# Literacy for Sustainable Development and the Fight Against (HIV/AIDS) in Developing Countries - 2005 and Beyond.

Mercy Tsiwo-Chigubu Assistant Professor Georgia State University

### **ABSTRACT**

"I believe that the school must represent present life – life as real and vital to the child as that which he carries on in the home, in the neighborhood, and on the playground". - John Dewey, American educator and leader in the Progressive movement, as cited in The School Journal (1897, p.77)

Literacy for sustainable development and as a way to eradicate disease is a tool that has an interesting role in our schools, communities, families, and as individuals. This is a phenomenal concept because in every field, powerful ideas are communicated to others through a literacy action (Allan & Miller, 2000). Let us pause for a minute and listen to the words of one of our ancient African philosophers from Egypt who states: "Until you know about death, how can you know about life?" (Confucius in Mallon, 2003).

These inspirational truths led me to carry out a phenomenological research in Zimbabwe, on HIV/AIDS, a disease that has left the continent saturated with the poorest, yet motivated orphans on this planet. Research suggests that children possess a natural curiosity and desire to learn that is immensely coupled with their wanting to be accepted by others (Farris, 1992). Studies also show that children who are ostracized or stigmatized by society because their parents died of HIV/AIDS, will experience extreme low self-esteem due to vestiges of parents' stigma, guilt disorder syndrome, subservience, and in some cases school performance drastically drops (Tsiwo-Chigubu, 2000).

Using the snowball sampling technique, I investigated the self-esteem of orphans whose parents had died of HIV/AIDS in Zimbabwe in 1998. This was explored by examining the role of women as kinship caregivers of orphans who were in or out of school, and manifested by differentials in the kinship caregivers' economic well-being, social support networks, and child rearing practices. This process involves the researcher

exploring the phenomenon (case study) and examining human experiences through the detailed descriptions of the people being studied (Habermas, 1979, 1980).

The findings of my research were an eye-opener in terms of literacy as a vehicle to disease eradication and sustainable development. From all the 150 kinship caregivers interviewed, 99% doubted whether they knew much about HIV/AIDS (Tsiwo-Chigubu, 2000). This disturbing finding ignited my curiosity as to why they responded that way especially in Zimbabwe where the HIV/AIDS awareness campaign is extensively carried out over radios, televisions, billboards, pamphlets, and others. I interviewed them on whether they believed what they heard or read about the sources and ways of preventing HIV/AIDS. Of those interviewed, 99% did not believe what they heard or read regarding the source of HIV/AIDS. Further, 99% of the respondents argued that from time immemorial, their ancestors and great grandparents shared needles when piercing each others' ears, shared razor blades when having tattoos that dated far back as 40,000 years ago, and that from even the days of Abraham in the Bible, polygamy was an accepted tradition by some African families, and nobody ever caught HIV/AIDS. Most of the respondents had numerous concerns and critical questions for example: "Why are die of HIV/AIDS now and not 40 or 100 years ago?" They suspected foul play. Based on the findings, I came up with four categories of respondents. Of all the respondents interviewed, 50% believed HIV/AIDS was created in the USA laboratories and shipped to Africa as donated "foreign AID" which was contaminated with the HIV/AIDS deadly virus in order to wipe out the black race. This group is very angry. Once I was nearly stoned after one male respondent labeled me as a "US spy coming to assess the situation".

Of those interviewed, 15% believed HIV/AIDS is contracted by sleeping with a female prostitute, and HIV/AIDS is a punishment from God, "....you reap what you sow". This group is very strict about discussing AIDS, and ostracizes orphans. Of all respondents interviewed, 30% believed AIDS is a curse from Satanists who were highly obsessed in HIV/AIDS witchcraft. Of all respondents interviewed, 5% believe that AIDS is not curable and can only be contracted by sleeping with a female prostitute. This group talks very openly about HIV/AIDS, and will allow their children to play with orphans whose parents died of HIV/AIDS (Tsiwo-Chigubu, 2000).

## **Implications:**

What implications does this have to sustainable development?

### **Conclusions**

# This Author's Suggested Solution and Proposal

I strongly propose that merely donating ship-and plane-loads of condoms to Africa in the absence of meaningful HIV/AIDS curriculum, is a slap in the orphans' faces, a dismal failure pervasive to sustainable development, and yet a very fertile ground to nurture this silent terrorist that continues to wipe out Africa's heritage, while the rest of the global community watches on. Time is now to revamp literacy education that promotes eradication of the killer disease HIV/AIDS! "What's missing is the commitment and the will to embrace a holistic view that recognizes the importance of raising the "whole child" (Bredekamp & Copple, 1997), and "education is the most powerful weapon which you can use to change the world" (Mandela in Estes, 2004) and "weak economies in developing countries undermine child health and child survival" (Mugabe, 2004). We got to find a solution to de-mystify HIV/AIDS. This is about sex, death, children, and parents – subjects that produce fits, innuendoes false and true, heartbreak, (Popken, Newsome, & Gonzales, 1994) stigma and an absence of culturally responsive literacy for HIV/AIDS. Africa has got to come up with meaningful discussion! Let us dare to read, think, speak, and write (Adams, in Zinn & Poole; 1996) about HIV/AIDS in a way that is culturally inclusive and sensitive to the needs of the indigenous people of Africa, and a curriculum that can provide answers badly needed!

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### About the author

Dr. Tsiwo-CHIGUBU, a Zimbabwean, holds a Ph.D. in Family Studies, Human Development, & Early Childhood Education. She did an international research on young children and families impacted by HIV/AIDS (2000), and the research allowed her to work with young children, kinship care-givers, education settings, educators, families, churches, various government and non-governmental agencies, and diverse populations within given communities. She earned her doctorate from Michigan State University, College of Human Ecology, Department of Family and Child Ecology. obtained her Master's Degree in Child Development and Early Childhood Education from Michigan State University, USA. She earned her Bachelor's Degree in Education (Technical/Vocational) from the University of Huddersfield in England. Prior to that, she obtained her Secondary Teacher's Certificate from Gweru Teachers' College in Zimbabwe, which is in the Southern part of Africa. She was born and bred in Zimbabwe, and she obtained all her primary and secondary school education in Zimbabwe. For part of her entire studies, she received funding for her education from various organizations which among others are as follows: Government of the then Rhodesia, Government of Zimbabwe; UNDP (United Nations); British Council (England); W.K. Kellogg Foundation (USA); FINNIDA (Finnish Government); AAUW (American Association of University Women); Michigan State University (USA); and the Rockefeller Foundation (USA). Dr. Tsiwo-Chigubu has taught in pre-school settings, kindergarten, elementary, primary/middle, secondary/high schools, teacher education colleges, and universities.