

HIV/AIDS Pandemic and the Expanding African Universities: (the case of Kenya)

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The greatest challenge to independent Kenya has been the emergence of Human Immuno-deficiency Virus and Acquired Immunity Deficiency Syndrome (HIV/AIDS) Pandemic. The pandemic has greatly affected human resource. A disturbingly high proportion, 11.21 percent of the Kenyan population is already affected by this scourge. According to the United Nations Aids report of the year 2000, so far, 1.5 million people have already died of the scourge. About 2.2 million others are living with HIV/AIDS virus; and between 750 and 1200 people are being infected with the virus daily. The projection is that by the year 2015, 15 million people in Kenya would either have died of the virus or would be living with it. Of great worry to the Kenyan Society is that the most affected section of the population are the youthful, productive and future leadership within the age group of 16-24 years. Most of the University students in Kenya fall within this age group. For this particular age group, this is a developmental period marked by discovery and experimentation that comes with numerous emotional changes. Sexual behaviour and/or drug abuse are often part of this exploration. During this time of growth and change, the youth get mixed messages! Society urges them to remain abstinent while at the same time surrounded by images of television movies and magazines of glamorous people having sex and taking drugs.

The world that surrounds these youth, therefore, does not give them enough time to reflect on the differences between what is right and what is wrong. Given this scenario, it is possible to speculate that Kenya's Political and Social Economic performance is likely to collapse if there is no proper and immediate intervention. The emergence of Privately Sponsored Programmes in Kenyan Universities has increased the number of students at the institutions of higher learning. The majority of these students come from schools where conformity is the order of the day and when they join the universities, most of them get the 'feel of freedom' for the first time. For most of them, this is freedom, but they lose it within a few weeks of arrival in the university because society begins making negative demands on them. They lose the freedom of choice, yet the single most important personal choice that an individual can make in his life is the choice, for ever increasing consciousness. The students lose this asset. They must drink, they must take drugs, they must have sex (protected and/or unprotected). Peer pressure makes its demands. To know which response is appropriate in any given situation, extra-ordinary consciousness is required. These university youths have lost extra-ordinary consciousness and as a result, they are unable to make appropriate life responses.

Of great worry, is the fact that in some of Kenyan universities, the private degree programmes are run at night. Transport to the students' place of residence is not guaranteed. Who takes care of these students when they are stranded at night? In a speech given on November 25 th 1999. The President of Kenya (His Excellency Daniel Torotich Arap Moi) declared HIV/AIDS a national disaster. Despite this declaration of war, as well as the United Nation Declaration adopted nearly two years later, the battle has been approached both internally and externally with a business like attitude: words, not action abound, the stigma of HIV/AIDS remains enormous. Effective measures are essentially absent and even the most basic care is lacking. Despite recognition of the word HIV/AIDS, true understanding of this illness and its consequences are generally lacking. Perhaps most frightening is that, despite the catastrophic death rate, prevalence is increasing due to the rate of new infections. As these new cases progress to Aids and death, the social spiritual and economic backbones of the Kenyan society are slowly breaking.

There is urgent need for Kenyans and the International Community to be part of an urgent internal and international effort to assist in assembling organised, comprehensive and effective national programmes to combat the disease. The effort to combat HIV/AIDS must be handled with a sense of urgency and purpose. Why should the Kenya Government and parents spend resources equipping students with academic skills and yet lose them a few years after graduation. So far, the government of Kenya has created the AIDS programme secretariat (APS) to organise the nations' efforts against AIDS. The National Aids and S.T.D. control programme (NASCOP) was created within the Ministry of Health to be the major implementing organisation of the government's programme. In (1987) the AIDS programme secretariat (APS) developed a Medium Term Plan (MTP) for the period (1987-1991). The

plan focused on public awareness campaigns, strengthening of laboratory services, surveillance of HIV/AIDS and training of health workers. In 1992, the second Medium Term Plan (MTP II 1992- 1996) was prepared. Although the MTP II has not been fully implemented due to a number of constraints, it does represent an attempt to design a comprehensive intervention for Kenya. A five year strategic plan (1999- 2003), which defines priority areas for interventions, taking into consideration the Ministry of Health's comparative advantage and strength within a multisectoral environment was officially launched in (1999). The picture which emerges so far reveals that the government of Kenya, to some extent, has shown commitment in an effort to put in place measures to curb this social problem.

This paper points out that those who have been given the responsibilities to inform the public about the HIV/AIDS Pandemic must in addition, to what they are doing, advocate for a theory that gives a background for behaviour change. Social cognitive theory of behaviour change calls for learning through interactions with other people and using physical and social environments to produce change, learning from role models through role play/drama, learning to assume responsibility and learning through community building. All these are components of a programme that uses the social cognitive theory of behaviour change.

There is compelling evidence from a biological point of view, that human race is a system designed by evolution to change as the environment changes. There is nothing unnatural about trying to initiate self-generated personal change. Psychologists world over are in favour of change. Most of them see their role as that of helping people to change themselves, rather than being in possession of magical skills that can bring about change in others.

There is an abundance of evidence that we can change ourselves, but we must choose the right things to alter and set about doing so realistically. What personal changes can the youth make deliberately? Often merely, understanding why you do something gives you the power to control it. Understanding causes can play a vital part in changing the youth's reactions to states like depression, drug abuse and other forms of behaviour that can put them at great risk.

THE WAY FORWARD

The role of universities in the management of HIV/AIDS Pandemic.

I. Advocacy for Social Interaction

Frank discussions between the youth and the university personnel, (those charged with the responsibilities to assist the youth at university change behaviour) can lead to adoption of behaviour that will prevent them from getting HIV/AIDS and other Sexually Transmitted Diseases (STDs). Research has shown that when older people talked, and answered questions about abstinence and use of condoms with their youth prior to sexual debut, the youth reported greater abstinence or condom use at first intercourse and most recent intercourse, as well as greater lifetime condom use.

Mathare Youth Sports Association (MYSA) is an organisation based on the Mathare Slums Nairobi-Kenya. The organisation aims at bringing together youths (boys and girls) from the Mathare slums and its surroundings through sports. Their activities include HIV/AIDS education, peer education, condom promotion and distribution. MYSA organises football tournaments, which attract very many youths. These tournaments offer an opportunity for the peer educators to give HIV/AIDS information to both spectators and the players.

MYSA has become very popular with the peers and a force to reckon with by participating in Kenya Football League and winning the cup. Universities in Kenya and world over can form organisations that can attract the youth from all over with an aim of disseminating HIV/AIDS information while at the same time gaining in physical skills. Universities should not just be academic oriented as it is the case with most students who attend regular and privately sponsored programmes in Kenya. Further, universities need to strengthen social interaction by encouraging registration of organisations based on the religious faiths of students. This would encourage more discussions and counselling services on relationships. Research has revealed that such arrangements elsewhere in Kenya and in the world have produced remarkable results in the field of HIV/AIDS Pandemic. Only one youth out of 10 reported that they had had sex with more than one person in the previous six months. Among other youths in areas where there was no active increase in counselling three times as many youth reported, they had had sex with several partners over the previous six months.

II. The Role of the Universities in the Creation of Learning through Role Models.

Universities in Kenya and elsewhere in the world need to create opportunities through workshops; seminars and conferences to enable students get an opportunity to learn from role models. This can be achieved through role play/drama sessions.

Our relationships with others and learning from them – can be one of life's gifts. Role models help prevent us from having to learn everything from the scratch. If we are good listeners and observers, we can avoid some of the pitfalls someone else has found on the path on which we are heading. Observers will learn to choose wisely whom to emulate in adulthood, people have the opportunity to make a deliberate choice of role models. In learning from others, one must keenly perceive the nuances that allow us to distinguish between good and bad habits.

One of the purposes of depicting a story through drama is the opportunity it gives to the audience to identify what are known as stop-points those moments at which critical decisions are made: The issue here is to make the youth recognise, that life is a series of decisions and that what one needs to do is to make appropriate decisions at any one given time.

Once a stop-point during a drama presentation has been identified, it is easier for the audience to see how they could have behaved differently. Role play/drama gives the youth a chance to explore alternative behaviour. After every drama session, it is recommended that group discussions follow, to deliberate on how certain characters should have behaved.

Recognising painful feelings by talking about them is part of the treatment towards behaviour change. By becoming conscious of the painful feelings, those involved and those observing have a better chance of changing negative behaviour in future professionals in social psychology believe that one of the unique strengths of this kind of treatment i.e. where individuals take on painful roles in drama and discuss them later in group is to get wrong doers to understand the motivating factor behind their behaviour. When the youth are asked to conform to what is right through words and not action, as is the case today in Kenya, they just do not understand the motivating factors behind their behaviour.

Group discussions after any piece of drama/or role play have further benefits. Instead of having negative attitude and behaviour strengthened, the audience and those who take part in drama/role play learn to relate to their peers in a positive way, contributing their search for understanding, giving and receiving suggestions; co-operating and sharing. In the process, those involved acquire a better self-image, learning to think for themselves as people who have a choice in life. Choices about what to give their time and attention to. The most important choice being those of discerning their values. For instance the values of integrity, dedication to reality or truth and the acceptance of appropriate responsibility.

III. The Role of the Universities in the Assumption of Appropriate Responsibility.

There is need for the universities through their respective academic offices to organise seminars on topical issues like 'assumption of appropriate responsibility' among the youths.'

Assumption of appropriate responsibility refers to the willingness on people's part to accept responsibility for a problem before they can solve it. They cannot solve a problem by saying that it is not their problem. People cannot solve a problem by saying that someone else will solve it for them. The youth at the university need to make deliberate attempt to change negative behaviour for instance drugs, drinking and having unprotected sex. They can achieve personal change if they are sensitized on the issues such as assumption of appropriate responsibility.

They should be educated on the fact that it is this whole process of meeting and solving problems that life has its meaning. Problems are the cutting edge that distinguish between success and failure. They call fourth our courage and wisdom. When we desire to encourage the growth of the human spirit, we challenge and encourage the human capacity to solve problems.

There is dire need to inculcate in the youth the means of achieving mental health. The youth must be taught the necessity for legitimate suffering and the value thereof, the need to face problems directly and to experience the pain involved. The universities can achieve this by:-

- a) Creating employment opportunities for students during the long vacation.
- b) Creating employment opportunities during learning sessions
- c) Allowing students to visit and offer services to less advantaged communities

When students get money that they have worked for, they will not spend it easily or carelessly; instead, they eradicate the dependence syndrome. When students interact with the less advantaged communities, they observe the suffering those communities go through and learn not to take for granted what they have. When we teach ourselves and our children discipline, we are teaching them and ourselves how to suffer and also how to grow. Assumption of responsibility is an essential tool for gaining discipline.

IV. The Role of the Universities in Community Building:

Universities must strive to build a community within their campuses. Community refers to a group of individuals who have learnt to communicate honestly with each other, whose relationships go deeper than their masks of composure and who have developed some significant commitment to delight in each other, making others' conditions their own. This means, community is and must be inclusive. The great enemy of community is exclusivity. Groups that exclude others on the basis of race or nationality are not communities. They are cliques – actually defensive bastions against community. True communities always reach to extend themselves. Communities do not ask "How can we justify including this person in our discussion?" Instead, the question is, "Is it justifiable to keep this person out?" Community is integrative. It includes people of different sexes, religions, cultures, viewpoints, and life styles. Community, therefore, seeks out diversity. It is holistic and it integrates us human beings into a functioning mystical body.

The universities can achieve true community in their campuses by making boundaries between students and lecturers "soft." There should be no out-groups, and no outcasts. There should be no pressure to "conform." Students should be given a chance to air their views. Community building should not merely be a matter of including different sexes, races and creed. It should be inclusive of the full range of human emotions. The STOP/AIDS project in San Francisco, CA. has served as a model for HIV/AIDS prevention across the country. The model based on community mobilization, outreach and small group meetings, has been adopted and used for gay men across the country. The STOP/AIDS Model has been used in Los Angeles, CA. West Palm Beach. In San Francisco, clients are recruited on the streets and in the bars, while in Chicago; the programme has gone into schools. They have found that HIV prevention programme's work better when high levels of local commitment are established in a city.

One successful prevention programme for gay men in small cities recruited popular opinion leaders and trained them to deliver and model prevention measures to their peers. This programme was then adopted to address minority women in inner city housing developments. However, the programme did not work. The reason? Women did not know their neighbours and were reluctant to open their doors to strangers. The programme was then reworked out starting by helping women in the housing developments to establish a sense of community through dinners and music festivals. As a result, not only did the women increase condom use and communication but also began to tackle other issues besides HIV/AIDS such as drugs and violence in the housing development.

The Universities need to recruit trained community planning individuals who can facilitate better communication and stable relationships between university staff, students, researchers, community based organisations and health departments. Community planning co-ordinators can help link the university community with local and international researchers to help Universities determine the best adoptions to make towards the prevention of HIV/AIDS pandemic in African universities.

Conclusion

This discussion on the role of universities in the control and management of HIV/AIDS pandemic suggests that behavioural change is possible. An atmosphere to enable the youth in the universities

initiate self-positive change of behaviour is necessary for the prevention of HIV/AIDS spread. This change can be achieved by encouraging the youth to:

- a) Learn through interaction with others, using physical and social environments to produce positive behavioural changes.
- b) Learn from role models through role play/drama,
- c) Learn through assumption of appropriate responsibility.
- d) Learn through community building.

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