

Education, The Social Vaccine for Youth HIV Prevention: Are We Doing Enough? Systematic Analysis of the Education Situation in Eswatini

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Abstract

Background: Eswatini has more than 350 000 of young people between the ages 10-24 years. Education remains a fundamental intervention in ensuring an economic and social developed society with decent work. Eswatini provides free primary education, but faces issues of grade repeating and drop-outs throughout primary and secondary, and overall low enrolment and attendance at higher levels. The education and training sector policy assures the provision of relevant educational and training programmes, and commits the country to inclusive, life-long learning and improvements in access, quality, equity, relevance, efficiency, and delivery of education. Beginning in 2008, the MOET introduced the 'Schools as Centres of Care a Support' programme, or Inqaba. In the context of widespread poverty, the highest prevalence of HIV/AIDS in Eswatini, and endemic issues of violence against children, the Inqaba programme strives to promote school environments that are child-friendly, safe, and conducive for learning.

Methods: The systematic analysis of the education situation in Eswatini was prepared in stages: desk review and analysis, consultations/interview meetings with key stakeholders, data analysis and compilation of the report.

Results: Eswatini has an enabling policy environment, combined with free primary education indicating momentous effort to provide quality, appropriate, and affordable education for all. Over 90% of primary-aged children are enrolled in school. The country has not seen the same success at secondary and tertiary levels, only 27% of secondary –school aged children are actually enrolled in school. Young women overwhelmingly (38.3%) report pregnancy as their reason for dropping out. This could explain the high HIV prevalence among young females aged 15-19 years standing at 10.2%, compared to 1.9% for males the same age. In the age group 20-24 years, HIV prevalence amongst females is 38.2%, compared to 12.3% for males in the same age bracket. HIV incidence is also significantly higher amongst young Emaswati females (15-19 years) compared to the males same age group standing at: 3.84 for females compared to 0.84 for males. The protective years of education finish very early among young people, thus making them more vulnerable.

Conclusion: Expansion of the Free Primary Education Act to include the 3 years of junior secondary, thereby becoming a Free Basic Education Act entitling all children to at least 12 years of schooling free of charge. Extending the protective effects of education.

Keywords: HIV; AIDS; Education; Sexual violence

Introduction

Education is the foundation and main pillar of economic and social development [1]. Relevant, affordable, and quality education prepares youth to participate fully in the civic and economic spheres of the world, and can serve as a buffer against living in poverty. Considering that the most educated citizens of the globe are less likely to be poor. Hardly any of the world's people living in poverty have completed secondary education, and the likelihood that someone below the poverty line is illiterate or poorly educated is much higher than for a person who is not [2]. The statistical correlations between education and economic standing are significant.

Eswatini provides free primary education, but faces issues of grade repeating and drop-outs throughout primary and secondary, and overall low enrolment and attendance at higher levels. It is clear that pregnancy is a strong contributor to drop-outs for girls, and there is anecdotal evidence to suggest that corporal punishment and sexual violence may be contributing factors as well [3]. The policy environment in the country appears to be conducive and inclusive educational system. The education sector in Eswatini is governed by two primary policy documents: The Education and Training Sector Policy of 2018 and the

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Free Primary Education Act of 2010. Policies outside of the education sector that guide or inform education and training policy include the Poverty Reduction Strategy Action Plan (PRSAP), the National Youth Policy (NYP), the Children's Protection and Welfare Act (CPWA), and the National Development Strategy (NDS).

The education and training sector policy assures the provision of relevant educational and training programmes, and commits the country to inclusive, life-long learning and improvements in access, quality, equity, relevance, efficiency, and delivery of education. It is driven by the legal framework of the education Act and the national development goals presented in the Poverty Reduction Strategy Action Plan (PRSAP). The policy clearly outlines the right of every Liswati citizen to education and training appropriate to their age and needs, including the provision of free and compulsory basic education; the right to protection from all forms of stigma and discrimination; and to education and training of appropriate quality and relevant to the socio-economic and cultural needs of Eswatini and its citizens. Further, the policy states that 'no Liswati citizen shall be excluded from ageappropriate formal and non-formal quality education because of its cost'.

The policy reflects a series of commitments, not least to inclusive, life-long learning, also to regional protocols on education and training espoused by the Southern Africa Development Community (SADC) and the National Qualifications Frameworks (NQFs). It is also aligned to international contexts and reflect Eswatini's commitment to the many agreements and conventions that shape and direct international education development, including a commitment to education for All (EFA), the Eastern and Southern Africa commitment to Comprehensive Sexuality Education (CSE) and the Post-2015 Sustainable Development Goals (SDGs) [1]. This assessment was aimed at documenting the extent of the protective effects of education in regard of the youth challenges in Eswatini.

Methodology

The education system analysis in Eswatini was prepared in stages. Desk Review and Analysis involved collecting, analysing, and synthesizing background documents. Specific attention was focused on key policies affecting the various thematic areas and the programmatic interventions in place to support progress therein. Consultations/ interview meetings with key stakeholders were undertaken in order to fully understand key policy framework issues and policy and programmatic gaps. A standard interview guide, was used during the interviews. The guide open-ended questions, which allowed respondents to give their own ideas of education system in Eswatini.

Data management and analysis

Data analysis and compilation of the report was accomplished by triangulating the information collected during the desk review, FGDs,

and stakeholder consultations. In addition, demographic and statistical analyses were conducted, mainly using secondary data sources such as the population census of Swaziland, the Demographic and Health Survey (DHS) of 2007-2008, the interim DHS of 2012, the Multiple Indicator Cluster Survey (MICS) 2010 and preliminary findings from MICS 2014, and Education census of 2013 including various sector-specific regular surveillance and evaluation publications, such as the Annual Education Census reports and various Ministry of Education and Training annual programme reports.

Summary of Findings

Education policy environment

Beginning in 2008, the Ministry of Education and Training (MOET) introduced the 'Schools as Centres of Care a Support' programme, or *Inqaba*. In the context of widespread poverty, the highest prevalence of HIV/AIDS in Eswatini, and endemic issues of violence against children, the *Inqaba* programme strives to promote school environments that are child-friendly, safe, and conducive for learning. It is composed of 6 pillars as shown in Table 1.

The Ministry of Education and Training (MOET) is currently implementing Life Skills Education curriculum under the HIV, Gender, and Life Skills pillar of *Inqaba* in all secondary schools. The Life Skills Education curriculum covers issues of empowerment, sexual and reproductive health, communication, HIV/AIDS, and gender, as well as career planning. A strong policy environment, combined with free primary education and the mainstreaming of the *Inqaba* programme should indicate significant effort to provide quality, appropriate, and affordable education for all, regardless of disability and without discrimination. Promising efforts are being made to enhance the educational environment and provide a holistic package of development support to learners, including addressing issues of safety and protection, psychosocial support, and food security.

Though a number of policies and programmes exist to improve the access and equity of Eswatini's education, the extent to which those policies have been successfully implemented is far from complete. Many of Swaziland's youth appear unable to access their right to an education, despite the strides taken to advance the situation.

School enrolment and educational attainment

The advent of free primary education in Swaziland augured well for access to and enrolment in primary education. Over 90% of primaryaged children are enrolled in school [4]. The country has not seen the same success at secondary and tertiary levels. By some estimates, only 27% of secondary –school aged children are actually enrolled in school, and with the University of Eswatini (UNESWA) facing fiscal challenges and reducing the number of annual entrants, the proportion of tertiaryeligible youth in Swaziland who are receiving that level of education will continue to decline.

School and Community Partnerships	Strengthening relationships between schools and communities to promote engagement in, and ownership of, children's education
Safety and Protection	Increasing the awareness and involvement of teachers, parents, and guardians in child protection issues at schools and in communities
Psychosocial Support	Identifying children at risk of abuse and ensuring that they receive guidance and counselling, and medical attention where necessary
Food Security	Expanding school feeding to ensure every child has at least one hot meal per day
Water, Hygiene and Sanitation	Providing basic water and sanitation, and promoting good hygiene among children in the school, home, and community
Gender, HIV, and Life-Skills Education	Raising knowledge and awareness of gender and HIV, and developing critical life skills

Source: Education Sector Strategic Plan, 2013

Table 1: The six pillars of schools as centres of care and support.

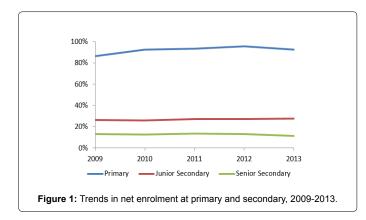
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Primary school in Eswatini begins at age 7 in grade one, and a normal progression would last for 7 years and end with the receipt of a Primary Certificate. Beginning in 2010, primary education in Eswatini has been provided free of charge under the Free Primary Education (FPE) programme. There are two levels of secondary education: junior secondary, a three year programme (Form 1 to Form 3), and senior secondary, which lasts for two (Form 4 and Form 5). Eswatini is on the way to ensuring that all children attend and complete primary school, through the FPE program, with a net enrolment rate at primary level steadily increasing and at 92.3% nationally in 2013. However, the net enrolment rate (NER) for secondary-school aged youth is only 27% [4], which indicates that many young people are not able to take advantage of their right to education. Between the ages of 15-24, youth should be enrolled in secondary and then tertiary, if on-track educationally. However, country-level educational data shows a different picture.

Essentially, just over 90% of children of primary-school age are enrolled in primary school, but the proportion of junior secondaryschool aged children enrolled has hovered below 30% since 2009. At senior secondary school, only around 12% of those in the appropriate age for senior secondary are enrolled. This strongly suggests that issues of grade repetition and drop-out begin during primary school and these two factors only become more problematic as a youth progress through school (Figure 1).

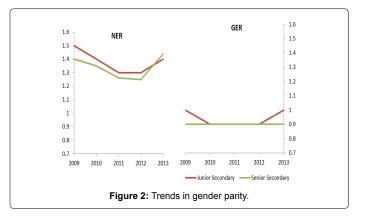
Enrolment rates can provide an understanding of the accessibility of education as young people grow older, but it is also important to examine the relative accessibility of education to each gender. By looking at the Gender Parity Index (GPI) for both gross and net enrolment rates, we can further understand girls' and boys' access to education. GPI measures the relative access of girls and boys by comparing enrolment trends. Net enrolment gender parity indicates the ratio of girls to boys who are receiving education appropriate to their age (Figure 2). Gross enrolment gender parity shows, overall and regardless of age-appropriateness, the ratio of girls to boys enrolled in school. Figure 2 graphical trend in gender parity.

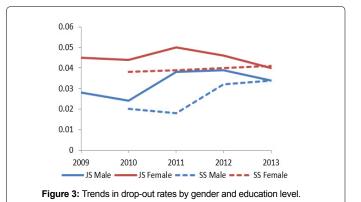
Comparing GPI for both net and gross enrolment shows that while more girls than boys are enrolled in a grade level appropriate to their age, with enrolment ratios at secondary level far above 1 (indicating perfect parity), the comparison also shows that, overall, more young men than young women are enrolled in school (Figure 3). Of note, however, is that GER is very close to 1 for gross enrolment, indicating that equity of access to education has nearly been achieved, at least when examined by gender. One explanatory variable for the slight decrease in gender parity observed between lower and upper secondary could be the dropout rates. Overall, drop-out rates are higher among young women than

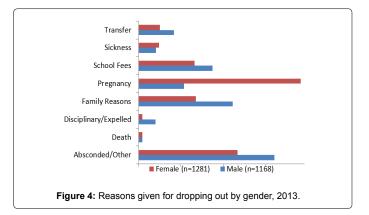


young men, which could be the cause of lower gender parity at higher levels of education. Figure 3 shows trends in drop-out rates by gender and year, from 2009 to 2013.

Interestingly, drop-out rates are higher at the junior secondary than senior secondary level for both male and female students, and the trend is showing drop-out rates increasing at lower secondary, while there has been an overall decrease at upper secondary. This suggests that stronger focus on retention could be placed on the lower secondary levels. In order to understand how to mitigate drop-outs, a closer look must be taken at the reasons that students are leaving school. As presented in Figure 4, young women overwhelmingly report pregnancy as their reason for dropping out, followed by 'absconded or other' which is a category that gives no real indication of cause. For young men, this difficult to interpret category is the biggest reason for dropping out, followed by family reasons.







"You find that the child grows up and get a boyfriend without having proper information and then they fall pregnant." Said a Focus Group Participant. There is anecdotal evidence to suggest that corporal punishment and sexual violence are also pushing children out of school [3]. When asked during focus group discussions surrounding the development of the post-2015 Development Agenda, most girls stated they had heard of incidences of the rape of young girls. They also cited that there is abuse by male teachers who have sexual relations with girls, citing in some cases the need for money on the part of the student, or the effect of coercion on the part of the teacher. The group was also very concerned that corporal punishment was being meted out at school [5]. Drop-out rates are influenced by the same contextual factors that affect so many other areas of the lives of Eswatini's young people: poverty, affecting the ability to pay fees or the costs of uniforms and transportation; early pregnancy, which in many instances signals the end of a young woman's education; and health and family issues. There are additional structural challenges within the education system, such as physical infrastructure, which may also affect enrolment and attendance.

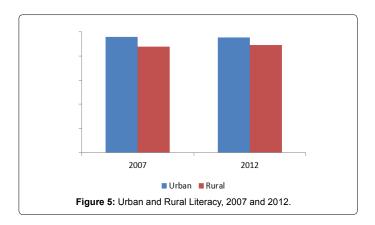
Literacy

As presented in Figure 5, Eswatini has quite a high literacy rate, at 91.03% [6] for the overall population and at 92.1% and 95.3% for young men and women between 15-24 years, respectively [7]. Compared with many other countries in the region, these literacy rates are quite high. However, there is some variation between men (92.5%) and women (89.7%), and again, as with many other indicators, there is an urban/rural divide [6]. Youth-specific data on literacy rates among the urban and rural population are not kept. However, given that the majority of young people reside in rural areas, it is reasonable to conclude that there is also a lower literacy rate among rural youth. Overall, youth literacy stands at 95.3% of women 15-24 and 92.1% of men, making youth literacy among young women roughly equivalent to the general population, and slightly higher than the general population for young men [8].

Tertiary and non-formal education

Tertiary education takes two forms: higher education and postsecondary education. There are a number of public institute of higher education in the country, the University of Eswatini, which provides for a 3-year diploma, a 4-year bachelor's degree, or a 5-year bachelor's degree in law. Post-secondary education is primarily vocational and technical, and enrolment periods vary by training provider from a few months to several years [9].

As indicated by enrolment rates, attendance rates, and drop-out



rates, a significant number of the eligible school-going aged population is not included in the educational system. There are two primary providers in the non-formal sector that provide adult basic education and training (ABET) programmes. Sebenta National Institute provides a general education programme, basic and post basic English and numeracy, and non-formal upper primary education (NUPE). Sebenta also implements vocational and skills training. The Government of Eswatini also provides some training through Rural Education Centres (RECs), which provide technical and vocational training and short entry-level skills programmes for adults and youth [10].

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The availability of post-secondary and higher education is limited geographically to two areas, Manzini and Mbabane, with a few exceptions. Further, TVET instructors often lack adequate qualifications, have limited or outdated industry experience, and do not need to adhere to any national occupational standards. The geographical limitations on educational ability and poorly regulated environment may severely hinder the quality of TVET available in the country [11].

Special needs

Education sector data primarily uses the discretion of schoollevel reporting personnel to delineate a student with special needs. The classification of special needs within schools is not medically validated and is based on the perception and interpretation of school staff [4]. Categories of special need include hearing impairment, visual impairment, physical disability, learning disability, and 'other impairment.' Reporting on special needs is only newly incorporated into the education census and is highly variable.

The majority of students described as having special education needs are at primary school, and the proportion falls throughout progression in school. The vast majority of special needs are categorized as visual impairment, followed by hearing impaired and learning disability. Though overall, disability among children and youth in Swaziland is characterized by mental disability or physical disability, the vast majority of identified cases in school are visual impairment, which suggests that young people living with other types of disability are not as able to access education. Swaziland's Education and Training Sector policy provides assures the provision of relevant educational and training programs and commits the country to inclusive, life-long learning and improvements in access, quality, equity, relevance, efficiency, and delivery of education [1]. Additionally, the child protection and welfare act requires the provision of education to all persons under the age of 18 regardless of disability [12]. There are 5 educational institutions in Swaziland that provide for children with special needs, though only one is considered 'truly inclusive [3].

Conclusions and Recommendations

Though Swaziland has made some significant accomplishments in primary education, that success has not translated to higher levels. While primary education is required and free of charge, free and compulsory education does not extend through basic education, and a large portion of Swaziland's young people are not progressing through the educational system and fall back due to grade repetition. Enrolment and attendance continues to decline in the higher grades, and the drop-out rate is worrisome, affecting more young women than young men, with pregnancy being the primary reason most young women leave school.

In addition to low participation in secondary education, tertiary education is widely inaccessible and TVET instruction is largely unregulated, threatening the quality of training youth receive.

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Youth with disabilities or special needs are especially vulnerable at all levels, as a lack of reliable data makes them largely invisible, and disabilities outside of visual impairment are not well catered for. Without an accurate, well-informed, and medically validated picture of how many students have special needs, and what type of needs they have, the Ministry of Education will be unable to form an appropriate strategy.

Key recommendations are highlighted below:

- The Free Primary Education Act should be expanded to include the 3 years of junior secondary, thereby becoming a Free Basic Education Act entitling all children to at least 10 years of schooling free of charge.
- Anecdotal evidence regarding physical punishment and sexual violence as drivers of school drop-out rates should be closely examined, the extent of the issue identified, and strict measures put in place. This can and should include the ability of the Ministry of Education to revoke the teaching certificate of an individual who is found to be guilty of perpetrating physical punishment outside of the policy or any form of sexual violence.
- To better address students with special needs, reporting should be standardized and required, categories of special need formalized and validated. Intensive training should take place to assist school staff to properly identify and support students with special needs, and MoET should develop a plan to address needs outside of visual impairment.
- Programmes to prevent teenage pregnancy should be strengthened and more widely implemented, and interventions to allow young mothers to remain in school should be implemented or accelerated, as motherhood should not be a barrier to achievement.
- The tertiary curriculum should be better aligned to the needs of the market and provide education and training that will equip the youth with the skills they need to find or create employment. More and more relevant training programmes should be made accessible.

- Regulate the vocational and training environment at tertiary level, ensuring that minimum standards are met, so that the quality of training youth receive is commensurate with the needs and expectations of employers.
- Expand and implement ICT and entrepreneurial education at all levels, focusing on the provision of computers and internet in all schools in the country. Youth will not be competitive in the labour market without these key foundational skills.

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