

Effects of HIV on children and youth's educational attainment

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Impact Statement

Although there has been a 60% reduction in AIDS-related deaths since 2004, HIV is still a leading cause of death in low-income countries (UNAIDS, 2020; WHO, 2020). HIV ranks sixth globally on the list of leading communicable deaths in low-income countries after neonatal conditions, lower respiratory infections, diarrheal diseases, malaria and tuberculosis (WHO, 2020). This decrease in deaths can be attributed to the progress brought about by increased access to treatment and preventative measures. Unlike diseases such as malaria and tuberculosis that are concentrated in low- and middle-income countries, HIV affects communities in developing and developed countries, making it a global issue. As of 2019, there are about 38 million HIV-positive individuals globally. Of these, 36.2 million are adults and the rest are children below 15 years. Only about two-thirds of PLWHIV have access to treatment, which leaves a substantial number of adults and children in fatal situations. Aside from these mortality and morbidity issues, it also has socioeconomic consequences. These include stigma, risky sexual behaviors, poverty, unemployment and school absence/dropout.

Education is a basic human right. Therefore, it is important to pay attention to individuals who are excluded from this basic right. Because of various reasons, girls in SSA have been obtaining less education compared to their male counterparts. Although international governments in SSA have taken steps to close gender-gaps in educational attainment, the gender gaps are currently similar to those of developed countries in the 1950's (Barro and Lee, 2013). Gender-gaps in educational attainment affect economic growth because they lower the level of human capital (Klasen, 2002). Hence, when HIV and HIV-related issues are additional barriers to girls' education, the level of human capital may be further reduced. This is reinforced by the fact that HIV disproportionately affects women and girls in SSA (UNAIDS, 2015).

This dissertation examines how HIV affects gender gaps in educational attainment and how it affects intergenerational (parent-to-child) transmission of education. The study uses quantitative and qualitative methods to examine how HIV contributes to inter and intra-gender gaps in educational attainment while focusing on Zimbabwe. There are a few advantages to focusing on Zimbabwe. First, Zimbabwe is ranked sixth in HIV infections. Second, studies have shown that there are gender gaps in schooling among children in Zimbabwe (e.g., Mapuranga and Chikumbu, 2015). HIV can increase these gaps. Third, nationally

representative data with HIV test results of children and adults aged 0-49 years are available. The dissertation also complemented this quantitative data with qualitative data that were used to examine how HIV affects mothers from transmitting education to their children. Finally, focusing on Zimbabwe allows for country-specific contextualization of the results. This is important because HIV, gender and education policies differ by country. In addition, social and cultural responses to HIV, gender and education differ by country as well.

Contributions to researchers

The thesis has contributed to the research community in that two studies have been recently published and cited. One study is under review. Therefore, the studies are available to researchers, scholars and policymakers. The second chapter is a systematic literature review (published in 2020) that examined 62 studies by focusing on three mechanisms through which HIV influences children's education. The study has been published as an open-source article and has been read and cited by scholars from all over the world who work on similar issues. Many scholars who work in HIV are based in developing countries, where it can be difficult to access relevant literature, the fact the study has been published as an open-access article gives these scholars access to not only this study, but the summaries of the other 62 papers analyzed. The third chapter published (2021) focuses on examining effects of HIV on intra- and intra-gender gaps in schooling. This chapter is also available as an open-access article. Given that this is the first paper to examine this issue using nationally representative data and a method that has not been used on this topic, it provides a new lens to scholars who are interested in contrasting the case of Zimbabwe with other countries.

Chapters 3, 4 and 5 have also been shared with the academic community through presentations at various academic conferences such as the Center of the study of African Economies (at Oxford, UK), the Western Economic Association International (Vancouver, Canada), International Association for Feminist Economists (Glasgow, UK) and the University of Arizona (Arizona, USA). As part of the ethical approval process, the qualitative study will be presented to the Medical Research Council of Zimbabwe. The study will also be presented to Mashambanzou Care Trust and its affiliated donors and stakeholders. The dissemination of the studies in this dissertation spans across academic, policy, nonprofit and health

practitioners. This allows for people from all walks of life to have access to these studies, which will ultimately lead to policies and actions that will improve the lives of PLWHIV and HIV-affected individuals.

Relevance to Policymakers

The results of the studies in this thesis can also be useful to policy-makers. Chapter 3 shows that there is an intergender gap in schooling between HIV-positive girls and the groups of HIV-negative girls, HIV-positive boys and HIV-negative boys. To our knowledge, this is the first study to examine these groups using nationally representative data. The results show that this gap is mainly driven by older girls. The study was not able to distinguish whether these girls have actually dropped out of school. In the event that the girls did in fact drop out, it is not clear whether the girls became HIV-positive before or after doing so. The results of the study cement the fact that older girls who are HIV-positive are academically behind their peers. This reduces their productivity and earning potential. Highlighting this problem illuminates the plight of HIV-positive girls' future in Zimbabwe. Policymakers in Zimbabwe are therefore encouraged to enact policies and initiate programs that mainly focus on the retention of HIV-positive girls to ensure that they remain in school or return to school. This is not only beneficial to HIV-positive girls, but to the country as whole because the economy will continue to face human capital losses brought about by HIV.

Chapter 4 also shows that HIV affects men at the tertiary level. Similar to the case of HIV-positive girls in Chapter 3, this creates a social mobility barrier between HIV-positive and HIV-negative men. Policymakers are also encouraged to enact policies and programs that target post-secondary HIV-positive men in order to ensure that they are not left behind their HIV-negative counterparts regarding tertiary-level educational attainment. The results of Chapter 3 and 4 show that although there is gender parity in primary and secondary education, HIV mainly affects older girls' educational attainment. That is, in addition to the social barriers that may prevent girls from completing their secondary education, HIV-related issues present additional barriers to their schooling. Overall, policymakers should ensure that all HIV-positive individuals are able to reach their educational goals and live lives that are equal to their HIV-negative counterparts.

Chapter 5 shows that some children with low-income HIV-positive mothers do not have birth certificates due to various socioeconomic and bureaucratic barriers. This inhibits these children from enrolling in

school and accessing public funds. In addition, birth registration should be a right that is accessible for all children born in Zimbabwe, despite their orphanhood status or their parents' HIV status. In this case, policymakers in Zimbabwe should ensure that these children have access to the human right of basic education and formal birth registration.

This thesis mainly highlights that despite the commendable efforts to increase access to HIV treatment and increased education and medical practice related to HIV prevention, HIV-positive and HIV-affected individuals face social and economic barriers that impede their educational attainment. One of the main economic development issues brought about by HIV is the loss of human capital, particularly in Southern African countries like Zimbabwe, which already have significant economic issues. Ensuring that groups of HIV-positive and HIV-affected communities have adequate access to treatment and social support promotes economic development through increasing their human capital capacity. Indeed, with further research and effective policy implementation, the educational attainment gaps between HIV-affected and none affected communities will decrease.