. Inability to cover these costs led to children absenting themselves or deliberate exclusion from classes.

The school-in-a-bag provided by the SOFIE model, was reported to have reduced constrains on schooling by giving pupils greater access to learning materials, the costs of which were substantial for many impoverished households (see Chapter 6). A few schools also supplemented these resources with the provision of additional notebooks or exempted at-risk pupils from additional school payments.

The costs of supplying a uniform can be particularly prohibitive and result in poor participation in school or, as shown in this study, dropout. These findings corroborate those of other studies. In Ghana, one of the most common reasons for failure to attend school is the lack of a uniform (Dunne and Ananga, 2013). A study in western Kenya found that pupils receiving a school uniform who did not previously own one were 13% more likely to attend school (Holla and Kremer, 2009).
Under the SOFIE model, several schools sought to include pupils previously at risk of exclusion by changing school rules so that uniform was no longer a requirement to attend classes. However, in other schools, staff still adhered to such practices under the premise of maintaining discipline or promoting equality. Greater guidance from district-level supervision is required to ensure that schools understand their responsibility to open up schools to all children and implement the national policy that bans the requirement of uniform.

**Food insecurity and hunger**

Food insecurity and hunger and their effects on school participation were underlying concerns amongst the rural school communities visited. As elsewhere in SSA, children’s educational access was strongly influenced by the seasonal nature of food sources and labour demands for farming (Hadley, 2010). Although part of the wider context of poverty in rural communities in Malawi, qualitative evidence from this study that suggest that children from impoverished HIV/AIDS-affected households were disproportionately affected.

School feeding programmes can help mitigate some of the worst impacts on pupil attendance, contributing to the inclusion of vulnerable groups (Uduku, 2011). However, findings here reflect a highly nuanced situation. Children in sibling-headed households or supporting sick or elderly adults, would still absent themselves from school to find means to supply food for their households, regardless of the provision of school meals. Take-home rations were limited to orphaned children and excluded others in need. In Phalombe, where approximately half of the schools had a school feeding programme, the absence of school feeding was not a significant predictor of dropout. The situation found at Namalongo was illustrative of a critique of such programmes that suggests a failure to reach those most vulnerable, including those affected by HIV/AIDS (Bundy *et al.*, 2009; Edström *et al.*, 2008).

As an educational response, the SOFIE model did not specifically address food insecurity or household costs, although, after training, a few SOFIE committees supported pupil welfare by fundraising to buy soap, flour and other items. Rather, the SOFIE model demonstrates how the wider impact of food insecurity on older children’s schooling may be mitigated by strategies that respond to coping strategies and household responsibilities. It shows how introducing greater flexibility in learning opportunities can move support for vulnerable children beyond the narrow deficit approach of targeted food inputs that, in isolation, may continue to exclude those unable to attend school regularly.
9.2.2 Household responsibilities and adult roles

The death of a parent or guardian can result in children, especially girls, taking on greater household responsibilities (Pridmore, 2008). Evidence from Malawi and neighbouring countries identifies such responsibilities (domestic labour, resource-collection and income generation activities) with increased absence and dropout from school (Dachi and Garrett, 2003; Kadzamira et al., 2001; Kadzamira and Nell, 2004; Nankhuni and Findeis, 2004; Robson and Sylvester, 2007). Thus, any school-based intervention to support children affected by HIV/AIDS has to respond to the impact of children’s work on their access to education (UNAIDS IATT on Education, 2009).

These findings confirm that children affected by HIV/AIDS often become increasingly involved with domestic labour and/or resort to paid work and other income generating activities to support their households, and themselves. This can result in reduced time for study, increased absenteeism and/or withdrawal from school, with girls and older children particularly affected. Moreover, during periods of ill-health of a parent or guardian, children take on a largely hidden, but active role in providing palliative care at home or in medical centres, or seeking out other sources of help. Such activities demonstrate how adult morbidity can seriously curtail children’s access to learning (Ainsworth, Beegle and Koda, 2005; Thirumurthy, Zivin and Goldstein, 2007) and highlights their social exclusion within the wider community (Pridmore, 2008a). Yet these activities may be vital coping strategies for households affected by HIV/AIDS (Evans and Becker, 2009; Robson, 2004).

In some circumstances, children’s work can support their continued access to school. In a survey of primary and secondary schools in two southern districts of Malawi, 28% of orphaned boys stated that they worked to pay for their education (Kadzamira et al., 2001). Examples in Chapter 5 corroborate this, describing how several children worked to raise money for school costs. Findings affirm an increased use of children's work to support household and individual needs under the impact of HIV/AIDS; work that could both hinder and support their attendance and retention at school. In the absence of widespread social protection schemes in Malawi, such findings reinforce the argument for greater flexibility in educational provision to support children who work (Lyon and Rosati, 2006; UNESCO, 2008b).

Flexible learning opportunities provided by the SOFIE model helped some vulnerable children circumvent barriers raised by their heavy involvement in household responsibilities and work. Qualitative evidence indicates that at-risk pupils used the study-guides when classes were missed because of household chores. Remedial support provided by the SOFIE clubs also allowed them to catch-up with work missed when absent from class. However, some at-risk pupils did not attend clubs regularly and this was often blamed on
household obligations or work. Some schools were able to reduce this problem by making home visits, highlighting the importance of mobilizing parents and guardians to support such initiatives.

9.2.3 Family crises and bereavement
The wider impact of HIV/AIDS on children’s lives often compounds and reinforces poverty-related challenges (UNAIDS IATT on Education, 2009). However, poverty alone is not sufficient to explain the educational exclusion of orphaned and vulnerable children (Kidman et al., 2012; Pridmore, 2008a). An important understanding from the qualitative data in this study is that the often sudden and life-changing process of impoverishment faced by children affected by HIV/AIDS can have serious psychological repercussions. Such anxiety and worry is further compounded by grief at the suffering and loss of a parent or adult relative (Chitiyo, Changara and Chitiyo, 2008; Mann, 2002). Critically, qualitative evidence suggests that the psychological impact of HIV/AIDS did impact negatively on children’s participation and performance in class, and persistence at school, although this varied considerably between individuals.

The specific nature of trauma and distress caused by AIDS-related loss highlights the need for specialised psychosocial support, one in which properly trained teachers can play a role (Campbell et al., 2014; Ferreira and Ebersohn, 2011). Counselling and pastoral care provided by intervention schools implementing the SOFIE model ranged from informal discussions during clubs with youth volunteers and/or fellow pupils to organised sessions – either in groups or individually – whereby pupils were offered ‘advice’ on continuing with schooling and the importance of education, and untrained community members were sometimes involved. In such cases, specialised techniques for counselling shared during training were not as taken up, limiting opportunities for structured, school-based psychosocial support. Yet, several at-risk pupils perceived such sessions as a form of ‘encouragement’ and noted how such attention motivated them to try hard at school. As with an earlier small-scale programme of psychosocial support for HIV/AIDS-affected children in Zimbabwe (Chitiyo, Changara and Chitiyo, 2008), combining activities that support socialisation alongside more formal school-based counselling appears to have had beneficial effects.

9.2.4 Lack of Family Support
Contrary to literature that suggests family scepticism when faced with the challenges of HIV/AIDS (Pridmore, 2008), interviews with parents and guardians in this study revealed that many perceived education as of particular value in providing orphaned children a secure future, anticipating a time when they would have to be self-reliant. This supports research from Malawi that suggests that parents’ anticipation of AIDS-related shocks can have a positive effect on their attitudes and investment in their children’s education (Grant,
Death(s) of relatives outside the immediate family, however, can adversely affect opportunities and motivation for learning and impact on decisions regarding pupils’ education, through the withdrawal of material or emotional support.

One key issue that emerges from this study is the importance of emotional support and encouragement for children's schooling. Mann (2002) touches on this issue, but does not relate it to education. Evidence from young people affected by HIV/AIDS, indicates that whilst material support was of primary importance, the presence of household or extended family members to take an interest in their schooling and encourage their attendance contributed positively to their persistence. The absence of such individuals – olimbiktsa – appeared to be closely associated with disengagement and dropout.

Having someone who provides emotional support, takes an interest and pays attention to whether they are in school or not - be it a buddy, club leader, teacher or community member – appears to have been of value to pupils who regularly experienced anxiety and isolation. This may, in turn, help to strengthen their engagement and retention in school. During evaluation activities, almost all at-risk pupils named teachers as people who were a source of encouragement and motivation - a notable absence during the earlier case studies. (see Chapter 6). Such instances illustrate the potential for teachers to provide psychosocial support to pupils (Ferreira and Ebersohn, 2011), even if in a relatively limited manner.

**9.2.5 Stigma and Discrimination**

**Intra-household discrimination**

Studies in Malawi, and elsewhere in SSA, have examined traditional and emerging patterns of inheritance and orphan care and have demonstrated increased child migration between households in the wake of HIV/AIDS, often to the detriment of the child's welfare (Case, Paxton and Ableidinger, 2004; Mann, 2002). Findings from this study indicate that child migration can start prior to bereavement, during periods of ill-health of parents or guardians, and in such situations children are often withdrawn from school. Furthermore, the described impact on schooling of child migration was diverse and largely associated with the level of care and/or discriminatory behaviour faced in new households. Interviews strongly suggested that intra-household discrimination contributed to the educational exclusion of children affected by HIV/AIDS, as highlighted elsewhere in the literature (Pridmore, 2008). However, supporting Ansell and van Blerk’s research (2004), interviews also revealed a strong personal agency amongst several in-school orphaned children with regard to household choice: a decision frequently based on their ability to access schooling.
School-related discrimination

In Malawi, legislation and government policy uphold all children’s right to basic education, and children affected by HIV/AIDS are not deliberately excluded from school. Yet this research has shown that informal school-level policies and rules discriminate against children from impoverished families. The exclusion of pupils from learning due to their inability pay for uniforms or other school costs not only demonstrates an insensitivity to the difficulties faced by many orphaned and vulnerable children, but flies in the face of government policy that shows commitment to:

Ensure that orphans are not denied access to primary education, whether by virtue of their inability to pay, their age and their gender


Following training at the start of the SOFIE intervention, some participating schools took action to address these constraints, either by changing school guidelines to accommodate vulnerable pupils, or waiving school costs for those registered as at-risk pupils. However, this was in less than half of participating schools.

In interviews, children affected by HIV/AIDS described few instances of stigmatisation in schools. This predominantly took the form of verbal teasing from fellow pupils; similar to the experiences of children documented in previous qualitative studies, but in settings outside of school (Bryceson, Fonseca and Kadzandira, 2004; Mann, 2002). Concerns that targeting vulnerable pupils for the intervention would increase stigmatisation and discrimination appear not to have been realised. Conversely, in many cases, greater interaction with buddies and fellow club members helped build social networks, and was said to have promoted a sense of umunthu amongst pupils, reducing pupils’ personal experiences of discrimination.

9.2.6 School environment

Effective identification and monitoring of vulnerable pupils is essential to providing them with necessary support and ensuring inclusion (Balescut and Eklindh, 2006). The level of monitoring and follow-up of pupils who attended irregularly or were at risk of permanent dropout varied considerably between schools visited during the initial case studies, although at best appeared ad-hoc and dependent on the initiative of individual teachers. Inadequate record-keeping, poor monitoring and follow-up meant that whilst affected children – and their household circumstances - were often ‘known of’ in their respective communities (Watkins, 2004), they remained a largely invisible group within the school (Kendall and O’Gara, 2007).

Following the intervention, school heads and teachers noted that training and resources provided by the SOFIE project had led to improvements in the monitoring of pupils in general and had encouraged more
regular attendance. The buddy system and after-school clubs also provided additional opportunities to keep in touch with and follow-up at-risk pupils. Analysis of process data from the SOFIE evaluation indicates that schools that kept up-to-date registers of at-risk pupils had the lowest dropout rates (see 8.6.2).

Yet, interventions to address barriers to pupils’ learning have to acknowledge and address the conflicting role played by schools. Qualitative evidence from this study indicates that the authoritarian ethos and discipline met at some schools - where teachers’ power of authority was often abused - had a direct impact on children’s engagement with schooling and their decision whether to continue or not. Older boys chaffed at harsh punishments and teachers’ habit of using them to run personal errands during school hours. This resonates with ethnographic studies in Ghana and Botswana that describe how teachers’ use of discipline played a substantive role in student absenteeism and the dropping out process (Dunne, 2007; Dunne and Ananga, 2013).

Examples of sexual harassment and abuse revealed by pupils and out-of-school youth reflect a substantial body of evidence of widespread gender-based violence in schools in Malawi, as elsewhere in sub-Saharan Africa (Burton, 2005; Kadzamira, Moleni and Kunje, 2006; Leach, Dunne and Salvi, 2014; Leach et al., 2003; Parkes and Heslop, 2011). Such practices not only threaten girls’ safety and health, but also conflict with teachers' potential role in providing *de facto* parental care, psychosocial support and guidance, and disseminating HIV prevention messages. Similar to situations described in Bryceson, Fonseca and Kadzandira (2004), the known sexual abuse of girls by a male teacher at Pamoza had led to a serious rift between the school and community.

Under the SOFIE project, teachers and youth leaders received training in child rights and to promote positive gender values. Club resources, such as the Choices and Decisions board game, include content on gender-related issues. However, such strategies did not actively address the presence of gender-based violence and corporal punishment, beyond helping to support enabling environment for discussion of such issues.

### 9.2.7 Pregnancy and Marriage

Findings strengthen earlier research claims that the poverty of many girls affected by HIV/AIDS increases their vulnerability to transactional sexual relationships or early entry into marriage (Bryceson, Fonseca and Kadzandira, 2004; Chawani and Kadzamira, 2003; Kadzamira and Chibwana, 2000) and show how vulnerability is exacerbated by intra-household discrimination and inadequate care and protection at home. Early entry into marriage – and pregnancy – marked the permanent exit from schooling for several adolescent girls interviewed and was the main reason for dropout of at-risk pupils. Findings indicate that marriage was
often used as a copying strategy entered into following a process of disengagement and/or dropout from school. This reflects findings from a study of DHS data from 20 SSA countries, which argued that the social-economic circumstances that predispose girls to early entry into marriage or risky, sexual behaviour are also those likely to increase their risk of dropout (Lloyd and Mensch, 2008).

Improved links to social protection and support for HIV/AIDS-affected households may have a positive influence over individual and family decisions about girls’ entry into marriage. For example, a Kenya programme providing free school uniforms saw a lowering of pregnancy rate by 17%, reduced dropout by 18% (Duflo, 2011). Several participants from this study suggested that the provision of learning materials might have reduced girls’ likelihood of involvement in risky and transactional sexual behavior. However, where strong social-cultural norms for early marriage are present - as is the case in the more remote parts of Mzimba visited - the drivers for early marriage may not always be economic (Save the Children Discussion Paper 2012). Evidence from this study suggests the need for common strategies to address poverty, intra-household discrimination, as well as improving the quality, safety and inclusiveness of the school environment, in order to improve girls’ persistence in upper primary.

9.3 Pupil Outcomes

Definitions of inclusion in education go beyond the need to ensure simply the presence and participation of all pupils, but to support equitable learning outcomes, progression and completion for all (Balescut and Eklindh, 2006; Campbell, 2002a; UNESCO, 2010).

9.3.1 Opportunities to Learn

For out-of-school children, increasing the flexibility of educational provision through non-formal education programmes, can greatly improve their access to learning. However, the integration of flexible learning strategies into formal education may create tensions, particularly where greater inclusion assumes children’s presence within existing school structures. Balescut and Eklindh (2006), for example, describe ‘presence’ to include how reliably and punctually children attend school. Paradoxically, whilst the SOFIE model was designed to provide learning support for those less able to attend classes, regular attendance was perceived by many participants as an important measure of success of the intervention. In several schools, staff tightened disciplinary measures in attempts to improve punctuality and attendance.

Perhaps a more useful concept for understanding the benefits of greater flexibility - and in particular the use of ODL strategies - for improving access is that of Opportunities-to-Learn (OTL), which examines pupils’ overall exposure to content, the quality of its delivery and schools’ provision of learning support for
marginalised children (Stevens, 1996). Qualitative evidence from this study demonstrates how access to additional learning materials designed for independent study and remedial support through clubs and buddy systems was able to enhance vulnerable pupils’ opportunities to learn.

9.3.2 Reduced Dropout

The quantitative analyses presented in Chapter 8 indicate that the SOFIE model did have a significant impact on pupils’ short-term dropout. Adjusted estimates from logistic regression models indicate an approximate 40% reduction in dropout in the intervention group during the course of the intervention compared with the control group. Analyses further indicate that the positive effects of the intervention on pupils’ dropout were not confined to those registered as at-risk, but spread across the wider sample of Standard 6 pupils.

Evidence that the intervention reduced short-term dropout for pupils who had not been explicitly targeted for additional support, begs the question as to whether observed effects were merely a circumstance of the schools being evaluated – the Hawthorne effect. Restricting the number of visits to both control and interventions schools attempted to minimise this. It is possible that requesting school leaders and teachers in intervention schools to keep additional monitoring information for evaluation purposes made them more conscientious and influenced outcomes. Yet this would be almost impossible to unravel, and largely redundant, as improving the capacity of teachers’ record-keeping and monitoring of pupils was a key component of the intervention model.

Qualitative data suggest a number of mechanisms whereby the intervention could have resulted in genuine spillover effects across a wider group of children:

Firstly, benefits accrued to at-risk pupils may have filtered out to the wider class. The majority of buddies recruited to provide peer support were drawn from Standard 6. They had access to SOFIE resources and participated in clubs’ academic, sporting and social activities. Being assigned a role as a buddy may have had a motivating effect on some children, encouraging their retention in school. Peer mentoring has been shown to improve the motivation of mentors as well as mentees (UNICEF, 2010). In addition, qualitative data showed that at-risk pupils often worked collaboratively and shared their study guides with other Standard 6 classmates.

Secondly, the training provided may have led to enhanced teacher engagement with their pupils. Improvements in record-keeping, monitoring and follow-up of pupils extended to all pupils in some instances, not just those targeted as at-risk, making it less easy for other absentees to slip through the net and
dropout permanently. Some teachers reported that they made use of study guides in the preparation of class lessons, enhancing the quality of teaching for the whole class, which in turn could support pupils’ participation and engagement with schooling.

Thirdly, in several schools changes in school-level policies and practices were made, as a result of training, to address school costs, help keep children in school and promote inclusion of vulnerable children. A few schools re-visited their discipline policies to ensure that children were not prevented from learning during class time and made attempts to improve attendance amongst all pupils. It seems likely that such initiatives would support a wider number of pupils beyond the at-risk group. Conversely, in schools where strict discipline was maintained and pupils were still sent home if without a uniform, this could impact in a similar way across the class, especially in schools with pupils not registered as at-risk, but still considered vulnerable.

Finally, in some schools there was indication of additional motivation amongst pupils in addition those targeted as at-risk. Key informants spoke of their involvement with the SOFIE project as a matter of pride, and noted that other pupils were eager to be considered for inclusion in SOFIE clubs at a future date; an expectation encouraged by some headteachers. Schools’ involvement in the project may have renewed interest amongst pupils in their school more generally, enhanced by additional SOFIE resources (e.g; radio, footballs, board games). As such, it is possible that inclusion in the project, regardless of additional targeted activities, would have motivated other Standard 6 pupils to stay in school.

It is also possible that spillover effects extended from intervention to control schools. In Phalombe in particular, some control schools were only 4-5 kilometres from intervention schools and some at-risk children may have shared resources with pupils from other schools. In effect creating a group of ‘shadow learners’ (Leigh and Epstein, 2012). Headteachers and PEAs responsible for intervention and control schools had opportunities to meet at district offices. If such spillover effects were present, the intervention effect sizes presented in Chapter 8 would underestimate the impact of the project on pupil outcomes.

In some schools, the effects of strategies designed to support at-risk pupils were diluted through limited fidelity of the model. In Phalombe schools in particular, where dropout rates were higher, findings indicated limited provision of teacher engagement and poor community support. It is difficult to say with certainty which model elements were critical in reducing short-term dropout, but dropout was lowest in schools whose teachers had received SOFIE training and kept up-to-date at-risk registers (see 8.6.2).

Assuming a genuine effect on school dropout, findings from this study suggest that schools can play an important role in tackling dropout. Strategies implemented through the SOFIE model to address learning and
social needs and enhance school capacities to support vulnerable children can reduce dropout overall - from around 12% on average in control schools to just over 7% amongst intervention schools - extending benefits through important spill-over effects.

9.3.3 Promotion

The second key pupil outcome for this study was the proportion of pupils progressing to the next grade. Quantitative analyses, whilst suggestive of an overall trend towards higher promotion rates in the intervention group, found no evidence that observed differences were significant (see Chapter 9).

The limited impact of the intervention on pupils’ selection for promotion may have been attributable to: the relatively short length of time that schools were engaged with SOFIE activities and learning resources, the intervention’s focus on just two curriculum subjects, and/or the requirements of end-of-year examinations (see Chapter 7). The late registration of many at-risk pupils and slow progress through the study guides, may have contributed to insufficient improvement in learning in relation to curriculum expectations. Analyses of test scores run for the SOFIE project confirm that the intervention had no significant overall effect on pupil performance (Jukes, Jere and Pridmore, in press). Moreover, designed to provide a supportive role, the SOFIE model did not address directly the quality of classroom teaching and its impact on pupils’ achievement.

In the sampled schools, grade 6 pupils’ likelihood of promotion was reliant on their performance in schools’ norm-based end-of-year exams. Promotion was based on either a pupil’s average score across all Standard 6 curriculum subjects or the sum of these scores (as many as 9 separate exams). In terms of inclusiveness, a concern emerging from this study is that pupils’ performance in end-of-year exams was a critical limiting factor to their progress, and likely to have a disproportionate effect on vulnerable pupils who were absent for one or more days during exams. These findings demonstrate how schools’ institutionalised practices lead to enforced repetition. This corroborates other research that highlights this issue, and argues that such repetition exacerbates age-grade differences and is likely contribute to pupils’ disengagement with schooling (Dunne and Ananga, 2013; Hunt, 2008).

This study demonstrates that promoting inclusion in formal school settings through the integration of flexible learning strategies can be limited by rigid and exclusionary approaches to assessment. Additional strategies for more flexible assessment procedures may also needed alongside those to improve access and support inclusion.
9.3.4 Additional Benefits

Building inclusion in education requires examination not just of vulnerable children’s access to learning and progression, but of outcomes related to the quality of their learning experiences and their persistence in the face of disadvantage (Campbell, 2002b). The mixed methods approach used for this study lends itself to insight into other outcomes of value to participants, outcomes that may also be instrumental in improving vulnerable children’s persistence at school.

The case study work undertaken for this research revealed wide variation in the ability of orphaned children and young people affected by HIV/AIDS to remain in school and learn during times of crisis. This highlights the importance of understanding pupils’ individual attributes and strengths, as well as promoting action that can build resilience (Clacherty and Donald, 2005). Evans (2010) relates the educational persistence of child carers in SSA to informal support networks, children’s level of interest and motivation and their aspirations. In other studies the provision of psychosocial support can help build confidence, reduce anxiety and develop better social interaction skills, leading to improved educational outcomes for (Chitiyo, Changara and Chitiyo, 2008; Clacherty and Donald, 2005).

**Improved skills and confidence amongst learners**

Whilst there was no significant impact on pupils’ promotion to the next grade, those implementing the SOFIE intervention attested that many targeted pupils had become more capable and confident learners. Several at-risk pupils reported personal improvement in reading and writing skills and, in particular, of greater ability in mathematics80.

Some at-risk pupils attributed improvements in learning specifically to their use of the study guides, and several highlighted the benefit of having the guides’ instructions translated into the local language. Moreover, working with youth volunteers recruited locally provided pupils with opportunities to ask questions and seek support in their own language. This speaks to the importance of using pupils’ first language to enrich curriculum delivery and enhance teaching and learning interactions (Hunt, 2008; UNESCO, 2010). It also agrees with arguments from research into the use of community-based volunteers to provide additional remedial instruction that such an approach can build a more inclusive learning environment, since recruited

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80 This reflects an analysis of test scores carried out for the wider SOFIE project, which suggested a slight positive intervention effect on Mathematics scores for the at-risk group with borderline significance, although this finding was not particularly robust (see Appendix 16)
volunteers share a common linguistic and cultural background with the pupils (Banerjee et al., 2005; Gao and Shum, 2010).

Pupils’ greater confidence and participation in class appear to be a result of pupils’ perception of their improved competency in English and Mathematics and their reduced shyness and anxiety. The latter was often linked to their involvement in collaborative learning, group work and social activities at SOFIE clubs.

**Pupil motivation and re-engagement with schooling**

Frameworks for the discussion of educational exclusion and inclusion are often silent on children’s personal agency (UNESCO, 2005; UNESCO, 2010), yet this research indicates that for many young people reached in this study, their personal motivation could make an important contribution to decisions regarding their persistence at school.

Key informants observed that the provision of educational resources (in particular the school-in-the-bag) and learning support had resulted in several pupils’ re-engagement with schooling and renewed interest in education. They noted that involvement with the SOFIE project had motivated pupils overall – at least initially – and had engendered a spirit of academic persistence in some at-risk pupils. For some this involved taking up opportunities for independent study and revision. For others, this led to a growing responsibility for their own learning, such as re-negotiating household responsibilities to improve opportunities for learning. Improved pupil motivation was also linked to psychosocial support and encouragement from teachers and youth volunteers.

**Building social networks and reducing discrimination**

Social networks are important for building resilience and supporting educational persistence, both in terms of peer friendships and supportive adults (Clacherty and Donald, 2005; Evans, 2010). The regular interaction of buddies and other club members through club activities and opportunities for cooperative learning resulted in some at-risk pupils forming friendships and widening social networks. This provided motivation, companionship and emotional support, helping to reduce social exclusion. For several boys, youth leaders were important in building a ‘sense of family.’ Another apparent benefit of at-risk pupils’ interaction with buddies and other pupils was that of greater unity – *umunhu* - amongst pupils and a perceived reduction in teasing and discrimination. This study also found evidence of improved relationship between teachers and pupils.
Commentary on the Esceula Neuva schools movement describes how cooperative learning opportunities can foster democratic behaviour and help reduce prejudice (Colbert, 2009). Without overstating the issue, findings from this study indicate the potential of flexible learning strategies to promote more democratic forms of schooling, believed by some to be critical to sustained educational inclusion (Engelbrecht, Oswald and Forlin, 2006; Harber, 2004). Furthermore, access to support provided by youth leaders and wider social networks could also enhance vulnerable pupils’ social capital through bonds established with others in similar situations and by building links within school and community hierarchies (Campbell et al., 2014; Pridmore et al., 2007). This, in turn, could have important implications for school retention, as well as wider issues of inclusion and social justice (Mitchell, Lange and Thuy, 2008; Tikly and Barrett, 2011).

9.4 TARGETING SUPPORT FOR LEARNERS AT RISK OF EXCLUSION

Enhancing inclusion in education requires education systems and schools to actively seek out and support those children most at risk of exclusion. Recommended strategies to improve educational access for children affected by HIV/AIDS frequently highlight the use of targeted support (see Chapter 2) However, careful consideration is needed of whether targeted support is reaching those most in need.

9.4.1 Identification and selection of beneficiaries

Findings from this study highlight issues concerning the selection of vulnerable pupils for school-based support. Working within a transformative framework, it was important for this study that the selection process should belong to the participating schools and their communities. A recent review of social protection programmes targeting vulnerable households recommends the involvement of community members and leaders in identifying beneficiaries as a means to reduce errors in inclusion or exclusion (Jones, Samuels and Malachowska, 2013). Research experiences during Phase 1 of this doctoral study strongly suggest that community involvement can enhance the process of identifying children made vulnerable by HIV/AIDS, by providing a ‘social audit’ (Watkins, 2004) of households’ circumstances.

Yet this strategy also brings with it the challenge of being reliant on participants’ views of vulnerability and their interpretation of who should be included. The selection of at-risk pupils may have been influenced by notions of pupils being ‘deserving’ (e.g. chosen on merit, or for a good attendance record) or by pupils’ social capital. Selecting pupils exhibiting poor school participation was contrary to schools’ experiences of other educational programmes, where targeted inputs were conditional on school attendance (Edström et al., 2008; Jukes et al., 2008) The prospect of ‘rewarding’ pupils for poor attendance was the source of some tension.
during the development of the intervention model, particularly in discussions with school management. Dissatisfaction with this concept may have influenced later selection choices. Also, where the targeted support is deemed to be of value, some community members may exert undue influence over who is included, so that those with less ‘voice’ or social capital can be excluded (Mosse, 2001). In Phalombe, some participants raised concerns over pressure from other community members to include their children on the at-risk register.

Local understandings of the concept of vulnerability were discussed with participants during case study visits, and a broad set of flexible guidelines for selection of at-risk pupils drawn up during later training workshops. Yet, analysis presented in the previous chapter indicates that the selection of at-risk children may have been based on criteria that failed to reach those most at risk.

Results revealed that pupils’ age and gender were significant predictors of pupil retention and promotion. In the absence of intervention effects, girls and older children were more likely to dropout and less likely to be promoted. This agrees with data on educational access in Malawi (see Chapter 2) and findings from this study that highlight pupils’ gender and position in their household as critical factors influencing access and retention, and age as a strong contributing factor (see Chapter 6).

However, the pupil profiles presented in Chapter 9 show that these characteristics were not foremost in selecting at-risk pupils. Older pupils (14 years and above) were recruited into the at-risk group in approximately equal numbers as younger pupils, across both districts And although girls were often viewed as more vulnerable to poor attendance and dropout, in Mzimba South, significantly fewer girls were targeted compared with boys. One reason suggested for girls’ lower rate of recruitment into the at-risk group in Mzimba schools was that fewer orphaned girls were present in upper primary, so that those (non-orphaned) girls present were perceived as ineligible for selection.

9.4.2 Using orphan status as a measure of vulnerability

With over 80% of at-risk pupils having lost one or both parents – a characteristic significantly associated with at-risk membership – the main criterion used by schools and communities to select at-risk pupils was orphan status; not surprising given the study’s emphasis on children affected by HIV/AIDS. Although orphaned children experience reduced access to learning in a range of different ways (see Chapter 6), a surprising finding was that orphan status was not a strong predictor of dropout or lack of promotion amongst Standard 6 pupils (see Chapter 8).
The reasons why orphaned children were no less likely to dropout than other Standard 6 pupils is not clear, but one possibility is that orphan status provides a visible indication of vulnerability that is more likely to attract support from communities and non-governmental organizations, the ‘lucky orphan syndrome’ (Schenk, 2009). Examples of this type of support were referred to during initial visits to the case-study schools, and may have had a positive effect on children’s persistence at sample schools. Another possibility emerging from the qualitative data is that a strong motivation exists amongst in-school orphaned children - where supported by a remaining parent or a guardian - to continue in education as a means to become self-reliant. Differences between the in-school and out-of-school young people interviewed in the case studies indicate that many of the in-school orphaned children were receiving some form of material and emotional support, whilst out-of-school youth had seen this curtailed. Put less positively, those orphaned children still in Standard 6 in the sample schools were the ‘survivors’, with other, more vulnerable, children having already dropped out.

Whatever the reasons, this finding underlines the difficulties in using orphan status as a proxy for the impact of HIV/AIDS on educational participation and as a means of targeting support. It also supports assertions that definitions of vulnerability in the wake of HIV/AIDS need to be more encompassing (Bennell, 2005; Boler and Carroll, 2003; Pridmore, 2007).

Moreover, the conceptual framework developed from Phase One of this study agrees with research studies that demonstrate substantive impact of HIV/AIDS on schooling prior to the death of a parent or guardian (Ainsworth, Beegle and Koda, 2005; Evans and Miguel, 2007). Qualitative evidence from this study indicates that such impact was associated with the re-location of affected children or adults, household impoverishment, pupils’ roles as carers and related anxiety (Chapter 6): circumstances far less easily identifiable by programmes using targeted support. For school-based programmes targeting children affected by HIV/AIDS, steps need to be taken to ensure that such targeting reaches out to other, ‘less visible’ children. In an encouraging move, subsequent to the fieldwork for this study, the Malawi National Statistical Office now includes additional measures of vulnerability for children in its household surveys, including measures for parental or adult morbidity.

9.4.3 Reaching those most at risk of poor educational outcomes

Analysis presented in Chapter 9 shows that although children found to be at significantly greater risk of dropout were not necessarily those selected for targeted support via at-risk membership, benefits of the intervention still found their way to many of these children. The intervention is shown to have significantly
reduced dropout amongst older children regardless of at-risk membership, most likely through spillover effects and the strengthening of enabling environments in schools, as discussed above.

Overall, both boys and girls in Standard 6 benefited from the intervention in terms of improved retention. Loglinear analyses suggest, however, that whilst there was a positive association between at-risk membership and reduced dropout for boys, there was no such association for girls. Thus, for girls registered and receiving targeted support, it appears that the intervention was less successful in reducing dropout compared with at-risk boys.

It is possible that implementation of core activities of the intervention model had differential effects on girls and boys. Process data from case-study schools suggest that girls experienced less follow-up when absent than boys. The adults to whom pupils had recourse for counseling and advice were predominantly male. The abuse of power relations in the provision of school-based counseling is a concern in Malawi, particularly in the absence of prominent female mentors (Kashoni, 2009). Interviews with some female at-risk pupils suggest inappropriateness in the attitudes and comments of some male teachers under the guise of counseling. Positive outcomes linked to the establishment of friendships and social networks were mentioned almost exclusively by at-risk boys. This latter finding suggests agreement with evidence from an evaluation of the Circles of Support, which infers that boys are more able to access wider support bases established within communities (Dhlamini, 2008).

Another possibility is that the targeted support provided by the intervention model was less able to overcome abiding gendered constraints on access and participation (discussed in Chapter 5): unfriendly and unsafe schools, the demand for household chores and care-giving, poverty-related issues such as inadequate clothing, as well as social and financial pressures to marry early (Colclough, Rose and Tembon, 2000; Davison and Kanyuka, 1992; Dunne and Leach, 2005; Kadzamira and Rose, 2003; Kadzamira et al., 2001).

No significant difference was found between boys’ and girls’ attendance at SOFIE clubs, suggesting that girls were equally able access these opportunities for learning. Evidence regarding opportunities for independent study was inconclusive, although it is likely that girls’ greater involvement in household work did not change substantively. The final point here seems crucial. Out of the thirteen at-risk pupils that dropped out, ten were female and all had left school to marry. This suggests that the targeted inputs and greater flexibility in educational provision in intervention schools was inadequate to address prevailing factors that affect
decisions regarding vulnerable girls’ education and early entry into marriage; whether socio-economic or cultural norms (Lloyd and Mensch, 2008), or related to girls’ identity and agency (Dunne and Ananga, 2013).

9.5 TOWARDS INCLUSION

Looking at education and schooling through an inclusive lens implies a shift from viewing the child as the problem to viewing the school, and the system, as the problem (UNESCO, 2009). Promoting greater inclusion necessitates the enabling of schools to support and maximise participation of all children (Du Toit and Forlin, 2009; Engelbrecht, 2004).

Findings have shown that building capacity in the identification, monitoring and follow-up of pupils ‘makes the invisible visible,’ and helps validate schools’ responsibility for their presence in school. Taking on a pastoral role, working more directly with children affected by HIV/AIDS, made participants more aware of the constraints and specific needs such children face. Some youth leaders became advocates for the needs of the children in their clubs.

Bringing about a shift in the professional mind set of school management and staff, from one of ‘equality of treatment’ to one promoting ‘equitable access, participation and outcomes’ (Campbell, 2002b) will be critical to the success of strategies such as flexible learning and targeted support, to reduce barriers to learning and embrace a diversity of needs amongst pupils.

Ainscow (2007) emphasises the need to develop capacity within schools to challenge deeply entrenched ‘deficit’ views of difference and to work with school cultures to change constructed norms. During Phase One, an emerging view of children affected by HIV/AIDS, particularly those orphaned, was that of being problematic, with challenging, sometimes unruly behaviour. Literature reviewed in Chapter 2 highlighted a concern that where educational inclusion takes on a strong normative stance this can invalidate children’s experiences and ‘othering’ those they seek to support (Sayed, Soudien and Carrim, 2003; Sookrajh, Gopal and Maharaj, 2005). However, with the SOFIE model and its buddying system and opportunities for collaborative learning, this appears not to have arisen; rather, such strategies were able to reduce isolation and reinforce common bonds between pupils.

As noted above, several schools in this study did make changes to constructed school norms and discipline that discriminated against vulnerable pupils, which is likely to have had important spillover effects within the school. However, in others, the entrenched authority of school management and teachers required such norms
to be maintained, ostensibly to uphold discipline and promote learning, even when such discipline may have
been little more than a facade, poorly enforced and open to abuse (Harber, 2004; Harber and Davies, 1998).

Ainscow (2007) also states that the process of building inclusion cannot ignore the context or social relations
that sustain or limit its development. This study has been able to examine the introduction of the SOFIE
model within the specific contexts of different school communities. In Duma, a change of leadership led to
positive changes in the school ethos and a push to address barriers to learning, producing an enabling
environment for the intervention. Conversely, Kamunda represented something of a failed school (Harber,
1998), with little effort made by school management to implement the intervention or seek out and support
vulnerable children. Staff at Pamoza seemed enthusiastic to take up the SOFIE model, but remained
authoritarian in stance and community linkages were weak, likely a result of strained relations between the
school, parents and other community members.

Studies in South Africa have noted the importance of developing cooperative relationships with parents and
guardians in order to build support for the differing needs of learners (Du Toit and Forlin, 2009; Engelbrecht,
Oswald and Forlin, 2006). A shortfall in the SOFIE model was the lack of direct partnership with parents and
guardians, using instead an elected committee as proxy for community involvement. Another consideration
would be whether efforts to support the inclusion of children affected by HIV/AIDS were seen as a
community concern.

9.6 Chapter Summary

This chapter has brought together key findings from the qualitative and quantitative data and analysis to
understand how a flexible model of schooling impacts on the learning and retention of orphaned and
vulnerable children. Using four key concepts of inclusion in education to structure the chapter, it has shown
the extent to which the SOFIE model of schooling was able to reduce or circumvent barriers to learning
identified in the initial case studies and provide additional support for children at-risk of dropping out. The
chapter has also presented important additional psychosocial outcomes emerging from qualitative data
collected during the intervention phase. It has raised important issues in relation to identifying beneficiaries
and targeting support for children affected by HIV/AIDS and has shown that spillover effects from core and
enabling activities can reach older children, most at risk of dropout, even when criteria for targeted support
selection may have excluded them. The chapter has also highlighted the need for greater awareness of gender
and parental involvement in the design and implementation of the intervention. The following chapter briefly
discusses the implications of these findings for policy and practice.
CHAPTER 10: CONCLUSIONS AND IMPLICATIONS

10.1 CHAPTER OVERVIEW

This study set out to examine the potential of an open and flexible model of primary schooling to address identified barriers to learning and improve vulnerable children’s access and retention. Its focus was on children from HIV/AIDS-affected households in rural Malawi. This final chapter summarises the key research findings of this study. It also highlights key issues raised by the study with regard to integrating ODFL strategies and resources within formal school structures - in this case through rural primary schools in high HIV prevalence areas. The chapter also briefly discusses the implications for future policy and practice suggests future areas for research and includes a personal reflection on my journey as the researcher in this study.

10.2 SUMMARY OF KEY FINDINGS IN RELATION TO EACH OF THE RESEARCH QUESTIONS

Answers to the three guiding research questions that have framed this study are summarised below. Together, they answer the central research question that considers the extent to which constraints on the educational access and retention of children orphaned or made vulnerable by HIV/AIDS in rural Malawi can be addressed - and inclusion enhanced - using a flexible model of schooling designed to complement conventional primary schooling.

RQ1: Within high HIV prevalence communities in Malawi, what factors influence access to learning and the retention of children made vulnerable by HIV/AIDS?

Phase One of this study identified barriers to children’s access and retention that were both specific to the impact of HIV/AIDS on households and individuals (e.g. bereavement, trauma, care-giving and responsibilities to support their households, stigma and discrimination and lack of adult care and support), as well as more general constraints on pupils’ access to learning and retention, which could have a disproportionate effect on children made vulnerable by HIV/AIDS (e.g. food insecurity and poverty, school costs, poor learning environments and violence and intimidation in schools). The extent to which these factors resulted in educational exclusion was dependent on several inter-locking factors, including: household composition and circumstances, children’s household responsibilities, their gender and position within the household, children’s motivation and individual resilience to times of trauma, and the availability of both material and emotional support for their schooling. The interplay between constraining and supportive factors
is critical in building understanding of the dynamics of pupils’ participation and retention, and had important implications for developing strategies to intercede, address barriers to learning and reduce risk of dropout.

RQ2: In what ways can a more flexible model of schooling benefit such vulnerable children and support their access to learning and retention? What challenges might be faced?

Resources and flexible learning strategies at the core of the SOFIE model helped to reduce costs for school materials and the self-study guides supported independent study to maintain continuity in learning. Buddy systems and after-school clubs further supported collaborative learning, remedial support and revision, reinforcing curriculum content present in the study guides and provided opportunities for children to catch up with their peers. Anecdotal evidence suggests that the study guides also supported the enrichment of classroom teaching and learning in some schools. For some pupils, interaction with the SOFIE model and its combination of flexible learning and additional learning and psychosocial support resulted in greater confidence in their own abilities, improved participation in school and classroom activities, greater motivation and renewed engagement with schooling. Pupils’ experiences with face-to-face support, buddy systems and clubs revealed how the intervention model has the potential to produce important psychosocial benefits for children affected by HIV/AIDS, such as improved social interactions, reduced isolation and anxiety and access to emotional support and encouragement. Improved teacher support and strengthened skills in monitoring and follow-up widened benefits not only to previously marginalized children, but also to other pupils within under-resourced and overcrowded schools. Changes in school policies identified by some participating schools as discriminatory opened up schools and supported a more inclusive ethos.

Key challenges to implementing the intervention included: mobilising and sustaining community involvement; community expectations and concerns regarding the selection process; some pupils’ poor attendance at clubs; household responsibilities that resulted in some pupils’ erratic attendance at clubs, socio-cultural pressures to leave school; and some schools’ continued authoritarian stance on discipline, which excluded some children from class, or from clubs. Gender differences were noted, with boys appearing to have shown greater benefit from engagement with the intervention. Generally, linkages with government structures and district and community-based organizations that support orphaned and vulnerable children were under-utilised.
RQ 3: To what extent can a more flexible model of schooling reduce dropout and repetition amongst orphaned and vulnerable children in high HIV prevalence communities in rural Malawi?

Analysis of quantitative data collected for the SOFIE project provide evidence that the SOFIE model had a significant effect on the overall retention of Standard 6 pupils, but no substantive increase in the likelihood of being selected to Standard 7. Reduction in dropout was greater in Mzimba South, possibly reflecting stronger fidelity with the developed model. Overall, greater effects on dropout were found for older children, who were more at risk of dropout than younger children. Within the intervention group, sub-group analysis showed that the effects of at-risk membership (i.e. reduced dropout) were consistent across the categories of age group, orphan status and repetition. Differential effects were observed for gender, with at-risk membership providing little or no additional protective value for vulnerable girls. Analysis using propensity match scoring found that intervention effects were fairly evenly spread between children registered as at-risk and those not at-risk. Thus, community selection of at-risk children may have been based on criteria that did not target those most at risk of dropout. However, the intervention still reached many of those most at risk of dropout, such as older children; likely a result of spillover effects and wider enabling activities implemented by participating schools and communities.

10.3 REFLECTIONS ON THE RESEARCH PROCESS

This section briefly discusses aspects of three key issues related to the research process: the relationship between researcher and participants, the used of a mixed methods design and the long-term impact and sustainability of the research.

10.3.1 Addressing Insider- Outsider dilemmas

In carrying out the research for this study I was concerned with the opportunities and challenges faced by researchers working across cultural divides, particularly given my experiences as long-term foreign resident in Malawi. Using a transformative framework, this study acknowledges the importance of grounding research in localised cultural contexts and highlights issues of language, identity and ‘cultural interpretation’. I was also aware that the uncritical adoption of Western concepts, such as those of vulnerability and childhood, renders certain members of researched communities invisible. The involvement of community members in developing and conducting the research helped counteract this and prevented over-reliance on research assistants from outside of the communities – themselves perceived as ‘town people’ and removed from local cultural nuances. I also benefited from a working knowledge in the local language to establish quality control
of the data and building an understanding of the rich, multi-layered meanings attached to respondents’ interpretations of their lives.

Further challenges and opportunities were raised by communities’ perceptions of the researcher: as a ‘honoured guest’ or, in the case of some teachers, as a ‘spy’ present to uncover failings of the school. Within communities, the ‘4x4 syndrome’ placed visiting research teams – complete with obligatory four-wheel drive vehicles – alongside development workers and raised expectations of aid. In tackling such perceptions, ethical considerations and openness were critical.

Drawing on the multiple identities and shared structural characteristics of the researcher and respondents also helps to build rapport (Chawla-Duggan, 2007; Sen, 2007). It was important for me to counterbalance my explicit image as a foreign academic, with long-established social and family networks within Malawi and acknowledgement of my additional roles as teacher and mother; and with first-hand experiences of living with orphaned children (my children’s cousins). In the give-and-take of building relationships with the respondents, I was guided by the belief that researchers cannot stand aloof, but need also to give of themselves (Merton, 1972; Sultana, 2007).

10.3.2 Working with a Mixed Methods approach

The main rationale for using a mixed methods approach for this study was to build a comprehensive understanding of the issues inherent in the research problem. Using mixed methods to collect process and qualitative data did provide important insights into the research context and participants’ engagement with the intervention and, for me, has underlined the value of combining methods in impact evaluation models (White, 2009).

Although there were significant advantages to using mixed methods in this study, this approach also brought both practical and methodological challenges. Collection, preparation and entry of a large quantitative dataset alongside qualitative data from multiple sources and time points had extensive demands on time and resources. With regard to resources, at least, this study benefited greatly from being attached to the SOFIE project, which provided sufficient funding for several field visits for consultation, planning and data collection, as well as training and funding of a small research team.

Another key challenge was decisions concerning the weighting and mixing of the quantitative and qualitative data sets. Tensions arose where participants’ views differed from findings from the quantitative data and analyses and careful consideration was required in what weight to ascribe to the various data when
interpreting the findings. A more positive outcome of attempting to balance the qualitative and quantitative data was the development of a process of analysis that acted as a ‘two-way street’ – where qualitative data might expand on quantitative results, but questions emerging from qualitative analysis could be answered by the quantitative process data.

Locating the mixed methods research within a transformative methodology underpinned many decisions in the research design and processes, and required the researcher to seek out and give voice to those often under-represented in traditional discourses (Mertens, 2007). An important aspect of initial field research was the involvement of out-of-school children and youth, which brought invaluable insights into the causes of dropout and informed the subsequent development of the intervention. However, an abiding concern for me has been the absence of subsequent benefit for participating youth. A transformative lens also brought tensions with regard to the overall project design, particularly the use of a randomized control trial to evaluate the intervention. An experimental design that excluded the control group from receiving the intervention brought an important dilemma to this study, particularly as a transformative framework places great significance on axiological beliefs and ethics. Mertens (2003) advocates for the use of alternative designs that do not deny treatment to a particular group, such as time-series designs, or use of alternative treatments. These or other options were not available under the parameters of SOFIE project. Instead I provided a minimum level of input to all schools (distribution of class registers) prior to the intervention and distributed additional inputs (textbooks81) to control schools post-intervention.

10.3.3 Long-term impact and sustainability

Issues of sustainability and the longer-term impact of interventions are problematic within time-bound research projects. My experiences from the research process speak to three possibilities within target districts. Firstly, involvement of PEAs, other district extension workers and CBO members in the research process meant the project was able to improve local capacity in research, monitoring and evaluation techniques, as well strengthen local knowledge regarding the barriers faced by children affected by HIV/AIDS and strategies to overcome these. Secondly, eight of the schools in the intervention group have now changed their exclusionary policies and discipline practices. If maintained, these changes could have a positive impact on children’s access and retention over the longer term. During district-level evaluation workshops, district officers and PEAs expressed interest in re-visiting school-level policies to ensure vulnerable groups were not excluded. Thirdly, many district and school-level stakeholders expressed willingness to continue with aspects

81 Standard 6 English and Maths textbooks provided by the MOEST for the SOFIE project
of the SOFIE model seen as successful (e.g. monitoring systems, clubs and buddies). To support this, both
electronic and hardcopies of all project materials were provided to district offices. However, an unanswered
concern amongst stakeholders was the sustainability of activities in the absence of funding for additional
training and incentives.

More broadly, links with the SOFIE project has supported the dissemination of research findings to different
audiences ages –both nationally and internationally – through research seminars, conferences, publications
and newsletters, as well as the SOFIE website. Through personal networks I was able to share research
findings with policy-makers and donor representatives. Unfortunately, a proposal submitted through the
SOFIE project to provide training for B.Ed students at the University of Malawi to develop study guides did
not meet with success. However, interest generated in the SOFIE project afforded me opportunities to share
experiences and provide input into the development of educational programmes currently taking place in
Malawi, such UNICEF’s child-friendly schooling programme and, more recently, a DFID Girls Education
Challenge-funded project to provide learning and life skills support to girls at risk of dropout or out of school.
The latter includes training for teachers and the use of after-school clubs and study guides to support girls’
learning82.

10.4 THE USE OF FLEXIBLE LEARNING STRATEGIES WITHIN FORMAL SCHOOLS

Many of the underlying principles of ODFL, such as flexibility, responsiveness to diversity and reducing
barriers to learning (Unterhalter et al., 2000), provide useful points of convergence with non-formal and
complementary education (Hoppers, 2006), concerns with social justice (Tikly and Barrett, 2011) and debates
and ‘best practices’ that advocate for greater inclusiveness in education systems and schools to promote
education for all (Booth and Black-Hawkins, 2001; Dei, 2005; Engelbrecht, Oswald and Forlin, 2006). The
SOFIE model and its success providing greater opportunities for learning and reducing dropout highlights the
potential of more open and flexible models of schooling to improve access and retention – in this case in high
HIV prevalence communities in Malawi. It has also highlighted the potential of low-tech ODFL strategies
and activities to improve non-cognitive skills and important psychosocial outcomes which, in turn, may
promote greater self-esteem, motivation and resilience amongst vulnerable young people (Clacherty and
Donald, 2005).

82 Details at http://www.tfacafrica.com/what-we-do/malawi/girls-education-challenge/
Consensus on the use of ODFL to deliver education in developing countries stresses the importance of effective tutoring and student support, including both teacher-student interaction and interactions between fellow students (Creed et al., 2005; Dodds, 2006; Perraton, 2007). Moves by traditional distance education programmes to incorporate face-to-face learner support to improve retention and success has seen a blurring of boundaries between ODL and other forms of educational provision (ADEA, 2002). In earlier decades, the low uptake of ODFL as a means of curriculum delivery primary level has been explained by the necessity of face-to-face support by a teacher, and the important role of the school in the socialisation of younger children (Unterhalter et al, 2000). Refuting these earlier concerns, the findings from this study have demonstrated that integrated face-to-face support, buddy systems and guided collaborative learning in less formal settings – led by youth volunteers rather than teachers – have the potential to enhance the learning experiences of vulnerable pupils and bring wider psychosocial benefits. This can result in more confident and motivated learners, critically tackling poor participation and subsequent ‘silent exclusion’ of learners (Gilmour and Soudien, 2009).

As innovation, the SOFIE model also offers positive experiences in the use of youth volunteers. Recruited and trained young people provided an alternative to making additional demands on teacher time in schools already understaffed and poorly resourced. Youth volunteers benefited from a sense of enhanced respect and position within their communities and were ideally placed to act as advocates and role models for vulnerable young people. Under the PSSP-SFP project in Dowa, a cadre of trained youth (MCM) worked with schools to promote reading and literacy in English, with some success (USAID/Malawi, 2008b; USAID/Malawi, 2009b). The MCM worked more remotely, with clusters of schools. However findings from this current study show real possibilities for young people working closely with individual schools and their staff. These findings also show how adopting greatly flexibility with regard to ‘who teaches’ (Harber and Davies, 1998) can open up learning and support to those previously marginalised, with relatively little resistance from schools. This has important implications for curriculum delivery and support, as primary education in Malawi is increasingly formalising the role of community-recruited volunteer teachers and teaching assistants (Steiner-Khamsi and Kunje, 2011). In the short-term, club leaders were motivated, but the sustainability of this approach was jeopardised in some instances by the absence of a regular stipend. As Yates (2000) argues, over-reliance on voluntary labour can become exploitative and, thus, counterproductive.

Clubs were generally run well and – apart from initial inputs – at low cost (see 10.6.1). As an integrated approach, and with the goodwill of school leadership, the intervention was able to use school infrastructure: a
challenge for parallel ODL programmes in SSA (ADEA, 2002). Whilst the use of a ‘buddy system’ was generally popular with pupils and staff alike, findings from this study show a need for greater clarity regarding buddies’ roles, some form of training, and consideration of incentives for their involvement.

Contrary to early literature on the integration of distance learning materials at the primary level (Nielsen, 1991), this study did not find that teachers were concerned about being displaced by pupils’ reliance on study-guides –externally produced materials initially unfamiliar to them. Several teachers used the study guides to support their own teaching, highlighting the role of integrated ODFL materials in enriching curriculum delivery (Creed and Joynes, 2005). Nor did teachers’ responses imply that they felt that club leaders had usurped their position within the school. Generally participants reported a good working relationship between club leaders and teachers.

The SOFIE model followed an integrationist approach, using ODFL strategies within formal schools (Yates, 2008). Supportive enabling activities, such as the monitoring and follow up of pupils, were a necessary component of the model and their benefits extending beyond targeted pupils to the wider class. However, lessons learnt from this study suggest that improving access through integrating ODFL strategies into school routines will depend on the extent to which schools’ exclusionary practices can be addressed, particularly with regard to the interplay between school authority and discipline, vulnerability and gender. This study highlights the need for more pro-active strategies to address inequalities in girls’ experiences of schooling.

An important finding arising from this study was the presence of tensions between advocating for greater flexibility and participants’ perceptions of educational provision. Key strategies were contested and integration often emerged as compromise between the potential advantages of ODFL strategies and resources and the expectations and needs of those implementing the intervention. Such tensions illustrated how participants were uncomfortable with innovation that strayed too far from conventional structures and norms associated with formal schools. In some cases, study guides’ use was adapted to support revision and remedial needs, allowing pupils greater flexibility and autonomy in the sequencing of their learning (ADEA, 2002). However, in other cases, pupils’ chances to progress at their own pace were limited by structured ‘time-bound’ approaches to the use of study guides in clubs. Furthermore, assessment procedures were a significant limiting factor to pupils’ promotion to the next grade.

Tensions also existed between school management’s reported desire to assist children affected by HIV/AIDS and the perception that the support provided by the SOFIE model was ‘rewarding’ vulnerable pupils for their lack of adherence to, what are essentially, post-colonial notions of school attendance and discipline (Harber,
Thus, whilst this study demonstrates how schools can use flexible learning to disrupt barriers to educational exclusion, it also highlights the need for a wider supportive environment that incorporates capacity-building for schools and communities and actively promotes a more open, inclusive and democratic philosophy within schools.

10.5 **Implications for Practice, Policy and Research**

10.5.1 **Implications of the findings for improvement of the intervention model**

In schools where fidelity to the developed model for flexible learning and support was maintained, several benefits have been described, and dropout rates reduced. However, challenges related to community involvement, gendered effects of the intervention and targeting suggest that the model could be improved in several ways.

Whilst every effort should be made to include community members in the identification of children for additional support, where quantitative data on pupil characteristics is available at baseline, analysis of such data should be done prior to implementation of the intervention package. This will allow a more thorough assessment of those groups of pupils most in need of support and reduce exclusion errors. This would require liaison with schools and districts to ensure that accurate data on pupil characteristics and outcomes was available. Linking the school-based surveys to a comprehensive household survey would provide more robust measures of additional predictors of pupil outcomes, such as the socio-economic status and education levels of household members.

One limitation of the intervention model is that without specific gender-related activities, it is not able to address adequately the needs and schooling experiences of orphaned and vulnerable girls, including those affected by HIV/AIDS. Further adaptation of the SOFIE model would benefit from specific strategies to support girls’ education and address girls’ experience of harassment and abuse (Leach, Dunne and Salvi, 2014). The recent initiative to extend child-friendly schooling programmes in Malawi that include the training of Mother Groups presents one such strategy (FAWE, 2012).

During discussions with school and district staff, parents or guardians of children registered as at-risk were generally conceptualised as recipients of support (e.g. through home visits, sensitisation meetings etc.), rather than perceived as able to take an active role in their children’s education. Parents were often described as illiterate and responsible for failure in their children’s education. Future development of the SOFIE model should consider means to bring parents or guardians into the centre of support for vulnerable children’s
education. This would need to address professional and cultural constraints that prevent strong linkages between schools, wider communities and households in need.

10.5.2 Implications of the findings for policy and wider practice

Evidence from this study has shown that a flexible model of schooling that combines low-tech ODFL resources and support with wider enabling strategies can improve learning opportunities and psychosocial skills for orphaned and vulnerable children, as well as significantly lower dropout rates for pupils overall.

Policy-makers and practitioners thus have available to them a framework for strategies that could be implemented at the school-level, both to provide affirmative action for pupils identified as most vulnerable and to enhance the accessibility and inclusiveness of schools. Critical to this, however, would be a comprehensive framework that draws on linkages with community-based support, training for teachers and social welfare programmes for those most in need. The success of piloted cash transfer programmes in Malawi offers one such important area for greater cross-sector collaboration (Miller and Tsoka, 2012).

Policy and practice options include:

- Consideration of the SOFIE model as a ‘toolkit’ of ideas and practices for schools to adapt to their own specific contexts and needs within an underpinning holistic framework. This would require initial participatory need assessments, actively involving schools, communities and expected beneficiaries.

- The use of self-study guides and out-of-school clubs not only as a ‘safety-net’ for vulnerable pupils, but also to provide additional teaching and learning support in schools struggling to deal with large class sizes, high rates of absenteeism and limited resources. Just such a scenario was raised in discussions with MOEST planners when reporting back the key findings of this research. Significantly, in the likely event of a policy shift to initiate change from institutionalised repetition to one of automatic promotion, such remedial support could prove invaluable for those at risk of falling behind the expected curriculum (Prichett and Beatty, 2012).

- Core elements of the SOFIE model could be adapted to support out-of-school children and youth to return to school, such as working children or girls who had previously withdrawn due to pregnancy. In Malawi, in recent years, there has been a significant push by the MOEST to support girls’ return to schools, in the light of policy demands and donor funding.
Another use of the SOFIE model could be to support learners completing the non-formal CBE programme in Malawi. Currently, the CBE model does not make provision for follow-on strategies to support children on return to formal education. Evidence from an evaluation of the CBE programme (Allsop and Chiuye, 2010) suggests that CBE graduates may feel uncomfortable and excluded on entry to formal schools. Buddy systems may be one way to smooth the transition.

The mobilisation of youth volunteers to support their local schools and provide additional learning support - either through after-school activities or as classroom assistants - appears to be a promising strategy. Suitable low-cost incentives could be put in place, such as small stipends and/or credit towards entry into future training opportunities (e.g. the current ODL teacher training programme).

Re-visiting school-level interpretation and implementation of guidelines on the wearing of school uniform and school discipline. Clear and widely disseminated policy guidelines are needed to reinforce the national policy that states that children unable to purchase uniforms should not be excluded from class.

Re-doubling of efforts to provide training for mentor teachers in psychosocial support and counselling for vulnerable pupils, including orphaned children and others affected by HIV/AIDS. Such training should also be extended to community representatives, such school management committee members or Mothers Group members.

Incorporating support for orphaned and vulnerable pupils as a priority for in guidelines for school-based decisions on resource procurement through the school capitation grants.

10.6 Implications for Further Research

10.6.1 The SOFIE model
Although evaluated as a holistic package, the SOFIE model consists of several distinct resources, strategies and activities. This study revealed how resources and planned activities were adapted and re-configured according to the learning needs, concerns and views of pupils and/or school staff. Further research to unpack and evaluate the different SOFIE model components would help inform policy decisions regarding the use of
flexible learning approaches. One way to approach this would be through small-scale action research studies working with local schools and communities. Intervention schools already familiar with the SOFIE model could be ideally placed to participate in such studies. An evaluation of the content and use of the study guides by local actors (including curriculum specialists) could provide invaluable recommendations for ways to roll-out the use of such guides, either as a ‘safety-net’ for vulnerable pupils or to provide more generic remedial support in schools.

Estimates of set-up costs for the intervention calculated by the SOFIE project indicate an approximate cost per at-risk pupil of $43, including training costs for participants. Taking into account spill-over effects, the set-up costs per Standard 6 pupil falls to approximately $8.50 (Pridmore and Jere, 2011). However, this did not cover all distribution costs or costs attributed to staff hours. A comprehensive cost-effectiveness analysis of the model would provide a more accurate picture of the full costs of a potential roll-out of this model against its effectiveness in reducing dropout.

10.6.2 Understanding agency and vulnerability
Future research could build on and explore in more depth this study’s emerging themes surrounding vulnerable young peoples’ coping strategies and personal agency in engaging with factors that support their schooling. Concepts of resilience could provide an invaluable lens through which to examine how children made vulnerable by HIV/AIDS actively cope with adversity, whilst determining how school and communities can best intervene to enhance supportive factors identified in this research (Evans and Becker, 2009; Ferreira and Ebersohn, 2011). The use of quantifiable measures for the psychosocial benefits should be included in future impact evaluations of school-based interventions to support vulnerable learners. Examples of these have been used in small-scale studies such as those conducted in for the orphan-care project in Tanzania (Clacherty and Donald, 2005).

Findings from this study suggest that the SOFIE model was limited in its ability to address constraints on the education of girls identified as particularly vulnerable, most notably their early entry into marriage. Further research is need to explore the gender dimensions of providing support through schools vis-a-vis interactions with socio-cultural and school-related factors. Of particular interest would be the relative strength of the push and pull factors involved. In a country with high rates of early marriage (UNFPA, 2012), it is important to understand whether vulnerable girls are entering marriage early following disengagement and dropout from school, or whether socio-cultural beliefs in early marriage are pulling girls out of school.
Finally, any future engagement with the SOFIE model or similar, targeted educational initiatives would benefit from additional mixed methods research to (i) explore in more depth the perceptions of vulnerability and need held by policy-makers, practitioners and local actors and (ii) analyse these findings against quantitative indicators collected through linked household surveys. Such insights would build better understanding of the processes of identification of vulnerable groups for inclusion in programme support and highlight situations where some groups may continue to be excluded. This, in turn, could help in the development of more accurate and inclusive criteria for support.

10.7 CONCLUDING REMARKS

In conclusion, this doctoral study has demonstrated that even in the context of poverty and high HIV-prevalence, patterns of educational inequality and disadvantage can be disrupted. Improvements in retention can be made by intervening through primary schools with flexible learning strategies and ODFL resources to support pupils, including orphaned and vulnerable children at risk of poor educational outcomes. A flexible model of schooling that uses clubs and collaborative learning strategies can address orphaned and vulnerable children’s barriers to learning and retention and bring important psychosocial benefits. However, to achieve this, this thesis contends that an integrated strategy is needed to improve school and community capacity to identify and support those most at risk and address schools’ exclusionary practices. All actors need supported in the process of building a more inclusive school ethos and enabling environment.
BIBLIOGRAPHY


ADEA (2002). Open and Distance Learning in sub-Saharan Africa: a literature survey on policy and practice. Paris: ADEA Working Group on Distance Education and Open Learning, Association for the Development of Education in Africa (ADEA).


Ansell, N. and Young, L. (2004). 'Enabling households to support successful migration of AIDS orphans in southern Africa'. AIDS Care, 3-10.


Evans, R. (2010). 'Children’s caring roles and responsibilities within the family in Africa'. *Geography Compass*, 4 (10), 1477-1496.


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Saharan Africa. New York: Joint Learning Initiative on Children and HIV/AIDS.


Nielsen, H. (1991). 'Using Distance Education to extend and improve teaching in developing countries'. In IDRC (Ed.), *Perspectives on Education for All*. Ottawa: IDRC Social Sciences Division.


APPENDICES
APPENDIX 1: RESEARCH SETTING

The context presented here draws on key informant interviews at district and school level, direct observations, school records, and discussions with young people during ‘mini-workshops’ in Phase One of the research.

PARTICIPATING CASE STUDY SCHOOLS

Duma

Duma Primary is a remote rural school in the north of Phalombe near Lake Chirwa, with an enrolment of over 1000 pupils. Pupil: teacher ratios for the infant section are close to 300:1, although this number falls to around 60:1 in the senior classes. According to the PTA chair, this large enrolment is attributed to the school’s good reputation for teaching and selection to secondary school. The school buildings consist of three brightly-decorated classroom blocks and an office block recently built by a DFID-funded programme, and several older blocks in poorer condition. Well-constructed toilets and hand washing facilities were also provided under the same programme. The hand-washing facilities do not function as the school borehole is broken and there is no other water source at the school. The area in which school is situated has a high water table of brackish water and access to clean water is a concern for community members. Malaria and bilharzia are common illnesses amongst pupils.

The catchment area of the school consists of 13 villages. The majority of these belong to the matrilineal Lomwe tribe, the main tribe in the district. There is a small settlement of members of the Yao tribe who migrated in from a neighbouring district. The Lomwe are predominately Christian whilst the Yao, also matrilineal, are Muslim. Under the matrilineal system, on marriage the husband settles in the wife’s village and decisions about children’s welfare and schooling are often be dictated by the maternal uncles. Divorce rates

NEWLY CONSTRUCTED CLASSROOM BLOCK AT DUMA PRIMARY
are high and female-headed households common. Households are reliant on subsistence farming and small-scale trading and there is much evidence of poverty in the area: poor housing, lack of farm inputs, few livestock etc. There is poor food security, with heavy rains and waterlogged soils often causing damage to the staple crop, maize.

Whilst the school head noted that pupil attendance is generally good, both he and the PEA agreed that absenteeism is high during the fishing season, especially amongst boys, some of whom will go and stay at the lake for several weeks at a time. Such erratic attendance would often lead to permanent dropout. This is reflected in the schools records, which show that a higher proportion of boys dropped out compared to girls. Key informants observed that absenteeism and dropout is generally higher amongst orphaned children and those from poorer families.

**Namalongo Primary**

Namalongo Primary is a large school on the outskirts of a sprawling market town in the south of Phalombe district. It enrols over 2000 pupils and infant and junior classes are streamed. Even so, with only 18 teachers, class sizes are large. The school is integrated, and several visually-impaired pupils attend classes. These pupils are supported by a specialist Braille teacher and a resource centre – and all are boarding at the school. Namalongo is a relatively high performing school for the district, with almost half of its pupils selected to secondary school. The school hosts the Teacher Development Centre (TDC) for the zone. The school buildings consist of two quadrangles of classroom blocks: one of older blocks, with broken cement floors and insufficient desks or chairs; a second built during the 1990s when the school was a centre for refugees fleeing the Mozambique civil war. The toilets are few and in poor condition. Water is available from a borehole at the TDC and a newly built standpipe. There is large playing field, also used by the surrounding communities for recreational activities.

Community members report that the introduction of a school programme funded by the World Food Programme (WFP) has had a positive impact on enrolment and attendance of pupils. However, the proximity of the trading centre remains a concern - absenteeism of pupils is high during market days when pupils, especially girls, are sent to sell wares. Boys also go to the trading centre to find ganyu or watch video shows. School records show that the percentage of children dropping out was relatively low compared to the other schools - and a comparatively high repetition rate for senior classes suggests that there is relatively strong retention. The school head raised concern, however, about
extended periods of withdrawal during the harvesting season when children work in family fields or look for casual labour; some families also migrate to the north to work on tobacco estates. Key informants agreed that irregular attendance and withdrawal is closely associated with household poverty.

The school has a wide catchment area. There is some inward migration from other districts, but the majority of community members are Lomwe. Although matrilineal, ulowoka is a common practice, a tradition whereby where the wife will settle in the husband's village. If widowed or divorced she is expected to return to her own village taking any children from the marriage.

There is a strong tradition of small-scale commercial farming in the area. The construction of a paved arterial road through the district has improved transportation and provided contract work. Whilst education previously was seen to have little relevance in this area, community members noted changing attitudes, influences by greater access to secondary education and paid employment.

**Kamunda Primary**

Kamunda FP is a remote, rural school in Mzimba South, north of the district capital, several kilometres along an unimproved road. The school buildings are basic burnt brick structures - community-built - with iron sheets and breeze block windows. One classroom block has mud floors with mud benches; the other has broken concrete floors and there
are no chairs. Two classes either learn outside or in a small church next to the school. There are several mud-thatch toilets, but these are in poor condition and are rarely used by pupils. A borehole adjacent to the school is shared with local villagers. With an enrolment of over 1000 pupils and only 5 teachers, the school is seriously understaffed and a split-shift system operates.

Communities around the school are predominantly Ngoni or Tumbuka. In this rural area traditional norms and practices were observed to be strong. A patrilineal system is followed whereby lobola (usually cattle) is paid to the wife’s family on marriage. Any children from the marriage are considered to belong to the paternal village and if the husband dies or there is divorce; the wife traditionally returns to her village, leaving the children behind. The practice of chokolo allows the brother (or other relative) of the deceased husband to marry the widow. However, with the advent of HIV/AIDS, this practice is becoming less popular. Polygamy is also practised.

Migration to South Africa is common, with many men travelling there to find work - often over a period of several years - leaving behind one or more wives and children. Proceeds from these trips can be seen in the surrounding villages – a few well built houses with iron sheets and solar panels. Cattle are considered the wealth of a household and the ox-cart is a common mode of transport. There are few amenities in the area and households are largely involved in small-scale or subsistence farming.

Key informants noted that, whilst many households struggle to make sure their children go to school, absenteeism is notably higher during the months when food is scarce, with many children enrolling late in first term. Key informants agreed that permanent dropout from school is generally associated with older girls getting married and a few boys that leave to find work. The PEA noted that orphaned girls are particularly vulnerable to dropping out, suggesting that the relative wealth of men returning from South Africa can attract girls into early marriage. School records for Kamunda showed that a significantly greater proportion of girls dropped out in 2007 compared with boys.
Pamoza Primary

Pamoza school is built in a central location within a small trading centre close to the Zambian border that is also the seat of the Paramount chief for the district. A TDC, recently electrified, stands adjacent to the school buildings. The school has been re-built under a DFID-funded programme and the new classrooms are well-built and attractive. The programme also saw the construction of a head's office, staff room and toilet blocks, although a system of using rainwater to flush out urinals and provide water for washing hands is not functioning. With 12 in total, classrooms are sufficient, but with only 8 teachers, there is no opportunity to stream the classes and class sizes remain large for lower grades. The school is a meeting place for many community groups in the area.

Communities around the school are Ngoni or Tumbuka, practicing a patrilineal inheritance pattern. Cattle remain a symbol of wealth and there is a strong tradition of beer brewing. Cultural norms and practices are more fluid in this area, however, as many people have travelled to other parts of the district and the country for work and trade.

Several prominent families have members who were well educated and secured jobs in the civil service and armed forces. Clusters of well-built houses can be seen around the school, although many have since fallen into disrepair.

Households support themselves in several ways: subsistence farming, cross-border trade in crops and other goods, market vending and running grocery stores, video shows etc. In some cases, incomes are supplemented by remittances from family members working elsewhere, including South Africa.

According to the PEA and the headteacher, overall attendance has improved in recent years. They attribute this to mobilisation campaigns of NGOs and the new buildings, which attract pupils. The SMC chair noted that some villagers still do not do enough to
ensure their children go to school, however, and all key informants agreed that absenteeism is high during the hunger period. Absenteeism is also high during weekly markets. Whilst the proportion of boys and girls dropping out from senior classes was similar, there is a notably lower enrolment of girls at the school.

**TABLE A1-1: SELECTED FIGURES FOR PARTICIPATING SCHOOLS**

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Duma</th>
<th>Namalongo</th>
<th>Kamunda</th>
<th>Pamoza</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location</td>
<td>Rural</td>
<td>Semi-rural</td>
<td>Remote</td>
<td>Semi-rural</td>
</tr>
<tr>
<td>Proprietor</td>
<td>LEA</td>
<td>Roman Catholic</td>
<td>Roman Catholic</td>
<td>CCAP</td>
</tr>
<tr>
<td>Enrolment (2008)</td>
<td>1162</td>
<td>2222</td>
<td>926</td>
<td>910</td>
</tr>
<tr>
<td>Gender parity index (girls: boys)</td>
<td>1.05</td>
<td>1.01</td>
<td>1.06</td>
<td>0.91</td>
</tr>
<tr>
<td>Gender parity index (senior classes)</td>
<td>1.06</td>
<td>0.98</td>
<td>0.94</td>
<td>0.83</td>
</tr>
<tr>
<td>No of teachers</td>
<td>8</td>
<td>18</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>Female teachers (%)</td>
<td>1 (12%)</td>
<td>8 (44%)</td>
<td>1 (20%)</td>
<td>5 (60%)</td>
</tr>
<tr>
<td>Pupil: teacher ratio</td>
<td>1: 145</td>
<td>1: 123</td>
<td>1: 185</td>
<td>1:113</td>
</tr>
<tr>
<td>No of classrooms</td>
<td>14</td>
<td>16</td>
<td>6</td>
<td>12</td>
</tr>
<tr>
<td>Pupil: classroom ratio</td>
<td>1: 83</td>
<td>1 : 139</td>
<td>1: 154</td>
<td>1: 75</td>
</tr>
<tr>
<td>Pupil: toilet ratio</td>
<td>1: 96</td>
<td>1: 185</td>
<td>1: 58</td>
<td>1: 45</td>
</tr>
<tr>
<td>Proportion orphaned children (%)</td>
<td>16</td>
<td>18</td>
<td>13.00</td>
<td>16</td>
</tr>
<tr>
<td>Proportion double orphans (%)</td>
<td>4</td>
<td>6</td>
<td>Not available</td>
<td>Not available</td>
</tr>
</tbody>
</table>

**OVERALL PATTERNS OF ATTENDANCE, REPETITION AND DROP OUT**

Whilst the extent and reasons for poor attendance and withdrawal from school differed amongst the four schools, some common issues emerged. Firstly, several key informants believed that changing attitudes to education and key interventions have helped to improve pupil attendance and retention in recent years. Proportionally fewer children dropped out at Namalongo in 2007 compared to the other schools, perhaps reflecting the presence of a school-feeding programme. Secondly, ill-health amongst pupils was considered a major reason for absenteeism. Thirdly, irrespective of overall attendance, key informants at all four schools observed that there were distinct periods of time during the school year when absenteeism rose and remained high, often for several weeks at a
time: predominantly during perennial periods of food scarcity. Thirdly, both semi-rural schools raised the proximity of trading centres as a concern with regard to pupil attendance. Even at Kamunda, where the weekly market is several kilometres away, teachers noted a marked absence of pupils on market days.

The proportion of pupils dropping out was found to be higher in the more remote schools (Kamunda and Duma), whilst the two semi-rural schools show comparatively higher repetition rates. This suggests a possible scenario where pupils in these schools have more opportunities to remain within the schooling system, whilst those in the rural schools, particularly Kamunda, may be all the quicker to leave permanently. In both schools in Phalombe, permanent dropout was said to be strongly associated with household poverty. In Namolongo and Kamunda the proportion of female pupils dropping out was higher than male pupils. In Duma, a greater proportion of male pupils in senior classes were reported to drop out, reflecting key informants’ assertions about boys leaving school to join fishing communities at the lake.
APPENDIX 2: LIST OF PARTICIPATORY TECHNIQUES

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description</th>
<th>Information produced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Problem trees</td>
<td>Participants were asked to draw a ‘tree’, with the roots representing causes of either absenteeism or dropout; the roots representing the consequences</td>
<td>Causes and consequences of absenteeism &amp; dropout.</td>
</tr>
<tr>
<td>Pair-wise ranking</td>
<td>Using a matrix listing identified factors, research assistants paired each factor against another (using symbols on cards) and participants were asked to chose which they felt was the more important and indicate this on the matrix by writing a letter to represent either factor. Scores for each factor were calculated and a final ranking produced. By asking male and female participants to use different coloured pens, scores for males and females were calculated separately</td>
<td>Ranking of causes of absenteeism &amp; dropout, by gender.</td>
</tr>
<tr>
<td>Household diagrams</td>
<td>Participants were asked to depict their households through drawings, indicating the household members’ relationship to the participant and whether they were attending school.</td>
<td>Household composition, showing ages and schooling of other children.</td>
</tr>
<tr>
<td>River of Life</td>
<td>Participants were asked to draw a line to represent the river of their life and to show the high and low points in their lives by making the river go up and down. They were then asked to take coloured stickers a place them along the ‘river’ to show when their schooling had been directly affected (see Figure 5).</td>
<td>Depiction of major events in participants’ lives. Also indication of points when their schooling was affected</td>
</tr>
</tbody>
</table>
**APPENDIX 3: ‘PROBLEM TREE’ ANALYSIS**

**TABLE A3.1. REASONS FOR ABSENCE FROM SCHOOL**

<table>
<thead>
<tr>
<th>Causes given for absenteeism</th>
<th>Phalombe Rural</th>
<th>Phalombe Semi-rural</th>
<th>Mzimba South Rural</th>
<th>Mzimba South Semi-rural</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>School requirements</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of uniform/clean clothes</td>
<td>BG</td>
<td>BG</td>
<td>BG</td>
<td>BG</td>
</tr>
<tr>
<td>Lack of school materials (pens/notebooks etc.)</td>
<td>BG</td>
<td>G</td>
<td>B</td>
<td></td>
</tr>
<tr>
<td><strong>School environment</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distance to school</td>
<td>BG</td>
<td></td>
<td>G</td>
<td></td>
</tr>
<tr>
<td>Lack of classrooms/desks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Few teachers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Teacher – pupil interactions</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unfair/harsh punishments</td>
<td>B</td>
<td>B</td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>Quarrelling/conflicts with teachers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teachers propositioning girls</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pupils rude to teachers – sent home</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Household circumstances</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orphan hood: lack of parental support</td>
<td>G</td>
<td></td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>Poverty</td>
<td>BG</td>
<td>G</td>
<td>G</td>
<td>G</td>
</tr>
<tr>
<td>Lack of soap and/or lotion</td>
<td>BG</td>
<td>G</td>
<td>B</td>
<td>BG</td>
</tr>
<tr>
<td>Hunger</td>
<td>BG</td>
<td>BG</td>
<td>B</td>
<td>G</td>
</tr>
<tr>
<td>Funerals</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sick parents</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visiting relatives</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Household chores/income</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Domestic chores at the house</td>
<td>BG</td>
<td></td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>Sent to maize mill</td>
<td></td>
<td></td>
<td>G</td>
<td>G</td>
</tr>
<tr>
<td>Sent to fields to farm</td>
<td></td>
<td></td>
<td>B</td>
<td>G</td>
</tr>
<tr>
<td>Sent to trade on market days</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Looking after younger children</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cattle grazing</td>
<td>B</td>
<td></td>
<td>B</td>
<td>B</td>
</tr>
<tr>
<td>Going to lake to fish</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ganyu</td>
<td></td>
<td></td>
<td></td>
<td>B</td>
</tr>
<tr>
<td><strong>Personal circumstances</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Courtship/ early marriage</td>
<td>BG</td>
<td>BG</td>
<td>G</td>
<td></td>
</tr>
<tr>
<td>Personal ill health</td>
<td>BG</td>
<td>G</td>
<td>BG</td>
<td>G</td>
</tr>
<tr>
<td>Failing at school</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of interest / laziness</td>
<td></td>
<td></td>
<td></td>
<td>G</td>
</tr>
<tr>
<td><strong>Peer-related</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Having girlfriends</td>
<td>B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fighting amongst pupils</td>
<td></td>
<td></td>
<td></td>
<td>B</td>
</tr>
</tbody>
</table>

---

83 Responses recorded for groups as follows: B = boys’ group; G = girls’ group; T = teachers
<table>
<thead>
<tr>
<th>CAUSES GIVEN FOR DROPOUT</th>
<th>PHALOMBE</th>
<th>MZIMBA SOUTH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rural</td>
<td>Semi-rural</td>
</tr>
<tr>
<td>Peer-related</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fighting amongst pupils</td>
<td>B</td>
<td>B</td>
</tr>
<tr>
<td>Smoking chamba/drinking</td>
<td>B</td>
<td>B</td>
</tr>
<tr>
<td>Stealing amongst pupils</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pressure from friends to drop out</td>
<td>B</td>
<td>T</td>
</tr>
<tr>
<td>Watching video shows</td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>Having boyfriends/girlfriends</td>
<td>G</td>
<td>B</td>
</tr>
<tr>
<td>Teacher – pupil interactions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harsh punishments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teachers mocking pupils</td>
<td>T</td>
<td>G</td>
</tr>
<tr>
<td>Sent on chores by teachers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teachers propositioning &amp; having affairs with female pupils</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pupils rude to teachers – sent home/</td>
<td>B</td>
<td>B</td>
</tr>
<tr>
<td>School costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of uniform</td>
<td>BG</td>
<td>G</td>
</tr>
<tr>
<td>Lack of school materials (pens/notebooks etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Money for school programmes</td>
<td>G</td>
<td></td>
</tr>
<tr>
<td>Household circumstances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orphanhood: lack of parental support/basic needs</td>
<td>BG</td>
<td>BG</td>
</tr>
<tr>
<td>Poverty: lack of basic needs</td>
<td>BGT</td>
<td>BG</td>
</tr>
<tr>
<td>Hunger</td>
<td>BG</td>
<td>B</td>
</tr>
<tr>
<td>Household members ill</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ill treatment in household</td>
<td>T</td>
<td></td>
</tr>
<tr>
<td>Lack of support for education</td>
<td>T</td>
<td>T</td>
</tr>
<tr>
<td>Household chores/income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household labour (farming, cattle grazing)</td>
<td>BT</td>
<td>B</td>
</tr>
<tr>
<td>Looking after siblings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Go fishing to earn money</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Market trading to earn money</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal circumstances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ill health/sickness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of interest (laziness)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Failing in examinations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pregnancy</td>
<td>G</td>
<td>G</td>
</tr>
<tr>
<td>Early marriages (girls)</td>
<td>T</td>
<td>GT</td>
</tr>
<tr>
<td>Lack of role models/ encouragement</td>
<td>T</td>
<td></td>
</tr>
<tr>
<td>Travel to South Africa (boys)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

84 Responses recorded for groups as follows: B = boys’ group; G= girls’ group; T= teachers
Appendix 4: Pair-wise Ranking Analysis

The tables below summarise results from the pair-wise ranking exercises carried out during mini-workshops with vulnerable pupils and out-of-school-youth at the four case-study schools. Participants were asked to select what they believed were the 6 most important reasons for absenteeism and dropout gathered from the ‘problem tree’ exercises (Appendix 3). The reasons for absenteeism and dropout are grouped and listed in the two tables below. The rank that each reason was given is disaggregated by sex (showing G for girls and B for boys) and by school. (red= Pamoza; blue= Duma; green= Namalongo and brown = Kamunda).

Table A4-1: Reasons for Absenteeism (Pupils’ Responses)

<table>
<thead>
<tr>
<th>Reasons for absenteeism</th>
<th>Highest 1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Lowest 6</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Household circumstances</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hunger (lack of food)</td>
<td>BBG G G G</td>
<td>B</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Poverty</td>
<td>BG</td>
<td></td>
<td></td>
<td></td>
<td>BG</td>
<td></td>
</tr>
<tr>
<td>Lack of clothes (uniform)</td>
<td>G B G B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Given chores</td>
<td>B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BB G G G</td>
</tr>
<tr>
<td>Sent to work in fields/farming</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BG</td>
</tr>
<tr>
<td><strong>School environment</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Few teachers</td>
<td>BG</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distance to school</td>
<td>B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G</td>
</tr>
<tr>
<td>Sitting on the floor/outside</td>
<td>B G</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Teacher-pupil interaction</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harsh punishment from teachers</td>
<td></td>
<td>G</td>
<td></td>
<td>B</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teachers propositioning pupils</td>
<td>G B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conflicts with teachers</td>
<td>G</td>
<td></td>
<td></td>
<td>B</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Personal circumstances</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ill –health/sickness</td>
<td>BB G G</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Early marriage (courtship)</td>
<td>B G</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Having girlfriends/boyfriends</td>
<td>B G</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reasons for dropout</td>
<td>Highest</td>
<td>RANKING</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------------</td>
<td>---------</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td><strong>Household circumstances</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hunger (lack of food)</td>
<td>BG</td>
<td>BG</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of parental support (basic needs)</td>
<td>BGG</td>
<td>BBG</td>
<td></td>
<td></td>
<td>G</td>
<td>B</td>
</tr>
<tr>
<td>Lack of encouragement</td>
<td>B</td>
<td>G</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of clothes (uniform)</td>
<td></td>
<td></td>
<td>BBGG</td>
<td></td>
<td>BG</td>
<td></td>
</tr>
<tr>
<td>Fishing at lake</td>
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<td>Smoking chamba &amp; drinking</td>
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<td>Peer pressure/copying friends</td>
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<td>Fighting/bullying at school</td>
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### Appendix 5: Matrix of Interviewed Children & Young People and Their Household Circumstances

<table>
<thead>
<tr>
<th>Name</th>
<th>Sex</th>
<th>Age</th>
<th>Grade / out-of-school</th>
<th>No of schools</th>
<th>Grades repeated</th>
<th>Orphan status</th>
<th>Household composition</th>
<th>Experience of Household Deaths or Illness</th>
<th>Household income/ Food security</th>
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<td><strong>PHALOMBE DISTRICT:</strong></td>
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<tr>
<td>Brenda</td>
<td>F</td>
<td>16</td>
<td>Standard 8</td>
<td>3</td>
<td>3</td>
<td>Double orphan</td>
<td>Uncle (maternal) (35) Brenda (16) (in-school) Brother (15) (in-school)</td>
<td>Father died when family in Mulanje (6 yrs ago), returned to maternal village with mother. Death of grandmother (TB) and mother (blamed on witchcraft). Joined uncle’s HH. Brenda sick 2 yrs ago (scabies).</td>
<td>Uncle is carpenter. Also small-scale selling of crops (pigeon peas/peanuts). Own livestock: goats &amp; pigs (4), cattle (2) &amp; several chickens. Own bicycle.</td>
</tr>
<tr>
<td>Grace</td>
<td>F</td>
<td>16</td>
<td>Standard 8</td>
<td>2</td>
<td>2</td>
<td>Double orphan</td>
<td>Brother (18) Sister-in-law (17) Grace (16) (in-school) Nephew (&lt;1)</td>
<td>Father died when young, paternal uncles grabbed property. When 12 yrs mother died after long illness (AIDS?), along with sibling.</td>
<td>Ganyu, including work at maize mill. Some subsistence farming.</td>
</tr>
<tr>
<td>Eliza</td>
<td>F</td>
<td>22</td>
<td>Out-of-school Dropped Standard 6</td>
<td>4</td>
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<td>Single orphan</td>
<td>Mother (59) Eliza (22) Child (3)</td>
<td>Eliza was sick as a child (bilharzia). Multiple deaths in HH (aunt, uncles, brother, father) attributed to AIDS. Following death of father travelled with mother, mother re-married &amp; had 3 children (all died).</td>
<td>Subsistence farming &amp; small-scale sale of crops. Mother occasionally brews beer. Previously received remittance (late aunt). Very poor housing.</td>
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<tr>
<td>Akuzike</td>
<td>F</td>
<td>18</td>
<td>Out-of-school Dropped Standard 5</td>
<td>1</td>
<td>1</td>
<td>Double orphan</td>
<td>Female cousin (11) (in-school) Daughter (2)</td>
<td>When young, went to Mulanje with father when he was ill He died there (symptoms suggest AIDS). Returned to maternal village. Mother died when 13 yrs. Stayed with elder sister (SHH) who also died, then married/divorced.</td>
<td>Subsistence farming, ganyu and petty trading, (mandasi (sugar cane, cooked groundnuts). Owns 1 goat &amp; chicken. Very poor housing.</td>
</tr>
<tr>
<td>Name</td>
<td>Tribe</td>
<td>Gender</td>
<td>Age</td>
<td>Standard</td>
<td>Grade</td>
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<td>Orphan Status</td>
<td>Immediate Family</td>
<td>Immediate Family Details</td>
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<tr>
<td>Titani</td>
<td>Lomwe</td>
<td>F</td>
<td>14</td>
<td>Standard 8 (repeating)</td>
<td>1</td>
<td>1</td>
<td>Single orphan</td>
<td>Mother (32)</td>
<td>Father died 2 years previously (symptoms suggest AIDS). Paternal uncles grabbed property, family forced to move. Mother in poor health.</td>
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<td>Female cousin (7)</td>
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<tr>
<td>Roderick</td>
<td>Yao</td>
<td>M</td>
<td>15</td>
<td>Standard 8</td>
<td>2</td>
<td>3</td>
<td>Double orphan</td>
<td>Grandfather (maternal)</td>
<td>Mother died when 10 yrs old, father then left for home village &amp; re-married there. Died 4 years ago. Grandparents in poor health.</td>
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<td>1</td>
<td>Double orphan</td>
<td>Uncle (maternal) (26)</td>
<td>Father died when Felista was very young (in Mozambique). Returned to Malawi when mother ill. Mother died 7 yrs ago. Stayed with elder uncle, then moved to current HH 2 yrs ago. Uncle &amp; wife are double orphans.</td>
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<td>Lomwe</td>
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<td>5</td>
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<td>Double orphan</td>
<td>Sister (10)</td>
<td>Father died suddenly, then mother (symptoms of AIDS). Stayed with elder sister, who also died. Dropped from school (at 15) and married/divorced. Fathers of both her children have died.</td>
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<td>Double orphan</td>
<td>Wife (19)</td>
<td>Death of father at 8 years, mother died when 15 years. Previously SHH, now married. Wife also double orphan.</td>
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<td>Age</td>
<td>Grade / out-of-school</td>
<td>No of schools</td>
<td>Grades repeated</td>
<td>Orphan status</td>
<td>Household composition</td>
<td>Experience of Household Deaths and Illness</td>
<td>Household income/ Food security</td>
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<td>Rachel</td>
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<td>Standard 7</td>
<td>1</td>
<td>1</td>
<td>Double orphan</td>
<td>Grandmother (paternal) (64)</td>
<td>Mother died when Rachel in Std 5, was staying at maternal village when mother ill, taken to paternal village after death. Father later died (both had symptoms of AIDS).</td>
<td>Limited subsistence farming &amp; small scale trading (bananas). Grandmother brews beer. Owns chickens (12) &amp; pigs (4). School needs provided (NGO)</td>
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<td>Paul</td>
<td>M</td>
<td>15</td>
<td>Standard 7</td>
<td>1</td>
<td>1</td>
<td>Single orphan</td>
<td>Father (45) (RSA) Step-mother (other wife) Half-brother (14) (in-school) Half-brother (9) (in-school)</td>
<td>Paul moved to his father's other wife's HH after the death of his mother 10/12 yrs ago (pneumonia/AIDS). Other village members (relatives) with long-term illness (possibly TB)</td>
<td>Father is business man who frequently travels &amp; stays in RSA to trade goods. Runs small grocery close to village (with solar panel) – where Paul works &amp; often sleeps. HH relies on subsistence farming for food. Owns cattle (6) &amp; sheep (6.)</td>
</tr>
<tr>
<td>Samuel</td>
<td>M</td>
<td>15</td>
<td>Standard 6</td>
<td>2</td>
<td>2</td>
<td>Double orphan</td>
<td>Grandfather (paternal) (58) Grandmother (48) Aunt (paternal) (16)</td>
<td>Parents divorced in 2004 whilst father in RSA, mother awarded custody. Father re-married (2 wives), fell sick &amp; died in 2007 after long illness (on ART). Samuel returned to father’s village to stay with grandparents, mother re-married.</td>
<td>Subsistence farming &amp; small-scale sale of crops. Grandfather is a sing’anga, sells charms to those travelling to RSA. Gets allowance as VH. Owns oxcart &amp; bicycle. Own cattle (7) &amp; pigs (4)</td>
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<tr>
<td>Wezi</td>
<td>F</td>
<td>15</td>
<td>Out-of-school (Dropped Standard 6)</td>
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<td>1</td>
<td>Double orphan</td>
<td>Brother (22) Brother (18) (in-school) Half-brother (22)</td>
<td>Mother died 4 yrs ago, father re-married in town, later died (both deaths from AIDS). Wezi was staying with maternal grandparents, but brother brought her to stay with them to assist with HH chores.</td>
<td>Brother is P/T builder. Also ganyu &amp; small-scale farming. Occasional remittance/food from relatives. Brother has camera – sells photos. Goats (3) &amp; cattle (1).</td>
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<td>Themba</td>
<td>M</td>
<td>19</td>
<td>Out-of-school (Dropped in Standard 7)</td>
<td>1</td>
<td>1</td>
<td>Single orphan</td>
<td>Mother (39) Sister (17) Sister (14) (in-school) Sister (4)</td>
<td>Father absent (died in RSA), grew up with his maternal grandparents, after their death came to live with mother. Withdrew from school when uncle died, then dropped to herd cattle for grandfather.</td>
<td>Subsistence farming &amp; ganyu (inc. herding cattle for others). Owns chickens (4).</td>
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<tr>
<td>Name</td>
<td>Gender</td>
<td>Age</td>
<td>Grade</td>
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<td>Status</td>
<td>Orphans</td>
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<tr>
<td>Richard</td>
<td>M</td>
<td>17</td>
<td>Standard 8 (repeating)</td>
<td>4</td>
<td>4</td>
<td>Double orphan</td>
<td>Grandmother (paternal) Brother (12) (in-school) Female cousin (8) (in-school) House girl (14)</td>
<td>Mother died 4 yrs ago in Blantyre, (attributed to AIDS), followed by father. Stayed with elder relative before joined grandmother’s HH. Also deaths of paternal aunts/uncles (some attributed to AIDS). Richard suffers from asthma. Subsistence farming &amp; some remittance from paternal cousin. House of good standard, but few assets.</td>
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<tr>
<td>Mada</td>
<td>F</td>
<td>16</td>
<td>Standard 7</td>
<td>4</td>
<td>4</td>
<td>Double orphan</td>
<td>Sister (23) Niece (8) Nephew (4)</td>
<td>Father died 10yrs ago on return from RSA, mother 2 yrs later (AIDS). From 2000 stayed with elder sister (married), but ran away &amp; returned to stay in paternal village with step-mum (second wife). Step-mum now ill &amp; in Lilongwe, sister returned. Subsistence farming &amp; petty trading (fruit/cloth). Sister runs mobile restaurant on market days. Elder sister elsewhere sends money for school needs. Own cattle (2), goats &amp; pigs (4).</td>
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<tr>
<td>Nellie</td>
<td>F</td>
<td>17</td>
<td>Standard 8 (repeating)</td>
<td>2</td>
<td>2</td>
<td>Single orphan</td>
<td>Mother (44) Brother (24) Brother (19) (in-school) Cousin (12) (in-school) cousin (8) (in-school) cousin (4) (in-school)</td>
<td>Father was ill &amp; died 10/12 yrs ago, left for maternal village. Mother is ill &amp; on ART(revealed status). Wezi also in poor health – 2 major bouts of illness as child (malnutrition/malaria?), has wound on leg, not healing. Elder brother p/t builder &amp; casual work at bottling firm. Rely on ganyu for additional needs. No crops planted this year (mother was in hospital). Bicycle &amp; livestock: cattle (2), goats/pigs (18).</td>
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</table>
APPENDIX 6: CASE STUDIES CODING FRAME

CODING FRAME

A1. Context of case sites
Socio-economic activities
Socio-cultural practices & norms
School environment
HIV and AIDS
Gender issues
Social cohesion
Community support structures

Context of schools
School environment
Teacher capacity & motivation
Community-school relationship
Values & attitudes (to school/education)
School attendance
Extent of dropout

A2. School support structures
Welfare programmes
Health and nutrition
Guidance & counseling
Monitoring of pupils
Club activities
Community links
Challenges

A3 Index children’s background
Orphan status
Household composition
Household circumstances (SES)
Mobility
Major events
Health

A4 Stigma and Discrimination
Community

A5 School-related experiences
School resources
School discipline (punishments)
School requirements/costs
Teacher – pupil interactions
Classroom participation
Violence & abuse
Exclusion from class ‘sent back’

A6. Household factors
Poverty/basic needs
Food security
Death of adult
Ill health of adult
HH chores
Material support for schooling (+/-)
Emotional support (olimbiktsa) (+/-)
Parental attitudes to education (+/-)
Monitoring of schooling (+/-)
Orphanhood

A7. Coping strategies
Ganyu & other labour
Marriage
CHH

A8. Personal & Peer- related issues
Social networks
Peer pressure
Zibwenzi
Risky behaviour (drugs, transactional sex)
Health
Pregnancy
Emotional wellbeing
Decision-making
Values
Attitudes to education
School engagement.
Future expectations
Role models

A8. Personal & Peer- related issues
Social networks
Peer pressure

A9. Impact on schooling
Absenteism
Withdrawal & dropout
Poor performance & repetition

A10. Perceptions of orphans

A11. Recommendations
APPENDIX 7: VIGNETTES: CHILDREN AND YOUNG PEOPLE AFFECTED BY HIV/AIDS

Vignette 1: Nellie’s story

Nellie is a 17 year old girl enrolled at Pamoza school. Her father died when she was young and for the last decade the family has been staying in her mother's home area - in a house close to the school. As well as her mother, she stays with two older brothers and three younger cousins. Her mother is HIV positive and in very poor health. She was in hospital for several weeks last year – on the TB ward – at which time revealed her HIV status to her children. During that time Nellie was not attending school, but was, in her mother’s words, “just crying all the time.”

Her mother’s period of hospitalisation was during the rainy season and, subsequently, little was done in the family's fields, so there is little hope of any harvest. Her mother spoke of her concern that she cannot support the family as she used to and that the children often have to fend for themselves. Previously, she had been involved small-scale trading at the local market, selling various food stuffs, but had stopped as her health deteriorated. Nellie’s elder brother occasionally gets part-time work as a builder and looks for ganyu to earn money to buy food. Much of the household chores, including caring for her mother, fall to Nellie.

Despite the household difficulties, Nellie said that her mother does encourage her to go to school and provides her with the basic necessities (notebooks, ball point pens and a uniform). At the time of the interview, Nellie was attending school, but was often absent. She was repeating Standard 8, having failed her final exams the previous school year. Another brother, enrolled in the local Community Day Secondary School, had not attended school the whole of the previous term because they had not managed to pay the school fees. Nellie said she hopes to continue with her schooling, but could say little about her plans for the future.

Vignette 2: Chisomo’s story

Chisomo is a 21 year old young man who dropped out of Duma school in Standard 5. His father died when he was around 8 years old, followed by his mother when he was age 15. He has recently married and has a young child. His wife is 19 years old and also a double orphan. He supports his family, including two younger brothers, through ganyu – working in other people’s maize fields and rice paddies. His ambition is to own a bicycle.

Talking of the death of his parents, Chisomo says that his father’s death had little impact on his schooling, as he still had his mother, who provided for the household. After the death of his mother however, he describes life as ‘a misery’. Staying in a sibling-headed household with his elder sister and younger brothers he remembers that they frequently lacked food and other basic necessities. He said that they would often return from school to find no food at the house. In addition, fellow pupils would mock him when he went to school poorly dressed. After about a year he left school to assist his sister with earning money. Later the sister married and left the boys on their own. Chisomo states that following the death of his mother he received no assistance or support from the school not from other community members. He said that although he
enjoyed school and was ‘pained’ when he left, he disliked the heavy discipline at the school and would often sneak away from school if given punishments. He would be sent home from school when not wearing a uniform.

After a break of about two years his younger brothers have now returned to school. He explained that his wife now assists him to ensure they go to school – before his marriage he would often go to the lake to earn money, leaving his younger brothers alone, with no one to send them to school. He complained, however, that last year they were out of school again, sent home repeatedly for not having uniform. Only after he was able to raise the necessary money to purchase these did they return.

Vignette 3: Madalitso’s story
Madalitso is a 16 year old girl in Standard 7 at Pamoza. Her father was a business man who regularly went to RSA. He had three wives, all of whom stayed at the same village. His death on his return from an extended stay in RSA was attributed to AIDS. Two years later Madalitso’s mother died of TB and soon after that Madalitso went to stay with her elder sister, who had recently married. She complained that the sister did not allow her to attend school regularly and that she was often required to do chores and attend the sister's young child. In Standard 3 she left school for a year. She repeated a further 2 school years, which she blamed on frequent absenteeism. She then ran away from her sister to return to her paternal village, where she stayed with her step-mother (one of her father's other wives). However, the step-mother is now also ill and is staying in Lilongwe with her brother to get medical treatment. The sister has since divorced and has also returned to the village. She helps to support the family by petty trading and selling food on market days. Madalitso is concerned about her schooling. She admits that she finds difficulties reading and writing - and complains about her sister’s treatment. She is still sent to chores, including long trips to the maize mill and looking after her sister's children. She notes that her sister pulls her out of school if she has chores for her to do - and hits her if she refuses. She is keen to finish primary school, saying her heart would break if she didn't, but there seems to have been no supplementary or remedial work provided by teachers to assist her poor reading and writing skills.85

Vignette 4: Akuzike
Akuzike is 18 years old and out-of-school. She stays close to Namalongo school in very poor conditions – a small, leaking building with no toilet. She supports a younger cousin and her own 2 year old daughter by ganyu and petty market trading. In addition to working in other people’s fields, she cooks and sells ground nuts, mandazi and sugarcane at the local market. She also keeps a small garden.

Her father became ill when she was young. She went with him to Mulanje, his home district, where he was to be cared for throughout his illness. She said she did not attend school during this time. On her father’s death she returned to her maternal village to stay with her mother and re-enrolled at Namaongo school. She stated that they lived in very poor circumstance, but got assistance from a well-wisher, Mrs

85 Following these case-study interviews, the research team has since learnt that Madalitso has dropped out of school and is now married (September, 2008).
Machoko, who bought her uniform and notebooks for school. When she was about 13 years old her mother died and she went to stay with her elder sister.

Sometime after this, when she was in Standard 5, she dropped out of school in order to help her sister earn money to support the household. Her sister then also died and Akuzike stayed with relatives for a while until she was discovered to be pregnant and got married. She states that she got married to get additional support from the man. The marriage did not last long however; the husband was chased out of her village for not working and failing to contribute to the renovation of a house. For two years following the death of her sister, Akuzike was being supported by a local orphan care group. They provided some food stuffs and clothes, and she also went for learning activities at the centre in the afternoons. The centre stopped assistance when she became pregnant.

Indications are that Akuzike had relatively poor engagement with school - perhaps stemming from the extended period of time she was out of school during father's sickness. She did not show interest to return and later said she no longer admires friends who are at school, as she is used to her situation. Her health was not good at the time of the interview, with a large lump on the side of her neck, for which she is taking traditional medicine.

Vignette 5: Titani

Titani is a 14 year old girl repeating Standard 8 at Duma school. She lost her father two years previously to an AIDS-related illness. She stays with her mother and younger sisters. Following the death of her father, her paternal uncles took much of their property and they were forced to move to a different house. Titani notes a significant change in household circumstances - her father was a small-scale farmer, selling several cash crops and they were well provided for. Now there is a struggle to meet all their basic needs, and they would sometimes go to school hungry. Titani said that following the loss of her father and the ensuing financial difficulties she no longer felt good about going to school, but her mother would force her to go.

Titani has a strong respect and love for her mother who works hard to support the family and makes sure that they attend school. The mother seeks out ganyu to earn money. Titani occasionally helps her in this. She has a good network of friends (all female pupils) who discuss their problems and encourage each other to remain in school. The mother is sometimes sick, however, and Titani is sometimes absent from school to care for her. She says that when her mother is sick she very anxious and this affects her concentration and participation in class. Titani has a lot of household chores to do to assist her mother, but she appears to bear them stoically, saying she has to help her mother since her mother already does a lot for them. Although repeating standard eight, she is hopeful about finishing school and continuing her education to find work and support the family.

Vignette 5: Bornwell

Bornwell is a 16 year old boy who has just recently dropped out of school following a quarrel with a teacher over what he considered unjust punishment. He lives with his paternal grandparents at the same village where he grew up. His father died in 2002 and then the following year his mother fell sick. He accompanied his mother when she
went home to her village, where she died. He stayed at his maternal village for around another 2 years. Then when his grandmother died, he returned to his paternal village. His paternal grandfather noted that Bornwell's parents died of AIDS, as did several of his father's siblings. He supports Bornwell and other grandchildren by farming, although he complains he is old now and finds it increasingly difficult. He also receives occasional remittances from other children working in RSA.

The deaths in his family appear to have affected Bornwell deeply and he withdrew from school for a lengthy period of time following death of his father, mother and then his grandmother. He states that was his mother that was encouraging him to continue with schooling, but that after his father's death she 'was crying all the time' and that it took her attention away from him and she was no longer assisting him with school work. He relates his poor performance at school with the effects of the deaths on his mental well-being and with subsequent repetition of classes. He also said that fellow pupils mocked him, saying that his father died of AIDS. His grandfather notes that Bornwell is often short-tempered, withdrawn and difficult to get along with.
APPENDIX 8: Strategies to improve access – participants’ responses

TABLE A7-1: SUGGESTIONS FOR IMPROVING PUPILS’ ACCESS TO LEARNING AND RETENTION, BY SCHOOL * AND COMMUNITY ** PARTICIPANTS

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>School-based</th>
<th>Community-based</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supporting learning and further participation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establish youth clubs, sports, extracurricular activities</td>
<td>KNPP</td>
<td>DDKP</td>
</tr>
<tr>
<td>Training in vocational skills and IGA</td>
<td>DN</td>
<td>DDK</td>
</tr>
<tr>
<td>Remedial teaching/homework by teachers to assist pupils to catch up.</td>
<td>KNP</td>
<td>P</td>
</tr>
<tr>
<td>Others to provide additional learning support whilst absent/to catch up.</td>
<td>NP</td>
<td>NNP</td>
</tr>
<tr>
<td>Incentives/gifts for hard-working pupils</td>
<td>KN</td>
<td>-</td>
</tr>
<tr>
<td>Scholarships for secondary education</td>
<td>N</td>
<td>-</td>
</tr>
<tr>
<td>Addressing household circumstances &amp; school costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fund-raising/donations for provision of basic necessities (including school supplies)</td>
<td>DKNP</td>
<td>DDKNNPP</td>
</tr>
<tr>
<td>School feeding</td>
<td>KP</td>
<td>DDPP</td>
</tr>
<tr>
<td>School environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improved school facilities, including boarding facilities</td>
<td>DK</td>
<td>NN</td>
</tr>
<tr>
<td>School clinic &amp; monitoring of health of child (if identified HIV +)</td>
<td>-</td>
<td>KP</td>
</tr>
<tr>
<td>Monitoring and follow-up of pupils’ attendance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meetings with parents/guardians: to find out reasons for absence &amp; sensitise them on importance of education, including supporting the children’s learning.</td>
<td>KNN</td>
<td>PP</td>
</tr>
<tr>
<td>Community members to advise/persuade orphans to go to school</td>
<td>-</td>
<td>NKP</td>
</tr>
<tr>
<td>Greater contact between teachers &amp; guardians</td>
<td>-</td>
<td>P</td>
</tr>
<tr>
<td>Village-based committees to monitor pupil attendance</td>
<td>P</td>
<td>-</td>
</tr>
<tr>
<td>Teacher – pupil interactions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teachers to encourage and motivate pupils; show interest and love.</td>
<td>NP</td>
<td>DDKKKKN</td>
</tr>
<tr>
<td>Peer-related</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teach pupils to stay together without stigma/discrimination</td>
<td>-</td>
<td>P</td>
</tr>
</tbody>
</table>

* PEAs, school heads, teacher FGD

** SMC & PTA chairs, CBO representatives, traditional leaders, community FGD

D = Duma, K = Kamunda, N = Namalongo, P = Pamoza
### TABLE A7-2: SUGGESTIONS FOR IMPROVING ORPHANED & VULNERABLE CHILDREN’S ACCESS AND RETENTION, BY PUPILS/OUT-OF-SCHOOL YOUTH

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Pupils</th>
<th>Out-of-school youth</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Supporting learning and further participation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teach games and sports at school</td>
<td>-</td>
<td>D</td>
</tr>
<tr>
<td>Teachers should teach all subjects during normal class hours</td>
<td>N</td>
<td>-</td>
</tr>
<tr>
<td>Textbooks/books to read at home</td>
<td>NK</td>
<td>-</td>
</tr>
<tr>
<td>Others to teach/provide extra lessons</td>
<td>NKP</td>
<td>NP</td>
</tr>
<tr>
<td><strong>Addressing household circumstances &amp; school costs</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Schools to provide basic school supplies (pens, pencils, notebooks)</td>
<td>DNK</td>
<td>-</td>
</tr>
<tr>
<td>Provision of food, clothes and other basic needs, including uniform (CBOs, well-wishers, guardians)</td>
<td>DKP</td>
<td>DNKP</td>
</tr>
<tr>
<td>Parents/guardians give fewer household chores</td>
<td>DNK</td>
<td>-</td>
</tr>
<tr>
<td>Parents/guardians shouldn’t pressurise children to marry early</td>
<td>D</td>
<td>P</td>
</tr>
<tr>
<td><strong>School environment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More teachers</td>
<td>K</td>
<td>-</td>
</tr>
<tr>
<td>More classrooms</td>
<td>K</td>
<td>-</td>
</tr>
<tr>
<td><strong>Monitoring and follow-up of pupils’ attendance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Someone to provide advice/guidance on attending school</td>
<td>DP</td>
<td>P</td>
</tr>
<tr>
<td><strong>Teacher – pupil interactions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No harsh or corporal punishment</td>
<td>DK</td>
<td>DP</td>
</tr>
<tr>
<td>Teacher don’t send pupils out of class/home or on errands</td>
<td>P</td>
<td>DP</td>
</tr>
<tr>
<td>Pupils to report incidences of teachers sexually harassing and abusing pupils</td>
<td>P</td>
<td>P</td>
</tr>
<tr>
<td>Teachers should show interest and encourage pupils</td>
<td>D</td>
<td>-</td>
</tr>
<tr>
<td>Pupils to be well-behaved, respect teachers</td>
<td>K</td>
<td>K</td>
</tr>
<tr>
<td>Teachers not to show favouritism</td>
<td>N</td>
<td>-</td>
</tr>
<tr>
<td><strong>Peer-related and personal factors</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Girls to abstain from taking money from men in exchange for sex</td>
<td>-</td>
<td>D</td>
</tr>
<tr>
<td>Children from well-to-do families told to stop teasing vulnerable children</td>
<td>N</td>
<td>-</td>
</tr>
</tbody>
</table>

D= Duma, K= Kamunda, N=Namlongo, P=Pamoza
APPENDIX 9: TRAINING ACTIVITIES

Training activities for the intervention were conducted in Migowi, Phalombe and Mzimba boma in Mzimba South in January 2009. Activities included:

- An initial one-day workshop to familiarise school and community-level actors (school heads and staff, SMC representatives and club leaders) with the SOFIE model and their roles and responsibilities in implementing and monitoring the intervention activities. Participants were also asked to reflect on and discuss how to improve schools’ inclusiveness and capacity to identify, monitor and support vulnerable pupils.

- An additional three-day training and capacity building workshop for Standard 6 teachers and club leaders in aspects of the project implementation, counselling skills, working with communities and the use of intervention resources. Participants also received training in monitoring and record-keeping.

Training resources included a club leaders’ manual and manual on adolescent counselling and HIV/AIDS86. Teachers and club leaders were provided with sets of monitoring forms designed to support monitoring and follow-up of pupils identified as ‘at-risk’.

Resources for clubs, teachers and pupils were distributed concurrently with training exercises. To reduce costs participants carried resources back to the schools themselves. Each school initially received bags for 10 pupils. The remaining bags (50 per district) were stored at district offices for future distribution, ensuring that a few remained in reserve. These were distributed during a later monitoring trip, along with the radios87. Club leaders received a bicycle to assist with their activities.

86 With permission, in developing this manual I drew heavily from two main texts: ‘Child and Adolescent Counselling: a training manual for caregivers’, produced by Norwegian Church Aid (Malawi) and ‘Guidelines for Counselling Children who are infected with HIV or affected by HIV and AIDS’, produced by Southern African AIDS Training Programme (SAT Programme).

87 Delays in the purchase and customs clearance of radios meant that they were not available for distribution in January 2009.
## SOFIE Training Seminar

### School and Community Leaders

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.00 am</td>
<td>Arrival and registration</td>
</tr>
<tr>
<td>8.30 am</td>
<td>Welcome and introductions</td>
</tr>
<tr>
<td>8.40 am</td>
<td>Aims and objectives of the training</td>
</tr>
<tr>
<td>8.45 am</td>
<td>Presentation: What is SOFIE?</td>
</tr>
<tr>
<td>9.00 am</td>
<td>Presentation and discussion: Findings from case studies</td>
</tr>
<tr>
<td>9.30 am</td>
<td>Group work: How do we make schools more inclusive?</td>
</tr>
<tr>
<td>10.15</td>
<td>BREAK</td>
</tr>
<tr>
<td>10.30 am</td>
<td>Presentation: the SOFIE intervention model (resources, roles and responsibilities)</td>
</tr>
<tr>
<td></td>
<td>- teacher</td>
</tr>
<tr>
<td></td>
<td>- youth leader &amp; ‘buddies’</td>
</tr>
<tr>
<td></td>
<td>- school management committee</td>
</tr>
<tr>
<td></td>
<td>- school head</td>
</tr>
<tr>
<td>12 noon</td>
<td>LUNCH</td>
</tr>
<tr>
<td>1.15 pm</td>
<td>Criteria for selecting ‘at-risk’ children and ‘buddies’</td>
</tr>
<tr>
<td>2.00 pm</td>
<td>Group Work: Action Planning</td>
</tr>
<tr>
<td></td>
<td>- club sessions</td>
</tr>
<tr>
<td></td>
<td>- supporting children ‘at risk’</td>
</tr>
<tr>
<td></td>
<td>- monitoring and reporting progress</td>
</tr>
<tr>
<td>3.15 pm</td>
<td>End-of-session evaluation and gallery walk</td>
</tr>
<tr>
<td>3.30 pm</td>
<td>Wrap-up and Closing</td>
</tr>
</tbody>
</table>
## SOFIE Training Workshops

### Teachers and Youth Leaders

#### DAY ONE: CAPACITY BUILDING

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.00am</td>
<td>Arrival</td>
</tr>
<tr>
<td>8.15am</td>
<td>Welcome and introduction to day’s activities</td>
</tr>
<tr>
<td>8.20am</td>
<td>Icebreaker: Name game</td>
</tr>
<tr>
<td>8.30am</td>
<td>Competition: What should we call our clubs?</td>
</tr>
</tbody>
</table>
| 8.45am  | Training session 1: working with communities  
- civic service, volunteering & role models.  
- expectations of communities  
- mobilizing support |
| 10.00am | BREAK                                                                    |
| 10.15am | Training session 2: Child and Adolescent counseling: cross-cutting issues |
|         | - child rights                                                          |
|         | - gender                                                                 |
| 12.00pm | LUNCH                                                                    |
| 1.15pm  | Ice Breaker: Sinking Ship                                                |
| 1.30pm  | Training session 2: Child and Adolescent counseling contd: cross-cutting issues |
|         | - child abuse                                                            |
|         | - HIV and AIDS                                                           |
| 3.00pm  | BREAK                                                                    |
| 3.15pm  | Training session 3: Child and Adolescent counseling:  
- Understanding child and adolescent counseling  
- Issues for counselors  
- Children and trauma |
<p>| 4.30pm  | Wrap-up and closing                                                     |</p>
<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.00 am</td>
<td>Arrival and gallery walk</td>
</tr>
<tr>
<td>8.15 am</td>
<td>Welcome and introduction to day’s activities</td>
</tr>
<tr>
<td>8.30 am</td>
<td>Training session 4: Child and Adolescent counseling contd:</td>
</tr>
<tr>
<td></td>
<td>- Communication skills</td>
</tr>
<tr>
<td></td>
<td>- Listening and responding</td>
</tr>
<tr>
<td></td>
<td>- Putting it all together (counseling pupils)</td>
</tr>
<tr>
<td>10.00 am</td>
<td>BREAK</td>
</tr>
<tr>
<td>10.15 am</td>
<td>Ice Breaker: “Why….Because”</td>
</tr>
<tr>
<td>10.30 am</td>
<td>Training Session 7 contd: Introduction to Study Guides</td>
</tr>
<tr>
<td></td>
<td>- Why do we need study guides?</td>
</tr>
<tr>
<td></td>
<td>- What do they look like?</td>
</tr>
<tr>
<td></td>
<td>- How to use study guides to support learning.</td>
</tr>
<tr>
<td></td>
<td>- How to use study guides to monitor progress.</td>
</tr>
<tr>
<td>12 noon</td>
<td>LUNCH</td>
</tr>
<tr>
<td>1.15 pm</td>
<td>Icebreaker: ‘Line up!’</td>
</tr>
<tr>
<td>1.30 pm</td>
<td>Training Session 8: Monitoring and Evaluation</td>
</tr>
<tr>
<td></td>
<td>- Record-keeping skills</td>
</tr>
<tr>
<td></td>
<td>- ‘At-risk’ registers</td>
</tr>
<tr>
<td></td>
<td>- Club diaries</td>
</tr>
<tr>
<td></td>
<td>- Reporting SOFIE activities</td>
</tr>
<tr>
<td>3.00 pm</td>
<td>BREAK</td>
</tr>
<tr>
<td>3.15 pm</td>
<td>Training Session 9: Handling SOFIE resources:</td>
</tr>
<tr>
<td></td>
<td>- List of materials</td>
</tr>
<tr>
<td></td>
<td>- Safe storage of materials</td>
</tr>
<tr>
<td></td>
<td>- stock keeping responsibilities</td>
</tr>
<tr>
<td></td>
<td>- possible challenges</td>
</tr>
<tr>
<td>4.15 pm</td>
<td>Feedback</td>
</tr>
<tr>
<td>4.30 pm</td>
<td>Wrap-up and closing</td>
</tr>
</tbody>
</table>
# DAY THREE: CHOICES AND DECISIONS

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.00am</td>
<td>Arrival and gallery walk</td>
</tr>
<tr>
<td>8.15am</td>
<td>Welcome and introduction to day’s activities</td>
</tr>
<tr>
<td>8.30am</td>
<td>Review of previous sessions</td>
</tr>
<tr>
<td>8.40am</td>
<td>Results of Competition: Club Name</td>
</tr>
<tr>
<td>8.50am</td>
<td>Training Session 10: ‘Choices and Decisions’</td>
</tr>
<tr>
<td></td>
<td>- Facilitation skills</td>
</tr>
<tr>
<td></td>
<td>- Playing the game</td>
</tr>
<tr>
<td>10.00am</td>
<td>BREAK</td>
</tr>
<tr>
<td>10.15am</td>
<td>Presentation: SOFIE – what happens next?</td>
</tr>
<tr>
<td>10.30am</td>
<td>End-of-session evaluation</td>
</tr>
<tr>
<td>10.45 am</td>
<td>Presentation of certificates</td>
</tr>
<tr>
<td>11.00 am</td>
<td>Wrap up and closing.</td>
</tr>
</tbody>
</table>
Appendix 10: Criteria for selecting 'at-risk' pupils

Family/Household Background

- A child who has lost one or both parents and lacks proper care and support
- A child staying with elderly grandparent(s)
- A child staying in a sibling-headed household
- A child who is caring for sick parents or guardians
- A child coming from a household affected by HIV and AIDS.

School-related

- Previous grade repetition
- Irregular attendance or continuous absence for more than 3 weeks
- Poor performance in class work and tests.
- Low level of concentration and participation in class

Personal

- Social isolation/inability to make friends/suffer stigma or discrimination.
- Coming to school hungry/looking uncared for/poorly dressed.
- Poor health or physical impairment
• Not having adequate materials able to organize own learning - ie. lack of pen/notebook/textbook/uniform.

The above criteria are intended as guidelines only. These criteria are to assist in the selection of vulnerable children to be placed on an 'at-risk' register and join SOFIE clubs for additional learning support. Using these criteria should help schools identify children known to be vulnerable and at risk of dropping out of school permanently or repeating a grade.

**Remember: the focus of the SOFIE project is to assist schools to increase pupils' access and participation in schooling, reduce dropout and improve learning.**

Selection of these vulnerable children should not be done by just one person. It is recommended that a small SOFIE committee be set up to oversee the selection process (this could include the same people that selected the youth leaders).

Initially, no more than 10 pupils should be selected. If there are fewer pupils, this is fine! You may not be able to identify all vulnerable children at the start of the school year. Others can be identified and asked to join SOFIE clubs as time goes by. Make sure that you do not rush to choose many pupils, but keep some resources in hand for those that may join later.

**Remember: Children can become vulnerable and at risk of dropping out or repeating at any time. A child's circumstances can quickly change - schools have to be aware of such changes.**

National Policy for Orphans and other Vulnerable Children

The policy defines an orphan as:
‘a child who has lost one or both parents because of death and is under the age of 18’.

A vulnerable child is:
‘a child who has no able parents or guardians, staying alone or with elderly grandparents or lives in a sibling-headed household, has no fixed place and lacks access to health care, material and psychological care and has no shelter
APPENDIX 11: CODING FRAME – EVALUATION

SET UP

Initial Views
in_expectations (of project/benefit)
in_comm_views
in_roles (roles feasible?)
in_concern

Set-up Activities (and challenges)
in_activities
set_chall_committee
set_chall_club
set_chall_pupil id
set_chall_buddy id
set_chall_comm mob

IMPLEMENTATION

Clubs
Club leader_role (perceived role/activities)
Club leader_views (of pupils etc)
Club_general (likes & dislikes)
Club_learning support (how supports)

Resources
Study guides (use of)
Bag
Box
bike

Buddies
Buddy_views (of pupils etc)

Teacher support
Teacher_role (perceived role/activities)
HT_role (perceived role/activities)

Community participation
SOFIE_role (perceived role/activities)
SMC/PTA_role (perceived role/activities)
Parent_role (support of learners)

Monitoring
Register

IMPLICATION

Mon_attend (use of; inc register)
Mon_perform (study guides/homework)
Follow-up (who/how?)

Pupil Welfare
Wel_general (support/encouragement)
Wel_funds (fundraising)
Wel_guidance

Challenges
Chall_comm (community/home related)
Chall_school (school issues)
Chall_design (weakness of intervention)

Relationships (between stakeholders)

IMPACT

Benefits
Ben_general
Ben_pupil
Ben_school
Ben_comm

Capacity (egs of improved capacity)

Inclusiveness (eg of inclusiveness)

Outcomes (perceived impact)
Imp_attendance
Imp_dropout
Imp_repition
APPENDIX 12: PARTICIPANT FLOW DIAGRAM (PUPILS)

Intervention Group
20 SCHOOLS

Enrolled in Class 5 (n=1489)
Complete data (n=998)
Missing data (n=242)
Absent (n=249)

Did not enrol in Class 6 (n=273)

Transferred in (n=133)
Repeated Class 6 (n=230)

Enrolled in Class 5 (n=1134)
Complete data (n=795)
Missing data (n=198)
Absent (n=141)

Did not enrol in Class 6 (n=235)

Transferred in (n=138)
Repeated Class 6 (n=151)

Jan 2009
Intervention starts

Enrolled in Class 6 (N=1579)

Transferred out (n=79)
Dropped out (n=128)
Died (n=1)

Enrolled in Class 6 (n=1188)

Transferred out (n=74)
Dropped out (n=147)
Died (n=1)

Nov 2009

Completed Class 6 (n=1371)
Complete data (n=1008)
Missing data (n=207)
Absent (n=156)

Repeat Class 6 (n=371)

Promoted to Class 7 (N=1000)

Nov 2008

Died (n=1)
Repeat Class 6 (n=240)
Promoted to Class 7 (N=726)

Dec 2009

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## APPENDIX 13: EVALUATION FRAMEWORK -

<table>
<thead>
<tr>
<th>Components</th>
<th>Activities</th>
<th>Indicator</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training and capacity-building</td>
<td>Briefing of key participants on the SOFIE project, inc. their roles and responsibilities in implementation.</td>
<td>One-day workshop held</td>
<td>All schools represented</td>
</tr>
<tr>
<td></td>
<td>Additional training and capacity building for club leaders and Standard 6 teachers</td>
<td>Three-day workshop held. All club leaders and Std 6 teachers trained.</td>
<td>Subsequent transfer of teachers during school year meant several untrained teachers in place (5 in Phalombe, 1 in Mzimba)</td>
</tr>
<tr>
<td>Identification and registration of ‘at-risk’ pupils</td>
<td>Schools register ‘at-risk’ pupils</td>
<td>20 schools</td>
<td>In Phalombe all schools registered the maximum of 15 pupils. In Mzimba none of the schools registered 15 pupils, 5 of schools registered less than 10.</td>
</tr>
<tr>
<td></td>
<td>Number of ‘at-risk’ pupils</td>
<td>259 pupils (Mzimba 106, Phalombe 153)</td>
<td>Equal numbers of male and female pupils registered in Phalombe. Significantly fewer female pupils registered in Mzimba schools.</td>
</tr>
<tr>
<td></td>
<td>Registration of additional pupils in school year</td>
<td>74 pupils (29%) in term 2, 16 (6.2%) in term 3.</td>
<td></td>
</tr>
<tr>
<td>Resources</td>
<td>Collection of ‘school-in-a-box’ and bicycle by club leaders</td>
<td>All club leaders received resources during initial training</td>
<td>Some concerns over responsibility of maintenance of bicycle.</td>
</tr>
<tr>
<td></td>
<td>Distribution of school-in-a-bag to ‘at-risk’ pupils</td>
<td>All registered ‘at-risk’ pupils received ‘school-in-a-bag’</td>
<td>Bags distributed to all ‘at-risk’ pupils on registration. Those registered later in the year received at later date. Because of fewer numbers registered in Mzimba, some were not distributed.</td>
</tr>
<tr>
<td></td>
<td>Distribution of radios to clubs</td>
<td>All clubs received radios</td>
<td>Delayed until May 2009</td>
</tr>
<tr>
<td>Club Leaders</td>
<td>Selection of suitably qualified youth volunteers</td>
<td>20 club leaders selected by communities. MSCE qualification = 16; JCE qualification = 4</td>
<td>Majority with minimum 4 years of secondary education. Age range 20 -31 years.</td>
</tr>
<tr>
<td></td>
<td>Female youth encouraged to participate</td>
<td>Female = 30%</td>
<td>Few female club leaders selected</td>
</tr>
<tr>
<td></td>
<td>Club leaders in place for school year</td>
<td>19 club leaders completed school year</td>
<td>One male club leader migrated to RSA</td>
</tr>
<tr>
<td>Club Meetings</td>
<td>No of meetings per year</td>
<td>Ranged from 18 to 36, overall = 30</td>
<td>All schools held regular club meetings</td>
</tr>
<tr>
<td></td>
<td>Timing of meetings to suit learners</td>
<td>Yes, usually Friday afternoon or weekend.</td>
<td>Examples of flexibility in some schools. Some difficulties for pupils living at a distance.</td>
</tr>
<tr>
<td>Section</td>
<td>Description</td>
<td>Count/Details</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Attendance of learners</td>
<td>Mean number of clubs attended: 18</td>
<td>Varied, absenteeism a problem for some.</td>
<td></td>
</tr>
<tr>
<td>Study guides and learning support</td>
<td>Marking of study guides by teachers 70% marked every 2 weeks (9 in Mzimba, 5 in Phalombe), 40% never marked</td>
<td>Limited teacher support in Phalombe</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Club leaders involved in marking Mzimba: 9, Phalombe 2, overall 11 (55%)</td>
<td>Some took up task from teachers.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Additional homework tasks Mzimba 9, Phalombe 3, overall 12 (60%)</td>
<td>Limited involvement, especially in Phalombe</td>
<td></td>
</tr>
<tr>
<td>Buddy system</td>
<td>No of schools with buddy system in place 19 schools</td>
<td>One school had only 1 buddy, who was later registered as ‘at-risk’</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of buddies per school Range 2 -10 per school, mean of 6 per school.</td>
<td>32% of buddies in Phalombe were female; in Mzimba 58%.</td>
<td></td>
</tr>
<tr>
<td>Guidance and Counselling</td>
<td>No of schools providing counselling for ‘at-risk’ pupils 12 schools.</td>
<td>Little one-to-one counselling, but ‘advice’ given at clubs or to absentees by SOFIE committee and/or school staff.</td>
<td></td>
</tr>
<tr>
<td>Record-keeping, monitoring and follow-up</td>
<td>Class register kept up-to-date 18 schools</td>
<td>Schools reported a notable improvement in record-keeping</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Class register records orphan status 20 schools</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Class register records reasons for absence 15 schools</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>At-risk register kept up-to-date 16 schools</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Follow-up activities take place 13 schools</td>
<td>Examples of home visits to pupils, discussion with guardians</td>
<td></td>
</tr>
<tr>
<td>Community involvement and support</td>
<td>Sensitization of parents and community members on SOFIE project 14 schools</td>
<td>Community meetings held at schools (e.g. through PTA)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Set-up of SOFIE sub-committees SOFIE sub-committee in place in all schools</td>
<td>Mean number of members = 8 (overall 60% male). No pupil representation.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Regular meetings of SOFIE committee Mean number of meetings held = 4</td>
<td>Minimum of at least one per term. At two schools, committees never met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fundraising &amp; support for pupil welfare 8 schools</td>
<td>Range of activities, limited in scope (e.g. contributions to buy soap &amp; notebooks, purchase of 1 school uniform for pupil). Only 2 schools in Phalombe.</td>
<td></td>
</tr>
<tr>
<td>Promoting inclusion</td>
<td>Changes in school policies to reduce exclusion etc. 8 schools</td>
<td>Examples of changes in uniform policy and rules of discipline to prevent exclusion from class.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Changes in class/school practices to include vulnerable pupils 9 schools</td>
<td>Examples of leadership roles for vulnerable pupils, extra learning support, addressing discrimination.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Participation in decision – making (pupil attendance at SOFIE committee meetings) 3 meetings (2 schools)</td>
<td>Poor representation of pupils on committee.</td>
<td></td>
</tr>
</tbody>
</table>
# Appendix 14: Logistic Regression Tables

<table>
<thead>
<tr>
<th>DROPOUT</th>
<th>Exp (B) Odds ratio (95% Confidence Intervals)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Model 1</td>
</tr>
<tr>
<td>Intervention</td>
<td>0.61**</td>
</tr>
<tr>
<td></td>
<td>(0.41-0.91)</td>
</tr>
<tr>
<td>District</td>
<td>0.88</td>
</tr>
<tr>
<td>(Mzimba S)</td>
<td>(0.51-0.86)</td>
</tr>
<tr>
<td>District x Intervention</td>
<td>0.51*</td>
</tr>
<tr>
<td></td>
<td>(0.29-0.86)</td>
</tr>
<tr>
<td>Sex (Female)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex x Intervention</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>1.61***</td>
</tr>
<tr>
<td></td>
<td>(1.41-1.83)</td>
</tr>
<tr>
<td>Age x Intervention</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Single Orphan</td>
<td>1.11</td>
</tr>
<tr>
<td></td>
<td>(0.78-1.58)</td>
</tr>
<tr>
<td>Double Orphan</td>
<td>1.23</td>
</tr>
<tr>
<td></td>
<td>(0.74-2.04)</td>
</tr>
<tr>
<td>Repeating grade</td>
<td>1.07</td>
</tr>
<tr>
<td></td>
<td>(0.73-1.56)</td>
</tr>
<tr>
<td>Baseline Maths score</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Baseline English score</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>PROMOTION</td>
<td>Exp (B) Odds Ratio (95% Confidence Intervals)</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Model 1</td>
</tr>
<tr>
<td>Intervention</td>
<td>0.74</td>
</tr>
<tr>
<td></td>
<td>(0.37-1.48)</td>
</tr>
<tr>
<td>District (Mzimba S)</td>
<td>1.01</td>
</tr>
<tr>
<td>District x</td>
<td></td>
</tr>
<tr>
<td>Intervention</td>
<td>0.91</td>
</tr>
<tr>
<td>Sex (Female)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex x Intervention</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>0.86**</td>
</tr>
<tr>
<td>Age x Intervention</td>
<td></td>
</tr>
<tr>
<td>Single Orphan</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(0.78-1.70)</td>
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<tr>
<td>Double Orphan</td>
<td>0.86</td>
</tr>
<tr>
<td></td>
<td>(0.49-1.50)</td>
</tr>
<tr>
<td>Repeating grade</td>
<td>1.24</td>
</tr>
<tr>
<td></td>
<td>(0.74-2.07)</td>
</tr>
<tr>
<td>Baseline Maths score</td>
<td>0.98</td>
</tr>
<tr>
<td></td>
<td>(0.90-1.07)</td>
</tr>
<tr>
<td>Baseline Eng score</td>
<td>1.17***</td>
</tr>
<tr>
<td></td>
<td>(1.12-1.20)</td>
</tr>
<tr>
<td>School size</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>(0.99-1.01)</td>
</tr>
<tr>
<td>Pupils per teacher</td>
<td>1.01**</td>
</tr>
<tr>
<td></td>
<td>(1.00-1.02)</td>
</tr>
<tr>
<td>School feeding</td>
<td>1.18</td>
</tr>
<tr>
<td></td>
<td>(0.46-3.06)</td>
</tr>
</tbody>
</table>
Appendix 15: Comparing sub-groups of pupils who sat SOFIE pre-test

A short analysis of characteristics of the two sub-groups of pupils – those who had sat the pre-test for the SOFIE project and those who had not – prior to imputing missing data for pre-test scores in English and Maths. This analysis was done to assess there was likely to be bias due to differences between these two groups. Surprisingly, the only significant difference with regard to pupil characteristics was that a slightly greater proportion of pupils registered as at-risk were absent from the pre-test. This brief analysis suggests that imputing missing data would have been unlikely to create substantial bias.

Table 12-1: Characteristics of sub-groups of pupils, by presence at SOFIE pre-test

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Sat SOFE pre-test (%)</th>
<th>Absent for SOFIE pre-test (%)</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>49.3</td>
<td>47.8</td>
<td>2750</td>
</tr>
<tr>
<td>Double orphan</td>
<td>4.8</td>
<td>5.5</td>
<td>2585</td>
</tr>
<tr>
<td>Single orphan</td>
<td>18.7</td>
<td>17.4</td>
<td>2585</td>
</tr>
<tr>
<td>Repeating the grade</td>
<td>15.1</td>
<td>12.7</td>
<td>2660</td>
</tr>
<tr>
<td>No breakfast</td>
<td>40.1</td>
<td>41.3</td>
<td>2014</td>
</tr>
<tr>
<td>Receives assistance</td>
<td>51.7</td>
<td>49.9</td>
<td>2104</td>
</tr>
<tr>
<td>Registered as At-Risk*</td>
<td>8.4</td>
<td>11.0</td>
<td>2014</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mean (SD)</th>
<th>Mean (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>13.4</td>
</tr>
</tbody>
</table>

* p<0.05 † household receives remittances from other family members, within or outside Malawi.
APPENDIX 16: INTERVENTION EFFECTS ON AT-RISK PUPIL OUTCOMES

Table A13-1 summarizes significant intervention impacts. The intervention had a significant impact on dropout, but not on other outcomes. Unadjusted estimates suggest that the intervention reduced dropout overall by 45% (OR=0.55). The reduction in dropout was greater among children deemed at-risk (OR=0.40) than children not deemed at-risk (OR=0.61) although the difference between these two figures was not significant. Estimates adjusting for baseline covariates resulted in similar or slightly larger intervention effects. There was no significant interaction between the intervention and at-risk groups suggesting that the intervention did not have a significantly different impact on selected at-risk pupils compared with those not at-risk.

TABLE A13-1: INTERVENTION EFFECTS OVERALL AND BY AT-RISK GROUP

<table>
<thead>
<tr>
<th>Outcome:</th>
<th>Dropout Unadjusted Odds Ratio</th>
<th>Dropout Adjusted Odds Ratio</th>
<th>Maths Unadjusted Coeff</th>
<th>Maths Adjusted Coeff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>0.55***</td>
<td>0.46***</td>
<td>0.63</td>
<td>0.59</td>
</tr>
<tr>
<td>n=2,767</td>
<td>(0.367 - 0.827)</td>
<td>(0.311 - 0.673)</td>
<td>(-0.124 - 1.380)</td>
<td>(-0.253 - 1.442)</td>
</tr>
<tr>
<td>Deemed at-risk by community</td>
<td>0.40**</td>
<td>0.40**</td>
<td>0.91**</td>
<td>0.83*</td>
</tr>
<tr>
<td>n=518</td>
<td>(0.189 - 0.838)</td>
<td>(0.171 - 0.943)</td>
<td>(0.085 - 1.733)</td>
<td>(-0.071 - 1.733)</td>
</tr>
<tr>
<td>Not deemed at-risk</td>
<td>0.61**</td>
<td>0.51***</td>
<td>0.61</td>
<td>0.58</td>
</tr>
<tr>
<td>n=2,249</td>
<td>(0.401 - 0.921)</td>
<td>(0.336 - 0.760)</td>
<td>(-0.151 - 1.375)</td>
<td>(-0.194 - 1.354)</td>
</tr>
</tbody>
</table>

*** p<0.01, ** p<0.05, * p<0.1  95% confidence intervals in parentheses
Unadjusted estimates also suggested a significant program effect on mathematics scores for the at-risk group (an increase in 0.91 marks out of 24) but not for children not at-risk, nor for the overall sample. Adjusted estimates suggest a reduced intervention effect of 0.83 marks for the at-risk group, with only borderline significance ($p=0.071$) when controlling for covariates, suggesting a less robust finding than for dropout.

APPENDIX 17: SELECTED RESEARCH INSTRUMENTS

SEMI-STRUCTURED INTERVIEW GUIDE (YOUNG PEOPLE AFFECTED BY HIV/AIDS)

A. GENERAL DETAILS

Remember to make a note of: village, age of respondent, orphan-status, attending school/current standard, members of household present, location of interview, comfort of respondent.

B. SCHOOL DATA

Instructions: record information on progress through school (age started, change of schools, repetition of classes, standard dropped out).

Can you give me some information about your schooling?

What age did you start school?
Have you always learnt at the same school? If NO, what other schools & which classes?
Have you ever repeated a class? If YES, how many times, which class and why?

C. RELATIONSHIPS AND VALUES

Instructions: refer to Household Diagram

Points to discuss: family roles, household responsibilities, friends & social networks, values

Tell me a bit more about the household in which you stay/family …

1. Who in your household are you closest to? Why?
2. Who in your household do you admire? Why?
3. Who in your household provides money and food? In what ways?
4. Who in your household assists you with things for school?
5. Yourself, what do you do to support the household? What responsibilities/tasks do you have? How do feel about having to do these tasks?
6. Are you sometimes treated differently from children in your household? In what ways? Why do you think this is so?

Tell me more about your friends….

7. Who among your friends are you closest to? Why? [probe: do they attend school? sex?]
8. Who among your friends do you admire? Why?
9. What sort of things do you do together as friends? What do you chat about?
10. Do you feel happy spending time with your friends – or do you sometimes feel unhappy? Why?

Tell me about some of the other things you like doing …

11. What things in your life are important to you?
12. How do you like to spend your free time? [probe: clubs, church activities, sport]
D. LIFE HISTORY

Instructions: Refer to ‘River of Life’.

Use questions 13 -17 as a guide to discuss each event, starting with the earliest. Repeat for each event.

Points to discuss: Major events in life and their impact on mobility, welfare and education.

You have drawn your ‘River of Life’. Please tell me more about these times in your life … let’s start here

13. Tell me about what happened at this point?
14. Who/where were you staying with at this time? [probe: if not at current location, where?]
15. In what ways did your life change? How did this make you feel?
16. What effect did this have on your schooling? [probe: attendance? learning? participation]
17. What support did you receive at this time? From whom? [probe: school?]

E. REASONS FOR DROPOUT [out-of-school only]

Instructions: refer to ‘River of Life’. Record age at which respondent dropped out.

Points to discuss: Reasons for dropout, the decisions involved, feelings about dropping out.

18. At what point did you leave school permanently? For what reasons?
19. Whose decision was it that you leave school?
20. How did you feel about leaving school early?

F. EXPERIENCES OF SCHOOL

Points to discuss: school engagement (likes/dislikes), participation in class, reasons for absentee-ism and dropout, experiences of stigma or discrimination, support received (school/home).

Now I would like to talk with you a bit more about your experiences of school. ..

Participation

21. Tell me more about what you like about going to school …
22. How does what you are learning at school assist you in your everyday life? How do you think these lessons will help you in the future?
24. When you are in class, do you prefer to let others participate in class activities?
25. What class activities do you like to get involved in?
26. Do you feel free to answer questions in class? To ask your teachers questions?
27. What sort of support do you receive from teachers during class?

Stigma and discrimination

27. What do you do NOT like about going to school?
28. Do you ever feel shy/embarrassed at school? Why?
29. Do others at school say things that make you feel unhappy/uncomfortable? What sort of things? [probe: pupils/teachers]
30. Do you think you are sometimes treated differently from other pupils? In what ways?
31. Does anyone at school make comments or tease you because you are an orphan? Who?
Absenteeism and dropout

32. Do any of the things you dislike about school make you decide to stay away? Which things?
33. What other reasons make you miss classes?
34. These days, if you were absent from class, where would you be and what might you be doing?
35. Do you have any friends or class mates that have left school early? Why did they leave?

[In-school only]

36. What made you decide to stay at school, even though your friends/classmates left?
37. Do you expect to finish primary school?
38. How would you feel if you had to leave school early?
39. Who encourages you in your efforts to continue with school? In what ways?

Way Forward

40. If you could change one thing about your school that would help you to learn better, what would it be?
41. If you could change one thing about your home/community that would help you learn better what would it be?

D. ALTERNATIVE LEARNING OPPORTUNITIES

Points to discuss: different media for learning (radio/books etc.), experiences of peer education and/or non-formal education.

42. Apart from school, where else have you had the chance to learn things that are useful to you in your daily life? [probe: radio shows, youth groups, vocational training in community, etc.]

E. FUTURE PLANS AND EXPECTATIONS

Points to discuss: expectations, plans and possible achievements, marriage.

43. What about in the future, what do you see yourself doing in 10 years time?
44. What would you have liked to have achieved by that time?
45. What about marriage? Would you like to get married? If NO, why not? At what age would you like to be married?

THANK YOU
GUIDE FOR HOUSEHOLD INFORMANT

(a) General family background of HH
- home area/tribe/chief
- length of time in current location (childhood village/settled on marriage?)
- relationship to child interviewee

N.B. If HH is not biological parent:
- when did child [name of child] join household?
- What were the circumstances surrounding child joining household? (who decided to take him/her in and why)

(b) What have been the household’s major times of happiness in recent years?

(c) Can you tell us something about the major problems faced by the household/times of sorrow in recent years?

(d) How is the household supported? Has this changed in recent years? Explain.
- subsistence farming (land)
- income generation/salaried work (who?)
- support from relatives/friends staying outside the household
- additional support (NGO/church/CBO)

(e) What responsibilities does [child’s name] have in the household?

(f) Schooling & school costs:
- Who makes decisions about schooling of children in the household?
- What are school costs faced by household? Are costs manageable?
- Who generally provides for school costs for [child’s name].

(g) Relevance of schooling
- In your household’s current circumstances, do you see education for children in your household as important?
- Are you happy with what children are learning at school? Explain.
- What benefits have you seen from [child name]’s time at school?

(h) Access to schooling
- Who in the household makes sure that [child’s name] is attending school?
- Has the household’s recent difficulties [sickness/bereavement] affected [child’s name]’s schooling? In what ways? (attendance, performance). How do you feel about this?
- [drop out households] What were the circumstances that led to [child’s name] leaving school? How did you feel about this?

(i) Relationship with school
- Does the school follow-up if [child name] is absent regularly? What support is offered by the school for children like [child name]?
- Do you believe that teachers at [child name]’s school are doing a good job?
- Can you describe the relationship between the school and the surrounding community?
EXAMPLE OF FGD GUIDE

COMMUNITY FOCUS GROUP DISCUSSION

Instructions:
- Find a suitable location for the discussions
- Remind the teachers of the purpose of the study and ask permission to record.
- Start by reading through the case stories below and then facilitate discussions.

Mary’s story:
I am a 15 year old orphan. My father died, then my mother. I now stay with my grandmother. The biggest problem of being an orphan has been to get enough money to buy clothes, soap and other necessities. Last year I did not have proper clothes to wear to school and I felt shy, so I dropped out.

Loveness’s story:
When my mother died I wanted to join my sister’s household, but my father refused … I had to move to my father’s village and stay in the house with his two wives. When the family is eating meals, I eat separately from the other children … I do almost everything: sweeping, washing plates, fetching water, preparing phala, fetching vegetables and sometimes washing my father’s and his first wife’s clothes. My father’s wives are supposed to take turns preparing meals. When it is the first wife’s turn she waits for me to do it, even waiting for me to return from school. Now the second wife wants me to do the same for her ….

Daniel’s story:
I am eighteen years old. I have three sisters and one brother. My eldest sister got married last year. I live together with my other sisters and brother. They all go to school, but I dropped out in order to look for ganyu. My father built the house we are staying in, but he died before he could finish it. When my mother died, we stayed with our uncle, but he was cruel and demanded our house and the little furniture left. So, we decided to go and live on our own in our house. We face many problems, we lack food and clothes and money for school fees. I know my eldest sister got married just to get away from these problems. We miss our parents a lot, especially when there is nothing to eat.

89 Mary’s and Loveness’s stories are adapted from Bryceson, D., Fonesca, J. & Kazandira J. (2004) Social Pathways from the HIV & AIDS Deadlock of Disease, Denial and Desperation in Rural Malawi, CARE Malawi, Centre for Social Research, University of Malawi.

Roderick’s story:
I am fourteen years old. I stay with my mother and my younger brothers. My parents are divorced. Now my mother is sick and we don’t know what to do. It has been a very difficult time and we had to sell some things to buy the necessary medication. Our relatives do not assist. I am sometimes absent from school in order to look for money and food.

Questions:
Do you think the above stories are similar to those of children in communities in this area? Discuss.

Probe: How are they similar?
Probe: How do they differ?

In this community, if one or both parents die, what arrangements are generally made to support the children?

Probe: Who makes that decision?
Probe: are such decisions always to the advantage of the children?

In Mary’s story, she said that her main reason for her dropping out of school was a lack of clothes. Do you think that was the only reason, or might there have been other factors? Discuss.

Do you think that children coming from households affected by HIV & AIDS face additional difficulties in getting an education compared to other disadvantaged children, such as those coming from poor households? Discuss.

Probe: If YES, what specific barriers do they face?
Probe: Is it different for girls and boys?

5. (a) Is education seen as a priority for people in this community? Explain.
• If No, what are their priorities?
• If Yes, does this change in times of hardship and bereavement (death)? How?

6. What support do boys and girls affected by HIV & AIDS get within their communities?

7. What more should be done to assist boys and girls from households affected by HIV & AIDS to succeed at school?

Probe: what could the school do?
Probe: what could the community do?
EXAMPLE OF KEY INFORMANT INTERVIEW GUIDE

KEY INFORMANT INTERVIEW: SCHOOL HEAD/DEPUTY

Instructions:
- Remind respondent of purpose of project
- Ensure confidentiality: names and names of schools will be protected in any reports.
- Ask permission to use recorder and to proceed

A. PERSONAL DETAILS

- Record the following personal details
  1. Sex (interviewer to observe and record)
  2. How long have you been head teacher of this school? (years)
  3. How many years have you been in the teaching profession? (years)

B. ROLE OF SCHOOL

4. (a) How important is the role of the school in this community?
   (b) Is education seen as a priority for most families in this community?
   • If No, what are families’ priorities?
   • If Yes, do you think their priorities change in times of hardship? Explain.

C. ISSUES OF ATTENDANCE, PROMOTION & RETENTION

5. (a) How would you describe the attendance of boys and girls at this school?
   • What patterns of absenteeism, if any, have you observed? (probe: time of year, market days, cultural events etc.)
   • Do any of your pupils withdraw temporarily from school, only to return weeks or months later?
   (b) What procedure is followed at this school when promoting pupils to the next class?
      (Note: government policy on promotion from one Standard to next?)
   (c) Is repetition of classes by boys and girls a problem at this school? Explain.
   (d) Is drop out amongst boys and girls a problem at this school? Explain.

6. (a) From your observations, which types of children are most likely to:
   • experience poor or erratic attendance?
   • perform poorly and repeat classes?
   • drop out permanently?
   (if not mentioned, probe for differences between boys and girls)
   (b) What characteristics, appearance or behaviour might help you identify when a specific child is at risk of dropping out permanently? (if not mentioned, probe for behaviour in classroom)
7. What follow-up takes place when a pupil has been absent for some time or is believed to have dropped out? Who is responsible for this?

D. IMPACT OF HIV/AIDS

8. (a) In what ways, if any, is HIV & AIDS contributing to the problems of:
   - absenteeism of boys and girls at this school?
   - poor performance of boys and girls at this school?
   - drop out of boys and girls at this school?
(b) In what other ways, if any, has HIV & AIDS had an impact at this school?

9. (a) From your observations, do boys and girls coming from households directly affected by HIV & AIDS get the same chances to learn and participate in school activities as other disadvantaged children, such as those coming from poor families? Or do they face additional difficulties?
(b) If No, they don't have the same chances, what specific barriers do they face:
   - in the household and community?
   - in the school and classroom?

10. (a) From your observations, how do fellow pupils interact with boys and girls affected by HIV & AIDS? (probe: how does this differ if pupils are of the same sex/different sex?)
(c) From your observations, how do teachers interact with boys and girls affected by HIV & AIDS?
(d) Would teachers interact differently if they suspected the boy or girl was HIV positive?

E. SCHOOL SUPPORT FOR CHILDREN AFFECTED BY HIV & AIDS

11. (a) Currently, what specific support is provided by teachers and school management for boys and girls affected and/or infected by HIV & AIDS?
   - learning support?
   - psychosocial support? (counseling etc.)
   - general welfare and health and nutrition
(b) If there is provision for such support, how are target children identified and monitored?
(c) To what extent, if at all, are children consulted about the support they need?
(d) What challenges do teachers face in providing support for boys and girls affected and/or infected by HIV & AIDS?

F. CAPACITY AND TRAINING

12. (a) What training have teachers and school management received in relation to dealing with vulnerable children, including those affected and/or infected by HIV & AIDS? For example:
   - guidance and counseling
   - life skills
   - addressing instances of harassment, discrimination or abuse?
   - working as AIDS Toto patrons
If additional training was available, what issues would you like to see covered?

13. Does your school have any resources to support independent learning?
   (probe: homework activities, after-school study groups, peer mentoring, book-lending facilities)

F. SCHOOL LINKAGES

14. How would you describe the relationship between school staff and the surrounding communities?

15. (a) To what extent do teachers and school management work together with community members to support vulnerable children, including those from households affected by HIV & AIDS?
   (b) What other organizations and/or government departments link up with the school in order to address the needs of vulnerable children, including those affected by HIV & AIDS?
   (probe: is the school used as a distribution centre or meeting point for organizations/departments working with vulnerable children?)

G. WAY FORWARD

16. In your opinion, what are the key supporting factors that can:
   (a) promote regular attendance and reduce drop out amongst boys and girls affected by HIV & AIDS?
      • at school level
      • at community level
   (b) encourage the participation and learning of boys and girls affected by HIV & AIDS?
      • at school level
      • at community level

17. What alternative teaching & learning strategies could be put in place to reach out to boys and girls affected by HIV & AIDS, in order to improve their access to learning?
EXAMPLE OF SCHOOL CHECKLIST (PRE-TEST)

PRE-TEST SCHOOL VISITS 2008

Date __________________ Day________________________________

<table>
<thead>
<tr>
<th>School Name</th>
<th>District</th>
<th>Zone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Proprietor</th>
<th>School Shift</th>
<th>Enumerator</th>
<th>Checked by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Government/LEA</td>
<td>1.Single shift</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Religious Agency</td>
<td>2..Double Shift</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3..Overlapping</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PART A: Pupil Information

1. **Pupil Enrolment for Standard 6**
   Fill in enrolment for Standard 6 for first term and current enrolment.

<table>
<thead>
<tr>
<th>Standard 6</th>
<th>2008 First term Enrolment* Month________</th>
<th>2008 Third term Enrolment** Month________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Boys</td>
<td>Girls</td>
</tr>
</tbody>
</table>

   *Number of pupils enrolled end of first term (March 2008). If not available, indicate month.
   **Number of pupils enrolled end of third term (October 2008).

2. **Pupil Attendance for Standard 6**
   Number and % of pupils attending on the day of visit. Refer to attendance registers or do a head count.

<table>
<thead>
<tr>
<th>Standard 6</th>
<th>No. Pupil Attendance Date: <em><strong>/</strong></em>/____</th>
<th>% Pupil Attendance* Date: <em><strong>/</strong></em>/____</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Boys</td>
<td>Girls</td>
</tr>
</tbody>
</table>

   *no of pupils absent over the total number of pupils, expressed as %.
3. **Pupil transfers for Standard 6 2008**
Fill in the number of pupils that transferred into the school during 2008 and those who transferred out.

<table>
<thead>
<tr>
<th>Standard 6</th>
<th>IN</th>
<th>OUT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Boys</th>
<th>Girls</th>
<th>Total</th>
<th>Boys</th>
<th>Girls</th>
<th>Total</th>
</tr>
</thead>
</table>

4. **Pupil repetition for Standard 6 2008**
Fill in the number and % of pupils that are currently repeating Standard 6

<table>
<thead>
<tr>
<th>Standard 6</th>
<th>No. of repeaters 2008</th>
<th>% repeaters 2008*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Boats</td>
<td>Girls</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**no of pupils repeating in 2008 over the total number of pupils, expressed as %.

5. **Pupil withdrawal and potential dropout for Standard 6 2008**

<table>
<thead>
<tr>
<th>Standard 6</th>
<th>No. of potential dropouts 2008</th>
<th>% of potential dropouts 2008*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Boys</td>
<td>Girls</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* no of pupils who have been absent from school for more than 8 weeks and have not returned to school by the time of the school visit

6. **No of orphans registered in Standard 6, for 2008**

Fill in information according to school records. If not available consult class teacher – do NOT do a head count in class or request teacher to do so

<table>
<thead>
<tr>
<th>Standard 6</th>
<th>Double orphan</th>
<th>Single Orphan</th>
<th>Total Orphans</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Boys</td>
<td>Girls</td>
<td>Total</td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

PART B: TEACHER INFORMATION

7. **Current Teacher Allocation by sex and academic qualification**

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Number of Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
</tr>
<tr>
<td>PLSCE</td>
<td></td>
</tr>
<tr>
<td>JCE</td>
<td></td>
</tr>
<tr>
<td>MSCE</td>
<td></td>
</tr>
<tr>
<td>Diploma</td>
<td></td>
</tr>
<tr>
<td>Degree</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
</tr>
</tbody>
</table>
8. **Current Teacher Allocation by sex and professional qualification**

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Number of Teachers</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
<td>Male</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>Qualified (permanent)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qualified (contract)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unqualified (inc. TT and students)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volunteer</td>
<td></td>
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</tr>
</tbody>
</table>

9. **Teacher Long-term Absence**

<table>
<thead>
<tr>
<th>No. of Teachers</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of teachers on maternity leave</td>
<td>NA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Teachers on frequent/long-term sick leave</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of teachers on study leave/sabbatical</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of teachers on residential training</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sub-Total</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

10. **In-service training opportunities in 2008**

Fill in the number of teachers (including any volunteers) who participated in INSET during 2008.

<table>
<thead>
<tr>
<th>No. of Teachers</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>PCAR training</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School/Zonal training (PEA)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>School-based training (peers/school head)</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>MTTA/MESA training</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV &amp; AIDS training (Tiwoloke)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV &amp; AIDS training (other)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>List</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training in Guidance and Counselling skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training in support for OVC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training in Special Needs skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
11. **School Records**
Request and check school records and indicate whether available and if regularly updated.

<table>
<thead>
<tr>
<th>Documents/records Available</th>
<th>Available (Y=1, N=2)</th>
<th>Regularly updated (Y=1, N=2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher Attendance Register (Time book)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pupil attendance register</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cohort tracking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pupil Progress Book (inc continual assessment records)</td>
<td>NA</td>
<td></td>
</tr>
<tr>
<td>EMIS statistical returns (monthly returns)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Action Plan</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(a) Do school attendance records indicate number of orphans enrolled? ________ (Y=1, N=2):
(b) Do school attendance records list reasons for
   (i) Pupil Absenteeism? ________ (Y=1, N=2):
   (ii) Pupil Drop out? ________ (Y=1, N=2):

**PART C: SCHOOL ENVIRONMENT**

12. **School Buildings**

<table>
<thead>
<tr>
<th>Buildings</th>
<th>Quality</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Permanent(^{91})</td>
<td>Other(^{92})</td>
<td>Total</td>
</tr>
<tr>
<td>Classrooms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Head teacher office</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teachers’ houses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Store room</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Library</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff room</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kitchen</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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\(^{91}\) Permanent = iron sheets, cement floors, doors and windows  
\(^{92}\) Other = temporary shelters, borrowed buildings etc.

319
13. School Sanitation
Record no. of facilities present and their condition referring to footnotes

<table>
<thead>
<tr>
<th>Sanitation</th>
<th>Quality</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>VIP</td>
<td>Perm</td>
<td>Temp</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Staff toilets</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Girls Toilets</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys Toilets</td>
<td></td>
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<tr>
<td>Hand-washing facilities</td>
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</tbody>
</table>

(a) Source of clean water at school? ________ (Y=1, N= 2):
(b) Drinking water for pupils in or near classrooms? ________ (Y=1, N= 2):

PART D: SCHOOL PARTICIPATION

14. Does the school have an Early Childhood Centre  1 YES  2 NO ____
15. Does the school have a school feeding programme?  1 YES  2 NO ____

List the number of active clubs at the school. Cross check if they have met at least once per term.

<table>
<thead>
<tr>
<th>Extracurricular clubs</th>
<th>Active?</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV &amp; AIDS (e.g. AIDS Toto)</td>
<td></td>
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<tr>
<td>Mphamvu kwa Chinyamata (MKC)</td>
<td></td>
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<tr>
<td>Human/ Child Rights</td>
<td></td>
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<tr>
<td>Sports teams</td>
<td></td>
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<tr>
<td>Others: (list)</td>
<td></td>
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</tbody>
</table>

16). Community education committees
List all the active community-linked committees at the school in 2008. (met at least once per term)

<table>
<thead>
<tr>
<th>School/ Community committees</th>
<th>Active?</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Management Committee</td>
<td></td>
</tr>
<tr>
<td>PTA</td>
<td></td>
</tr>
<tr>
<td>Children’s Forum</td>
<td></td>
</tr>
</tbody>
</table>

93 VIP = incs. fly trap, raised cement cover.
17). Specific support provided for OVC at school in 2008

<table>
<thead>
<tr>
<th>School/ Community committees</th>
<th>Tick all that apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human/Child Rights</td>
<td></td>
</tr>
<tr>
<td>Mothers' Group (FAWEMA)</td>
<td></td>
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<tr>
<td>Others (list)</td>
<td></td>
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<tr>
<td>School/ Community committees</td>
<td></td>
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<tr>
<td>Ambassadors’ Girls Support Project (AGSP)</td>
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<tr>
<td>Tovwirane HIV &amp; AIDS project</td>
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<tr>
<td>Salvation Army</td>
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<tr>
<td>World Vision</td>
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<tr>
<td>Local CBOs/church organisations</td>
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<tr>
<td>SMC/PTA/school initiatives</td>
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<tr>
<td>Other……..</td>
<td></td>
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</tbody>
</table>
### EXTRACT FROM HOUSEHOLD ROSTER

<table>
<thead>
<tr>
<th>Line #</th>
<th>FULL NAME</th>
<th>SEX</th>
<th>AGE</th>
<th>RELATION</th>
<th>CRIMINALITY [AGES 10 AND UNDER]</th>
<th>SCHOOLING [AGES 5 AND OLDER ONLY]</th>
<th>HEALTH</th>
<th>MARITAL STATUS [AGES 13 AND OLDER]</th>
</tr>
</thead>
<tbody>
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</table>

**CODES/SKIP:**
- 11 = never married
- 22 = married or resident
- 33 = married in nonresident
- 66 = separated
- 88 = widowed
- 99 = DK

94 Household roster was adapted from an instrument used during a collaborative research project between CERT, University of Malawi and the Population Council.

---

### EXTRACT FROM PUPIL QUESTIONNAIRE 2009

<table>
<thead>
<tr>
<th>No</th>
<th>FUNSO</th>
<th>YANKHO</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Dzina lakw ndani? (Lebo dzina la bamo poyamba, mango Banda, Mary)</td>
<td>Dzina</td>
</tr>
<tr>
<td>1</td>
<td>Ndwe wamkazi kapena mwamuna? (Zunguliza nambala yomwe ili pambali pa yankho limodzi londolondola)</td>
<td>Mkazi</td>
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<td></td>
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<td>Mwamuna</td>
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<td>2</td>
<td>Uli ndi zaka zingati?</td>
<td>Zaka</td>
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<tr>
<td>3.1</td>
<td>Uli musitandade chiyani?</td>
<td>Sistandade</td>
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<tr>
<td>3.2</td>
<td>Kodi ukubwereza sibandadzi? (Zunguliza nambala yomwe ili pambali pa yankho limodzi londolondola)</td>
<td>Inde</td>
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<td>Ayl</td>
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</tbody>
</table>

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94 Household roster was adapted from an instrument used during a collaborative research project between CERT, University of Malawi and the Population Council.
**INSTRUCTIONS:**

1. **Prior to field work,** for each school enter all pupil names, sex, ID numbers and additional details from the SOFIE SPSS database into table below.
2. At schools, refer to class attendance registers to up-date the information in table below. Liaise with current Std 6 teacher where necessary. (NB. At intervention schools check which additional pupils have been registered as ‘at-risk’ and amend accordingly)
3. All pupils in attendance on the day of the visit will be assumed to have sat the post-test. This can be entered in the appropriate column (12). Those absent on the day of the school visit will not sit the post-test (12). The reason for their absence from post-test should also be recorded (13). This will include those considered to have dropped out of school (absent for more than 8 consecutive weeks).
4. Some pupils from the database may no longer be present in the current Standard 6 for 2009. They will have either transferred to another school or be currently out of school. If known to have transferred out, amend appropriate column (8).
5. Some pupils will be recorded in the current Standard 6 class attendance register that were not entered into the SOFIE database. These will be pupils who have recently transferred into the school. All new names should be added at the end of the table below and given an ID number in continuation from the last number. Check whether these pupils are repeaters or have transferred in and record in the appropriate column. As these pupils did not sit the SOFIE pre-test then record ‘2’ for ‘No’ in the column 10.
6. **Attendance** of pupils will be recorded once photocopies of attendance registers are made available and reconciled. Data on attendance need not be recorded at the school.
7. For columns 6 to 12, code as follows: Yes = 1; No = 2; no data available = ND. **NB. ND should only be recorded if all means of obtaining data have failed.**
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</table>

⁹⁵ Use codes from class attendance register: O = orphan; N = non-orphan; DK = don’t know (child doesn’t know). If no data available/recorded, code ND.

⁹⁶ Use codes: 1_absent (still enrolled); 2_dropped’ out during 2009; 3_transfer OUT; 4_death
### SOFIE ‘AT-RISK’ REGISTER

Name of School ___________________________  Name of Teacher ________________________________  
Checked and Signed ______________________  (School Head)

<table>
<thead>
<tr>
<th>ID</th>
<th>Name of pupil</th>
<th>Sex (M/F)</th>
<th>Age</th>
<th>Orphan status</th>
<th>Transferred in? (Y/N)</th>
<th>Repeating standard? (Y/N)</th>
<th>Enrolled late? 98</th>
<th>Circumstances 99</th>
<th>Date registered</th>
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</table>

97 Orphan status: S (m) = single orphan (maternal); S(p) = single orphan (paternal; D = double; DK = don’t know.
98 Enrolled 2 weeks or more after start of term
99 Detail whom the pupil is staying with (e.g. grandparent, mother only, uncle, sibling-headed) and current circumstances that make him/her vulnerable.
<table>
<thead>
<tr>
<th>MONTH</th>
<th>Name of pupil</th>
<th>Attending class regularly? (yes/no)</th>
<th>Participation in class? (good/adequate/poor)</th>
<th>Use of study guides (good/adequate/poor)</th>
<th>Class work (good/adequate/poor)</th>
<th>Required counselling/ follow-up? (yes/no)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>
**MONTHLY REFLECTION POINTS**

<table>
<thead>
<tr>
<th>MONTH</th>
<th>What were your main successes and challenges in supporting 'at-risk' pupils this month?</th>
<th>Successes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Challenges</td>
</tr>
<tr>
<td></td>
<td>Comment on the attendance, participation and performance of ‘at-risk’ pupils in your class this month. (If poor, suggest reasons why)</td>
<td></td>
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<td></td>
<td>What positive benefits have you observed from the SOFIE project this month?</td>
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<tr>
<td></td>
<td>Comment on interactions between the school, yourself and the SOFIE club this month.</td>
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<tr>
<td></td>
<td>Any other matters of importance?</td>
<td></td>
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</tbody>
</table>

No of SOFIE committee meetings attended this month?
**SOFIE ACTIVITIES CHECKLIST: TERM 1 2009**

<table>
<thead>
<tr>
<th>District</th>
<th>1. Phalombe</th>
<th>2. Mzimba South</th>
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<table>
<thead>
<tr>
<th>Zone</th>
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<tr>
<th>School</th>
<th></th>
<th>ID:</th>
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<table>
<thead>
<tr>
<th>School Head</th>
<th>Name</th>
</tr>
</thead>
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<table>
<thead>
<tr>
<th>Standard 6 teacher:</th>
<th>Name</th>
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<table>
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<tr>
<th>Club Leader</th>
<th>Name</th>
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<tr>
<th>Form completed by:</th>
<th>Name</th>
<th>Date:</th>
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<th>Checked by:</th>
<th>Name</th>
<th>Date:</th>
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<tr>
<th>Data entry completed</th>
<th>Name</th>
<th>Date:</th>
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</table>

**Instructions:**

1. This checklist should be completed ONLY for the intervention schools (10 per district).
2. Most of the information required will be available in monitoring forms, stock sheet and records kept by the Standard 6 teacher and SOFIE Club leader. Prior to fieldwork, when booking visits to schools, request that these forms and records be available for inspection. Transfer information from these forms/records personally. Do NOT allow others to complete this checklist on your behalf.
3. To complete Section 5, you will also need to see a sample (or all ) of study guides. Arrangements to see these should also be made.
4. Additional comments and information should be obtained from the Standard 6 teacher, Club leader, school head and/or other members of the SOFIE committee or SMC.
A. ‘At-Risk’ Pupils

a. Total number of ‘at-risk’ pupils selected: _____________
b. Details of ‘at-risk’ pupils (refer to teacher’s ‘at-risk’ register for details).

<table>
<thead>
<tr>
<th>ID</th>
<th>Name of pupil</th>
<th>Sex (M/F)</th>
<th>Age</th>
<th>Orphan status(^{100})</th>
<th>Transferred in? (Y/N)</th>
<th>Repeating standard? (Y/N)</th>
<th>Enrolled late?(^{101})</th>
<th>Date registered</th>
<th>Received ‘school-in-the-bag’</th>
<th>No of clubs attended</th>
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</table>

\(^{100}\) Orphan status: S (m) = single orphan (maternal) i.e. lost mother only; S(p) = single orphan (paternal) i.e. lost father only; D = double i.e. lost both; DK = don’t know.

\(^{101}\) Enrolled 2 weeks or more after start of term
B. Class ‘Buddies’
a. Total number of buddies recruited: ____________
b. Details of class buddies:

<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Sex</th>
<th>Age</th>
<th>Standard</th>
<th>Received notebooks &amp; ballpoints? (Y=1;N=2)</th>
<th>‘At-risk’ pupils responsible for (list ID numbers)</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

C. SOFIE Club Activities
a. Number of club meetings held this term: ____________ (if none, go to 4.)
b. Venue of club meetings:

Attending clubs, study guides, follow-up of ‘at-risk’ pupils etc.
D. SOFIE Club resources:

<table>
<thead>
<tr>
<th>Contents of school-in-a-box</th>
<th>Date Received</th>
<th>Date first used</th>
<th>Currently present in ‘school-in-a-box’ (Y=1;N=2)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘Choices &amp; Decisions’ game</td>
<td></td>
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<tr>
<td>Radio</td>
<td></td>
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<tr>
<td>English study guides Part A</td>
<td></td>
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<tr>
<td>English study guides Part B</td>
<td></td>
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<tr>
<td>Maths study guides Part A</td>
<td></td>
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<td></td>
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<tr>
<td>Maths study guides Part B</td>
<td></td>
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<td></td>
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<tr>
<td>Standard 6 English text book</td>
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<tr>
<td>Standard 6 Maths text book</td>
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<tr>
<td>Pens (3)</td>
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<tr>
<td>Notebooks (3)</td>
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<tr>
<td>Supplementary readers</td>
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<tr>
<td>Football</td>
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<tr>
<td>Ruler (1)</td>
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<tr>
<td>Project Bicycle</td>
<td></td>
<td>NA</td>
<td>NA APPLICABLE</td>
<td>NA</td>
</tr>
</tbody>
</table>

* If not yet received, put NONE in first two columns.
### E. Monitoring and Follow-up

*N.B. Request access to SOFIE monitoring forms, class attendance registers & samples of study guides.*

a. Attendance records and monitoring forms:

<table>
<thead>
<tr>
<th>Form(records)</th>
<th>Available (Y=1 ; N = 2)</th>
<th>Up-to-date (Y=1; N=2, NA = not applicable)</th>
<th>Comments (if data not available or in-complete, then give reasons why)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher – class attendance register</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Teacher - SOFIE ‘at-risk’ register</td>
<td></td>
<td></td>
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<tr>
<td>Teacher - SOFIE monthly pupil progress</td>
<td></td>
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<tr>
<td>Teacher – SOFIE monthly reflection points</td>
<td></td>
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<tr>
<td>Teacher – SOFIE stock sheet</td>
<td></td>
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<tr>
<td>Club leader – SOFIE monthly attendance sheet</td>
<td></td>
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<tr>
<td>Club leader – SOFIE monthly reflection points</td>
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</tbody>
</table>

b. Did school head/deputy sign ‘at-risk’ register?  

\[\text{___________ (Y=1 ; N = 2)}\]
c. Marking of study guides:

<table>
<thead>
<tr>
<th>Study Guide</th>
<th>Frequency marked (estimate based on sample guides examined)</th>
<th>Signed by teacher? (Y=1 ; N = 2; NA)</th>
<th>Additional comments made? (Y=1 ; N = 2; NA)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never</td>
<td>Every week</td>
<td>Every weeks</td>
</tr>
<tr>
<td>English Guide Part A</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Maths Guide Part A</td>
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</tbody>
</table>

d. Does Standard 6 teacher provide additional homework/assignments to ‘at-risk’ pupils? ____________ (Y=1 ; N = 2)
e. Describe process followed if ‘at-risk’ pupils fail to attend classes/clubs. Who is responsible?

Classes:

Clubs:

f. Number of ‘at-risk’ pupils referred for guidance and counselling in term? ____________
F. SOFIE Committee

a. SOFIE Committee elected? ________(Y=1; N=2)  (If yes, continue to 1.b; if no, go to 7)

b. SOFIE Committee membership:

<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Gender</th>
<th>Position (e.g. school head, SMC chair)</th>
<th>Post on committee (e.g. secretary)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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</table>

c. Number of SOFIE meetings held (term 1)? __________

d. No. of SOFIE committee meetings attended by (i) PEA? ________ (ii) pupil representative? ________

e. Action Plan for SOFIE activities developed? ________ (Y=1; N=2)
7. **List of SOFIE Activities implemented by SOFIE Committee/SMC/PTA to support vulnerable children**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Details (if not yet implemented, write NONE)</th>
<th>Persons responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community sensitization</td>
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<tr>
<td>Monitoring and follow-up of vulnerable pupils</td>
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<td></td>
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<tr>
<td>Fund-raising &amp; resources</td>
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<tr>
<td>Other</td>
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</tbody>
</table>