

Examining Resources used by Implementers of the HIV and AIDS Prevention Programmes

Denias Muzenda

PhD University of Fort Hare , MEDCA-University of Zimbabwe, MEDAPPS-ZOU,
BED-University of Zimbabwe, CE-University of Zimbabwe

Symphorosa Rembe

School of Further and Continuing Education University Of Fort Hare, South Africa
srembe@ufh.ac.za

Doi:10.5901/mjss.2014.v5n23p1771

Abstract

Resources are very valuable as far as effective implementation of programmes is concerned. This study endeavoured to examine the resources that are used by implementers of the programmes in the universities in Zimbabwe as these play a critical role in successful implementation of HIV and AIDS programmes. A mixed method research approach was used in this study and a concurrent triangulation design was employed. The sample was made up of 3 HIV and AIDS universities coordinators, 30 lecturers from the faculties of education, 9 lecturers for the 3 focus groups, comprising three participants in each group, 24 students for the focus group discussions, 3 senior health centres participants and 3 NGOs. Face to face interviews, focus group discussions, observation, document analysis and questionnaires were employed as data collection methods. Quantitative data were analysed using software (SPSS), whereas Qualitative data was collected in form of handwritten notes and tape recorded and analysed using themes. Findings revealed that the majority of respondents who participated in this study stated financial resources to buy equipment though others mentioned Human resources and learning materials as resources used in the implementation of HIV and AIDS programmes. The study established that universities did not have trained HIV and AIDS Peer educators and thus concludes that a lot needs to be done to ensure that each and every university has adequate resources. The study also recommended that Universities should have trained HIV and AIDS Peer educators.

Keywords: Materials, resources, implementers, HIV, AIDS, Prevention programmes

1. Introduction

Capacity to support innovations includes aspects which hinder or support the implementation of new practices and ideas in the new curriculum (Johnson et al. 2000). In this study, specifically at the university level, there is consensus among researchers that capacity refers to the teaching staff's ability to implement HIV and AIDS programme in relation to their knowledge, that is, level of training on HIV and AIDS, experience and academic qualifications (Rogan & Grayson 2003; Ornstein & Hankins, 2004). Literature consulted reveals that capacity of implementers entails human resources (McGinty & Mundy, 2009), negative attitudes of students, poor implementer qualification, and shortage of material and financial resources, (Evian, 2006; Leviton, 2003). Material support is divided into two categories, the provision of physical resources such as buildings, technical equipment and books. On the other hand, non-material support is most commonly provided in the form of professional development (Rogan and Grayson, 2003).

To begin with, teaching and learning material require large sums of money for programmes to run. HIV and AIDS programmes need money for logistical purposes such as: mainstreaming HIV and AIDS in university curriculum requires buying of materials to use in lecture rooms and during and after training of students (Mohammed, 2006). The type of materials will depend on finances, and on the availability of duplicating equipment. It should be planned to produce student materials and lecturer materials (Kirby, 2000). Student materials may include sets of student activities for individual use and for use in small groups, and a booklet with essential information for individual use. Materials for lecturers should include a lecturer's guide with basic information and instructions for student activities, as well as various teaching paraphernalia (Kirby, 2000).

According to Dube (2005:320), "The health Centre assumed the leading role in coordinating institutional HIV and

AIDS activities." In other words this refers to activities such as the distribution of HIV and AIDS materials, organising some workshops that are HIV and AIDS related and free HIV and AIDS counselling and testing. The AIDS Centre coordinates and drives the institutional response while the library plays a subsidiary role of providing information resources with HIV and AIDS specific information. The library stocks HIV and AIDS related materials to be used by peer groups, lecturers and all other students in general. Literature consulted reveals that since 2001, HIV and AIDS material for students and lecturers in universities has been on a small scale basis since it lacked adequate funding (UNESCO 2006). This conclusive observation was made after a survey research was done in Zimbabwe's tertiary Institutions by UNESCO, though on ad hoc basis.

Dube (2005: 321) advises that "HIV and AIDS-specific information resources are crucial as their depth, width and appropriateness, relevance and accessibility, affordability and usability will strengthen or compromise the institutional response." He indicated material resources for example, video tapes and internet web sites and quantity of curriculum material being distributed and their management as being crucial. Chitando (2008) and Kotecha (2008) advise that mainstreaming HIV and AIDS requires human, material and financial resources. UNESCO (2006) explains that when mainstreaming HIV and AIDS, it is included across a broad range of subjects in the university curriculum. According to Setswe (2009), the purpose of mainstreaming HIV and AIDS in university curriculum is to effectively implement the prevention programme. Considering materials and resources for separate programmes such as mainstreaming of HIV and AIDS, Peer Education Awareness campaigns and training of implementers literature reveals that: A lack of resources prevented the effective and consistent monitoring and evaluation of programme components at most universities in developing nations. Researchers echoed that additional resources be made available to assist programme staff and volunteers to use evidence-based practices and theoretical approaches in their prevention activities the programmes (Mohammed, 2006; HEAIDS, 2010).

With reference to mainstreaming of HIV and AIDS programme, Talbot (2010), have researched widely at international level, on the development of learning programme materials for Higher Education students. The same author advises that universities should be able to develop training materials that meet the needs of the target groups such as distance learning programmes and on campus students. For this study, it is acknowledged that this perspective, (learning programme materials) does touch on the teaching and learning situation as it functions in universities to date. These aspects raised were used to explain the data for this study on the students' perceptions on learning programme materials (such as mainstreaming of HIV and AIDS in the curriculum) in terms of resources in their universities. The researcher took great interest in their work which incorporates learning material for face to face facilitation and Distance learning material. The current study has a university which offers Distance education hence the assessment of programmes would be informed from the work of. With reference to training of implementers programme, facilitators usually use flip charts, projectors, photocopied handouts, pens and videos as key teaching and learning materials.

Literature accessed under teaching and learning in Further and Higher Education has unveiled a lot of detail on quality and quantity of learning resources. Peer Education Awareness campaign programmes are also included since they distribute condoms, pamphlets, flyers and other information based material. But, it is usually the responsibility of Peer Educators and HIV and AIDS Coordinators to distribute these. The numbers of condoms reported to be distributed to students may vary from 3 to 26 per student per year (Kirby, 2000). According to Walklin (2002), once a programme is put in place, there is a necessity to identify the availability of learning and teaching resources (Walklin, 2002). Multi-media teaching AIDS in a well-established resource Centre is a necessity. Just as was observed by Dube (2005), books, radio broadcasts, television sets, films, projectors, slides and computers topped Walklin, (2002)'s list of suggested Aids in an institution. Walklin, (2002: 83) observed, "To make the most of resources: use the right aid, at the right time, in the right place, and in the right manner."

The researchers however felt that material in form of multi-media teaching aids would be of little use to a lecturer who lacks the know-how or time needed to set up and use them. Lecturers are advised to select appropriate learning and teaching resources. Other writers like Kim, Rhatigan, Jain and Porter (2008) have suggested that implementation gaps and access barriers frequently overwhelm existing programmes, impeding success despite the best intentions. Talbot (2010), Dube (2005: 321) and Walklin (2002)'s ideas link to the current study in that there are aspects which have been explored such as quality and quantity of learning resources, materials for training in HIV and AIDS prevention programmes, appropriateness, relevance and accessibility, affordability and usability of these materials. Also, these are important for this study in that they guided the researcher in exploring further the research findings on issues that were agreed or disagreed upon.

The findings of the different studies above on materials for training and teaching in HIV and AIDS prevention programmes, allude to the fact that resources are very valuable as far as effective implementation of programmes is concerned. It is also appropriate as a guide on whether universities have put in place textbooks in form of HIV and AIDS

modules and other related material. HIV and AIDS programme providers need to be aware of when and how long to provide their material so as to achieve their intended purposes. All this is not possible if the resources are limited in institutions. Hence, this study endeavoured also to find out the materials and other resources that are used by implementers of the programmes in the universities in Zimbabwe as this plays a critical role in successful implementation of HIV and AIDS programmes.

2. Research Methodology

2.1 Research Paradigm

The current study was guided and conducted within the framework of the Post-Positivist paradigm. Post-positivistic approach to research opens the door to multiple methods and different worldviews as well as to different forms of data collection and analysis so as to provide and justify that rigour in the process of carrying out the research (Richie & Rigano, 2001). This was relevant to this study since the researchers were interested in gathering evidence that could be used to explain the prevalence of HIV, STIs and pregnancies in the universities investigated.

2.2 Research Design

According to Babbie and Mouton (2001:74), research design is "a plan or blue print of how the researcher intends conducting the research." In this study, the concurrent triangulation design was employed. The researchers were conscious of the fact that mixed methods approach provides strengths that offset the weaknesses on use of quantitative or qualitative approach alone (Tashakorri & Teddlie, 2003). In this study, the mixed method approach ensured that biases that might be inherent in any single method should neutralise or eliminate the biases of other methods.

2.3 Population

This study targeted all the 7 public universities in Zimbabwe. University 1 has approximately 11700 students and about 735 Academic employees while University 2 has over 4 500 students and about 200 Academic employees, and University 3 having 21 000 students, and about 200 Academic employees (Kotecha 2008).

2.4 Sample and Sampling Procedures

Sampling is the act, process, or technique of selecting a suitable sample, or a representative part of a population for the purpose of determining parameters or characteristics of the whole population (Mugo, 2002). The sample consisted of 3 universities in Zimbabwe. The participants were 3 HIV and AIDS universities co-ordinators (1 from each university), 30 lecturers from the faculties of education (10 from each university), 9 lecturers for the 3 focus groups, comprising three participants in each group (3 from each university), a total of 24 students under focus group participants (8 from each university), 3 senior health centres participants (1 from each university) and 3 NGOs. The respondents were purposively selected since they operate in the area of the universities under investigation which is the faculty of education.

2.5 Data Collection Methods

Face to face interviews, focus group discussions, observation, document analysis and questionnaires were employed as data collection methods in this study.

2.6 Research Instruments

The researchers used semi-structured interviews to solicit data from the respondents as they allowed respondents to express themselves at some length and there was need to gain very useful insights into the implementation of HIV and AIDS prevention programmes in Zimbabwe universities (Sarantakos, 2005). Lecturers, HIV and AIDS Co-ordinators and NGOs were interviewed. The views, perceptions and attitudes of respondents were important to the researchers as they gained insight on issues which affected the implementation of HIV and AIDS prevention programmes.

Focus groups were also employed in this study. The researchers used formal setting focus groups. One group comprised a minimum of 4 male students while the other group comprised a minimum of 4 female students from each

university. The decision was influenced by the observation noted by most qualitative researchers like Cohen, Manion & Morrison (2007: 377) who advise that, "Deciding the number of focus groups for a single topic, one group is insufficient as the researcher will be unable to know whether the outcome is unique to the behaviour of the group."

This study adopted the self-administered group questionnaires. Questionnaires were used to collect data from 30 lecturers. The use of self-administered group questionnaires enabled data to be gathered in large amounts from many participants, simultaneously as the researchers waited while a whole group of respondents completed questionnaires (Cohen, Manion & Morrison, 2007).

Documents were also analysed. Of great interests to this study were such documents that were related to implementation of HIV and AIDS prevention programmes in all universities.

For this study, the researcher selected a scheduled (structured) observation. The observation was direct and required the presence of the observer. The observation entailed establishing evidence on the distribution of materials (The availability and state of facilities and equipment, infra-structure within the Universities) and training of lecturers and students.

3. Data Analysis

Both qualitative data and quantitative data were interpreted and analysed concurrently. Quantitative data were analysed using software (SPSS). Qualitative data was collected in form of handwritten notes and tape recorded. The main task of the researcher was to categorise the ideas, responses into various themes and sub categories by way of inductive coding.

4. Measures to Ensure Validity/Reliability and Trustworthiness

In this study, the researcher tested for validity and reliability of the instruments through pilot study, before their administration was carried out to reduce errors. Face and content validity of the data collection instruments was ascertained by a panel of experts in the faculty of education, including the supervisor of the researcher. Strategies used to check the accuracy of the findings in this study included triangulating data sources, detailed descriptions and verification of information with participants.

5. Ethical Consideration

Participants for this study were never forced to participate in the study since an informed consent form was used to all participants namely: students, lecturers, HIV and AIDS Coordinators and the NGOs. In research, the right to confidentiality and the right to anonymity put the respondents at ease of giving information which might otherwise be regarded sensitive. Universities were only identified as 1, 2 and 3 respectively. In this study, the researcher took the necessary precautions to avoid harm to informants by exposing information about individuals.

6. Results and Discussions

HIV and AIDS programme implementation requires planning in terms of financial, material and human resources to use during the campaigns, teaching and training. This section will focus on the following resources: financial resources, material resources and human resources.

7. Financial Resources

Data captured from NGOs, HIV and AIDS Coordinators and lecturer participants reveals that, like any other educational programme in Tertiary institutions, financial challenges are a reality in universities HIV and AIDS programmes HIV and AIDS Coordinators have noted that financial problems affect their day to day operations as they try to implement HIV and AIDS prevention programmes. Money is needed for various purposes.

These financial woes are confirmed by Kanyongo (2005) who noted that the country's economy performance declined since 2003. When probed to explain on how it is a challenge, the participants HIV and AIDS Coordinator, (HI/A C1) indicated:

Implementation of HIV and AIDS faces problems of high inflation and economic challenges. Funding is essential for

resources such as staff salaries, transport, provision of specialist rooms, equipment, machinery, text books and learning materials hence are a major impediment to successful implementation of HIV and AIDS.

It is a challenge indeed when considering material distribution programmes, peer educators campaign programmes and mainstreaming of HIV and AIDS programmes. These require large sums of money. However, all the (HI/A C) participants were quick to acknowledge financial assistance, though inadequate, from various sectors towards HIV and AIDS special events, workshops and seminars as an example. The majority, 24(80%) of lecturers from all universities concurred with their NGOs and (HI/A C) counterparts that financial resources were a problem. They stated that regular HIV and AIDS workshops and seminars demand allowances for the participants, their transport and subsistence, provision of stationery, refreshments and key guest speakers' allowances. The research findings to this effect tally with some of the raised concerns in literature consulted. According to (Musegedi, 2007; Coombe, 2002) the problems are centred on limited learning and teaching resources for implementing the HIV and AIDS curriculum in Higher Education Institutions in Zimbabwe. One participant from (ffgrp 1) said,

Since it is expensive to print and photocopy handouts, usually after the workshop, these are given to lecturers by the facilitators and not to us.

The cause for concern is that these hand-outs intended for the beneficiaries, in this case majority of students, would not be able to access them. This study established that, financial constraints, was the main reason why HIV and AIDS workshops and seminars in these Universities were not conducted regularly. It emerged in this study that Faculties were not adequately funded for such activities. In this case, Lecturer focus groups discussions suggested that:

Each university has to find its own ways of getting financial resources for their activities instead of depending solely on external sources.

However, in this study, the researcher noted from one focus group of lecturers that:

Considering competing demands on financial budget, universities were already "financially withered" to generate much income to enable smooth implementation of HIV and AIDS programmes.

It emerged from this study that Programmes conducted by NGOs such as UNESCO, are fully funded by the organisations themselves. However, it was established through the focus group discussions with lecturers; interviews with students and HIV and AIDS Coordinators that such fully funded long term programmes are mostly aligned to the clinic (Health Centre) and the Counselling Unit. As quoted from participant:

The bulk of financial support is peripheral to Faculty programmes since Donors focus on Care and Support of HIV and AIDS victims via Health Centre and the Counselling Unit, with little or no focus on learning and teaching classroom programmes. You can compare even the quantity of material support for these centres against the curriculum related material in the University.

These participants also raised a striking point on funding in that, for University initiated short term training workshops and seminars, the allowances are very low compared to NGO initiated programmes. From such revelation of qualitative and quantitative data, on how HIV and AIDS programmes are being implemented in universities, this study established that the financial resources used by implementers of the programmes in the universities are inadequate, for meeting various critical needs cited above.

7.1 Material resources

Material resources are the things university facilitators, lecturers; students and HIV and AIDS Coordinators use during implementation of HIV and AIDS programmes (Rogan and Grayson, 2003). It should be stressed that material resources in universities are in two categories; short and long -term material resources. These are used by universities in Education and Training workshops and seminars, Integration of HIV and AIDS in the curriculum and Awareness Campaigns. Short term materials may include stationery, condom distribution, flyers, hand-outs, and workshop refreshments (Dube, 2005). Long term material may include infrastructure (physical buildings), furniture, Audio-visual media, Internet, transport, handouts and textbooks (Dube, 2005). Effort was also made to find out from the (HI/A C) and NGOs the Material resources used in the following programmes as an example, Peer awareness campaign, mainstreaming or integrating

HIV and AIDS into the curriculum.

7.2 Material distribution

Qualitative and quantitative data gave indications that material resources form the foundation of the HIV and AIDS prevention programme. Peer awareness campaign groups, HIV and AIDS Coordinators, NGOs and Lecturers are examples of people who may take the initiative to distribute HIV and AIDS Prevention programmes. In the words of one female HIV and AIDS participant, it was noted that:

Material resources are a necessity because they facilitate training and sustenance. As for lecturers, these are essential during curriculum delivery mainstreaming and integration to effect behaviour change in students. Students use a variety of material mostly for raising awareness during peer campaigns and when having tuition.

Qualitative data from (mfrgp 3) participant reveals that material such as flyers, charts, pamphlets were used since these have a comparative advantage of being visible and readable on campus premises but it is also worth noting to point out that material distribution may include library sources in form of Library books, software and newsletters. Some of the findings of the study on material used have been captured from student focus groups and presented quantitatively in form of Table 1 below. They are presented according to university category and they embrace software material and other essential infrastructure.

Table 1: Materials available in the three universities

University	Material Resources used
1	Computers, posters, pamphlets, charts, condoms
2	Computers, Clinic, flyers, modules, posters, pamphlets, charts, condoms
3	Posters, pamphlets, charts, condoms

The responses from table 1 above indicate that, at least, to a lesser extent, there are resources available to lecturers and students at each university. Such revelations are consistent to what the focus groups interviews also unveiled. From NGOs and HI/ACs and lecturers' responses, Resources ranging from financial, material to human resources were inadequate. Furthermore, through triangulation, the study has established the materials and other resources used by implementers of the programmes in the universities from students NGOs and HI/ACs. As for students, these are not different from the set listed above except for the additional information from NGOs and HI/ACs.

8. Workshops and Training

8.1 Results presented by the lecturers and NGOs

The responses from table 1 above indicate that, at least, to a lesser extent, there are resources available to lecturers and students at each university. A pattern of common resources used emerges under posters, pamphlets, condoms and the use of charts. The study established from lecturers' data that these are the major resources used by the universities. Others mentioned the use of clinic staff and invitation of external motivational speakers on behaviour change. University 2 mentioned teaching materials in form of modules since it offers an examinable HIV and AIDS programme. Such revelations are consistent to what the focus groups interviews also unveiled. Resources ranging from financial, material to human resources were inadequate. Furthermore, through triangulation, the study has established the materials and other resources used by implementers of the programmes in the universities from students NGOs and HI/ACs. As for students, these are not different from the set listed above except for the additional information from NGOs and HI/ACs.

All HIV and AIDS Coordinators and NGOs expressed concern over the inadequacy of learning and teaching support material. One of the main factors hindering programmes implementation is lack of resources. In this study, the data collected showed that the HIV and AIDS information available in most institutions was printed. It included the following: Pamphlets and posters. These sources are available in the health Centres and in AIDS Coordinating offices as well as institutional library. These short term resources are easy to disseminate and are easy to read. Journals; books mostly from the library; display media especially exhibiting HIV and AIDS information in form of posters, Bulletin Boards for the sake of publicity. However, it was observed that these are displayed mainly in the Health Centre and AIDS Centre.

Literature has noted that, besides print media in established universities programmes, there is also institutional television and radio stations that broadcast student oriented programmes and information about HIV and AIDS. Electronic media comprises of internet, CD-ROMs and databases (Wood, 2011). However, research respondents revealed that they do not usually have access to some of these resources due to cost implications.

Table 2 that follows shows information on lecturers' responses on adequacy of institutional resources for the three universities

Table 2: Lecturers' responses on adequacy of institutional resources

University	Resources are adequate	Percentage of Respondents	Resources are not adequate	Percentage of Respondents
1	3	30%	7	70%
2	4	40%	6	60%
3	3	30%	7	70%
Totals	10	33%	20	67%

HIV and AIDS specific information resources are crucial as their depth, width, appropriateness, relevance, accessibility, affordability and usability will strengthen or compromise the institutional response (page 321).

Study findings showed that the HIV and AIDS information available in most institutions was printed. It included pamphlets and posters. These sources are available in the health centres and in AIDS Coordinating offices as well as institutional library. According to lecturers, NGOs and HI/ACs, these short term resources are easy to disseminate and are easy to read. However, the data observed that these are displayed mainly in the Health Centre and AIDS Centre. However, research participants revealed that they do not usually have access to some of the resources like videos due to cost implications. From such revelation of qualitative and quantitative data, on how HIV and AIDS programmes are being implemented in universities, this study established that material resources used by implementers of the programmes in the universities are inadequate, for meeting various critical needs such as facilitate training and sustenance of support services, curriculum delivery, for raising awareness during peer campaigns and when having tuition. Resources ranging from financial, material to human resources were inadequate. Furthermore, through triangulation, the study has established the materials and other resources used by implementers of the programmes in the universities. These are posters, pamphlets, condoms and the use of charts mainly.

8.2 Human Resources

Human resources in HIV and AIDS programme implementation basically refer to the HIV and AIDS facilitators including lecturers, HIV and AIDS Coordinators, NGOs and other external motivational speakers. Their qualifications, expertise, experience and capabilities to a larger extent determine how well a programme will be delivered. However, besides the training and supplying of qualified and experienced lecturers in universities by MOHTE, support is also needed (Coombe, 2002; World Bank, 2008). From another source, the training manual serves as an important guide intended for use, either as part of training workshop to develop knowledge and skills (MOHCW, 2009). The study sought to establish from the participants whether the universities have trained HIV and AIDS Peer educators. The majority of the participants from both qualitative and quantitative data were in agreement that universities did not have trained HIV and AIDS Peer educators. Professional and Institutional Support need a firm human resource base. Qualitative and quantitative data results reveal that Human resource in the universities investigated is also a major problem. A Lecturer focus group participant cited that:

Staff turnover is a reality as specialist lecturers leave the system for better paid opportunities in the private sector. They look for greener pastures within and outside the country.

Shortage of human resource is realised as long established and skilled staff leave the system for better paid opportunities in the private sector. The researcher's concern was that, new and inexperienced lecturers are bound to be employed to implement HIV and AIDS programmes. Data from students and NGO respondents revealed that there was a shortage of professionally qualified lecturers. During interviews with the focus group members, a significant number of the students unanimously agreed that low salaries resulting from unfavourable economic situation as well as poor conditions of service contributed to shortage of qualified and experienced university professionals. However, from another

perspective of NGOs and HIV and AIDS Coordinators, Data revealed that shortages were due to lack of training Institutions specifically on HIV and AIDS un-attached to medical college.

On subject area specialisation, most lecturers in universities indicated that they were teaching HIV and AIDS components in curriculum subjects which were different from their specialisation as revealed by lecturers in interviews. It can be observed that in some universities, although lecturers had specialised in other subjects, they were teaching HIV and AIDS components which was not their specialisation. The reason for the doubt is that these could lack both content and pedagogic skills. One lecturer participant said, "We are overloaded with curriculum matters; as a result, HIV and AIDS programmes are not well attended to." According to the researcher, this seems to create the impression that HIV and AIDS is isolated from the curriculum by not being taken seriously. In a follow-up interview the lecturers explained why HIV and AIDS education in particular could not be taken seriously even by their colleagues. The reason is that, in some institutions, it is not an externally examined subject and it depends on how it is taught. Lecturers preferred paying attention to other curriculum content and day to day matters. The lecturers' motivation for this is that learners are exposed to various sources that inform them about HIV issues in and outside university community. Information on this section was buttressed by the responses from students and NGOs and HI/ACs.

Table 3 below shows some of the factors that affect the operations of human resources in the implementation of HIV and AIDS programmes in universities under study

Table 3: Factors affecting Human resource operations in HIV and AIDS implementation

Factor	Number of Lecturers	Percentage of lecturers
Lack of experience in teaching HIV and AIDS	15	50
No training received to teach HIV and AIDS	15	50
No Certificate or Diploma to teach HIV and AIDS	21	70

The shortcomings of the lecturers with regard to experience, qualification and training have been summarised in table 3 since they matter most on things usually to do with new curriculum orientations. All universities have at least HIV and AIDS Coordinators and NGO's working in their premises hence have access to knowledgeable human factor resources. During interview sessions, these two sources have stated that they usually assist Universities with in-service programmes. Training is done during holidays at cluster level making it easy for lecturers to commute to and from the training centres. Lecturers in some of the focus group discussions conducted for this study mentioned that these NGOs have their own ways of organising HIV and AIDS trainings. For their seminars and workshops, they use the cascade model whereby they develop workshop training material. The team that would have trained will in turn train other departmental colleagues and student leaders. NGOs stated that they use their own staff for conducting the training sessions and sometimes they engage the services of an external HIV and AIDS expert presenter. The problem is that lecturers prefer facilitators who are experts in their area of trainings be it content or methods. The level of expertise of facilitators should be very conversant with the subject.

Through the focus group discussions, lecturers preferred: Subject expert related facilitator to In-service us for a long period of time, resulting in awards of recognised certificates.

Generally, on the cascade model, lecturers are against facilitators who display some knowledge gaps in some topics because of inadequate time allocated for their training. The focus group discussions with the lecturers as well as the quantitative data from the questionnaires established that not all universities use the cascade mode of training for certificates instead; some take the longer term method of going through a normal university degree programme to get a qualification.

9. Conclusions

It is surprising to learn from the research findings that a reasonable number of students (50%) were uncertain on what resources and other material universities had for implementing HIV and AIDS intervention programmes. The study learnt that the critical factor cited by the majority of respondents who participated in this study were financial resources to buy equipment though others mentioned Human resources and learning materials as resources used in the implementation of HIV and AIDS programmes. Furthermore, the study also confirmed that there was inadequacy of institutional resources for implementing HIV interventions at these universities though the situation is fairly better at university B. In terms of teaching and learning resources, the study has established that universities do not have trained HIV and AIDS Peer educators. It is a cause for concern since human resources fall under critical resources which contribute to the

implementation of HIV and AIDS programmes for behaviour change. On Infra-structure and equipment, it emerged that there is a shortage of specialist rooms for HIV and AIDS e.g. for individual counselling.

10. Recommendations

Still a lot needs to be done to ensure that each and every university has adequate resources. Currently there is limited learning and teaching resources for implementing the HIV and AIDS curriculum in Higher Education Institutions in Zimbabwe.

Universities should have trained HIV and AIDS Peer educators who will orient fellow colleagues on prevention, intervention and postvention strategies.

More support should come from outside agencies, the Ministry of Higher Education, UNICEF, UNAIDS and from NGOs sector.

The choice of popular technological media which appeals to the youth has to be introduced as a means of changing students' negative attitude towards HIV and AIDS programmes. However, this should be done with extreme care and consideration since some programmes expose students to risky behaviour.

There is need to establish specialist rooms for storage of HIV and AIDS material. Such an environment promotes effective application of teaching and learning practices which is one of the focuses envisaged by HIV and AIDS programme designers.

References

- Babbie, E and Mouton, J. (2001). *The practice of social research*: Cape Town, Oxford University, Press.
- Chitando, E. (2008). *Mainstreaming HIV and AIDS in theological education: Experiences and explorations*. Switzerland: WCC Publications.
- Cohen, L., Manion, L., and Morrison, K., (2007). *Research methods in education*. Padstow: Cornwal.
- Coombe, C. (2002). *Keeping the education system healthy: Managing the impact of HIV and AIDS on education in South Africa*, Department of Education.
- Dube, L. (2005). *The Management and Diffusion of HIV and AIDS Information in Institutions of Higher Learning in South Africa* (Doctoral dissertation).
- Evian, C. (2006). *Primary AIDS Care*, 2nd Ed. Jamaica: Houghton.
- HEAIDS (2010). *HIV and AIDS Prevention. Good practice: strategies for public higher education institutions* (HEIs) in South Africa. Pretoria: Higher Education South Africa.
- Johnson, S. et al. (2000). The Teacher Development and Change in South Africa. A Critique of Northern/Western Practice. *South African Journal of Education*. 20 (2). 36 – 49.
- Kanyongo, G. X. (2005). "Zimbabwe Public Education System Reforms: Success and Challenges". *International Education Journal*, 6(1): 65-74.
- Kim, Y., Rhatigan, J., Jain, S. H and Porter, M. E. (2008). "Delivering Global Health". *Student British Medical Journal*.
- Kirby, D. (2000). School-based interventions to prevent unprotected sex and HIV among adolescents. In *Handbook of HIV prevention* (pp. 83-101). Springer US.
- Kotecha, P. (2008). *HIV and AIDS: An action guide for higher education institutions in the SADC region*, Johannesburg: SARUA Publishers.
- Leviton, L. (2003) Evaluation Use: Advances, Challenges and Applications. *American Journal of Evaluation*, December 1; 24(4) 525-535. Thousand Oaks: Sage Publications.
- McGinty, S and Mundy, K. (2009). *Teaching and Teacher Education-HIV/AIDS Educators: The challenges and issues for Namibian Bachelor of education students*, 25(2009) 141-148 July, Toronto, Elsevier, Ltd.
- Mohammed, A.M. (2006). Creating opportunities for Continuing Professional Development of teachers: The National Teachers' Institute experience. *Lead Paper presented at the 1st National Conference of the Faculty of Education, University of Abuja held from 17th – 21st October 2006*: Nigeria.
- Mugo, F.W. (2002). Sampling in Research *Educational Tutorial Paper*, 9 June, 2002.
- Musegedi, F. (2007). Findings from the Situation Analysis Report on the Higher and Tertiary Education Sector's Response to HIV and AIDS. Unpublished.
- Ornstein, C.A. and Hunkins, P.F. (2004). *Curriculum: Foundations, principles and issues*. (4th ed) Boston: Pearson Education Inc.
- Richie, S.M. and Rigano, D.C. (2001). *Evaluation Positivism against Interpretivism: Post Positivist Approaches to Research*. Retrieved from www.ukessays.com/essays/sociology/Qualitative_Social_Research_.414.
- Rogan, J. M. and Grayson, D. J. (2003). Towards a Theory of Curriculum Implementation with Particular Reference to Science Education in Developing Countries. *International Journal of Curriculum Studies (In Press)*. Retrieved from URL: <http://dx.doi.org/10.1080/0950069010145819>.
- Sarantakos, S. (2005). *Social research*, Basingstoke, Palgrave: Macmillan.

- Setswe, K.G. (2009). *HIV Prevention: Where is the evidence of intervention?* www.slideshare.net/Nicopaul/01-sets.
- Talbot, M. (2010). Language and gender. Policy. *Journal of Sociolinguistics*, 2010.
- Tashakkori, A. and Teddlie, C. (2003). *Handbook of mixed methods in social and behavioural research*. London: Cassell.
- UNESCO. (2006). *Widening the field of inquiry; A cross country study of Higher Education Institutions' responses to HIV and AIDS*, UNESCO.
- Walklin, L. (2002). *Teaching and learning in further and adult education*. Nelson :Thornes.
- Wood, (2011). *A Guide to HIV and AIDS Mainstreaming*. Retrieved from www.ilo.org/./wcms.
- The World Bank Economic Review, (2008) on HIV pandemic, medical brain drain, and economic development in Sub-Saharan Africa. Washington DC.