

Teaching & Learning

ESSENTIALS OF EDUCATION

FROM THE EDITOR

Let's keep the girl child in school

On Wednesday, October 11, Uganda joined the rest of the world to celebrate the International Day of the Girl Child. A statement from the United Nations urged member countries to 'commit to investing in skills training and education for girls and livelihood activities for young women around the world who are facing crises. Far from being passive recipients of assistance, these girls are leaders who will use the skills that they develop today to rebuild their communities, and create a better future for all of us.'

In Uganda, statistics show that approximately 13 per cent of primary school-aged girls and 30 per cent of secondary school-aged girls are reported to be out of school. Even more concerning are the completion rates: Nationally, only 55.28 per cent of girls enrolled in primary education graduate from Primary Seven, and less than 20 per cent of all girls aged 15-19 have finished primary education.

Many reasons have been advanced for the high drop out rates such as long distances, poverty and menstruation. Most of these, however, can be overcome to keep the girl child in school. Strides have been made but more needs to be done to achieve 100 per cent enrolment.

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POLICY/PRACTICE

ESSENTIALS AND ALTERNATIVE IDEAS

Students with chronic illnesses need ongoing and coordinated support from their families, schools and medical carers to get the most out of their schooling.

BY MOSES MUWULYA
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MASAKA. Alex Mubiru, 17, a Senior Four student in one of the schools in Masaka town had tried so hard to hide his HIV status from fellow students.

In his move to tightly mask his health status, he secretly took his daily Anti-retroviral (ARV's) drugs.

But he was unfortunate that one day, his fellow students broke into his suitcase - perhaps looking for money - and landed on his tablets.

In fear of being stigmatised, Mubiru decided to throw the tablets away.

This grave decision nearly cost him his life after spending days without taking tablets, only resuming when he got back home for holidays.

Whereas some learners, may not have trouble at school due to a particular health condition, some have more substantial health concerns, which may call for significant assistance in school settings.

The notable ones are those with chronic conditions like asthma, diabetes, sickle cell anemia, HIV/Aids, epilepsy and other seizure disorders.

According to Dr Sabrina Kitaka, a paediatric and adolescent health specialist at Makerere College of Health Sciences, to get the most out of the school going students with a chronic illness, an ongoing and coordinated support from their families and schools needs to be accorded.

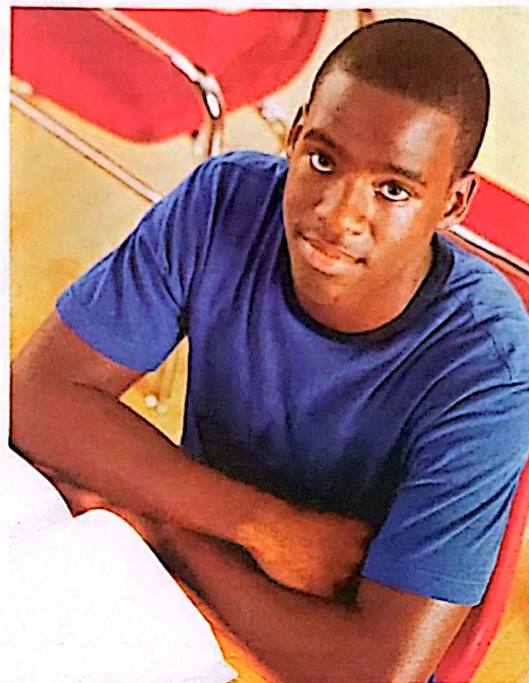
She is concerned that with the increasing rise of non-communicable diseases among children, schools need to have a comprehensive health programme that caters for such students so as to enable them stay in school.

"Learners in that category need medical, psycho social and psychological support which should be given by well trained counselors rather than school nurses or teachers who may not have the expertise to deal with such learners," Dr Kitaka notes.

As an advocate for this, she notes that although they have pestered schools to provide such services for students with chronic diseases, many schools are yet to comply, even those that may be considered as big schools.

She stresses that the Education, Gender and Health ministries, should work hand in hand to ensure that schools

Are schools caring enough for students with chronic illnesses?



Students with chronic diseases feel isolated and therefore will need all the support they can get. FILE PHOTO

meet these standards.

"Education inspectors must look beyond sanitary and hygiene standards in schools, but also look at how schools are ready to help such learners so as to make them comfortable at school," she says.

Such services must be set as pre-requisites for someone to start a school, she notes.

School health policy

A school health policy includes

information on issues such as HIV / Aids, sanitation and hygiene, safety, medication, and offers information about where to seek help, but does not talk about the whole approach regarding efficient handling of students.

HIV fighting organisations note that the rising numbers of adolescents who skip and get off their medication are in schools, with those in boarding being the most pronounced, which is attributed absence of extra care to students.

Also, adolescents in schools may stop taking drugs because of drug fatigue; stigma due to absence of a safe and non-discriminatory environment in schools where they can adhere to their treatment.

Mr Livingstone Musoke, the adherence officer of Kalangala Comprehensive Public Health Project (KCPHP), says they recently lost a student who had developed meningitis, which is caused by inconsistent taking of HIV

drugs.

"Others only come to us when their viral load has gone high and this mainly accrues due to irregular taking of drugs which mostly results from absence of care at school," Mr Musoke notes.

KCPHP is a community development group in Kalangala District that cares for people living with HIV.

Storage of drugs

The drugs especially for HIV are largely any other ailment need to be stored well. But as some students tend to hide the drugs in places that weaken their efficacy which is very dangerous, according to Dr Kitaka.

Asked how students with such illness are handled, Mr Jackson Sengendo, the head teacher Kato Secondary School in Masaka, said though they currently have minimum cases of such students, they have ensured they get a conducive environment. They have also kept their status a secret.

"We always ensure that they take their drugs on time and for safety reasons we store them (the drugs) and ensure they swallow them consistently," Mr Sengendo shares.

"We also make sure we do not stigmatise the especially during assemblies."

For those with asthma or any other such cases, he shares that they are allowed to put on cardigans especially in extra cold situations and are also exempted from sweeping classes to avoid them getting exposed to dust.

To render the deserved support, Sengendo notes that the family and the school need to work together to establish and maintain good communication and cooperation.

"Everyone needs to understand what is needed and expected to support the child," Mr Sengendo says.

Mr Musoke shares that the family and the school also needs to be clear about what can, and cannot be done so that everyone's expectations are achievable and realistic.

"Make sure that relevant information is communicated to casual teachers and other staff who have occasional care of your child," Mr Musoke says.

He adds: "Sharing information about chronic illness is prudent, and the parent, with the child should decide what information about the child should be shared with appropriate school staff and the school community"

However, Mr Musoke faults parents who do not to reveal their children's status and further caution them never to reveal it before school teachers which he says it mounts to stigma among these learners.

He emphasises that it is a must to keep up good communication.

Regular communication between the school and the family is the best way to monitor how your child is coping at school and at home (academically, socially, physically and emotionally). Student welfare coordinators may also be of good help."