



**A Summary Report on Re-invigoration of Education Sector
Response to HIV and AIDS in the SADC Region.**

August 2011

Summary Report

Introduction

This brief summarizes the “*Reinvigorating Education Sector (EDSEC) Responses to HIV&AIDS*” in the SADC region commissioned by UNESCO/UNICEF/SADC Secretariat during the course of 2010. The resultant process included:

- A review of the status of EDSEC HIV&AIDS Policy and Strategies in 11 countries in the SADC region;
- A review of the status of EDSEC HIV&AIDS Policy and Strategy implementation;
- A review of the SACMEQ III assessment of HIV&AIDS learning achievements;
- An assessment of the monitoring and evaluation of the HIV&AIDS EDSEC response, and development of proposed core regional and global indicators

Over the past decade the education sector has played an increasingly important role in the multi-sectoral response to HIV and AIDS. The priority placed on the EDSEC response is based on the evidence that education contributes to the knowledge and personal skills essential for HIV prevention and protects individuals, communities and nations from the impact of AIDS. However, as resources for multi-sectoral responses to HIV become ever more limited, it becomes crucial that EDSEC is able to show evidence of the success of its responses to the HIV epidemic.

The review of HIV&AIDS responses summarized in this report reveals that while the SADC region has made substantial progress in addressing HIV&AIDS in policies, plans and programs, a number of challenges still remain. In EDSEC, these include the failure to implement policies and strategies, inadequate mainstreaming and teacher preparation, limited delivery of life skills-based HIV&AIDS and sexuality education, and the absence of M&E systems. Nationally, the EDSEC response has been largely absent from consolidated HIV&AIDS strategic planning, despite acknowledgement that EDSEC has a critical role to play in the national response.

But there is also good news. This is that between 2001 and 2009 ten of the countries dealt with in this report experienced a decline of more than 25% in the rate of new HIV infections, particularly among young people. Moreover, in five of the countries (Botswana, South Africa, Tanzania, Zambia and Zimbabwe) a significant decline in HIV prevalence among young people was accompanied by significant changes in sexual behavior, with adolescents and young adults adopting behavior patterns that were less likely to transmit HIV.

Clearly, more responsible sexual behavior among young people is going hand in hand with reduced HIV incidence. This is just the way it should be, and education, among other agencies, can take credit for this development. High risk behaviors are decreasing in those with more education and HIV prevalence is beginning to show a steep decline in those who had attended secondary school. Education is definitely showing that it can be a powerful force in combating the spread of HIV.

The review has revealed many positive achievements as well as a litany of challenges that lie ahead. The challenges represent **bold targets** and in turn they require **bold responses** for a successful and sustained education sector response to HIV&AIDS.

A snapshot of findings

1. Review of Education Sector HIV&AIDS policies and Strategies

EDSEC response to HIV&AIDS was reviewed in 11 countries in the SADC region, demonstrated by the existence or availability of current HIV&AIDS policies and strategies. The purpose of the review was to analyse country preparedness and guide development towards comprehensive HIV-prevention programming, treatment and care in the education sector and prioritise remedial action. The review established the existence, availability and status of 11 categories of policies, strategies and plans, and measured how up-to-date and comprehensive each set was. Countries were given an indicative score (from 0 to 4¹) in each document category, to help focus attention on missing, out-dated or perennially draft documents. Table 1 below provides an overview of the indicative scoring.

The region has made substantial progress in addressing HIV and AIDS in policies, plans and programmes. All countries have at least a policy, action plan or strategic frameworks that address HIV and AIDS in the education sector.

| | | Angola | Botswana | Lesotho | Malawi | Mozambique | Namibia | South Africa | Swaziland | URT Tanzania | Zambia | Zimbabwe |
|----|--|-----------|-----------|-----------|-----------|------------|-----------|--------------|-----------|--------------|-----------|-----------|
| 1 | EDSEC Policy Framework | 0 | 2 | 1 | 0 | 0 | 3 | 2 | 4 | 3 | 1 | 1 |
| 2 | EDSEC Strategy and Action Plan | 2 | 2 | 4 | 4 | 3 | 4 | 4 | 3 | 2 | 4 | 0 |
| 3 | National HIV/AIDS Policy | 2 | 4 | 3 | 2 | 4 | 3 | 0 | 3 | 2 | 3 | 1 |
| 4 | National HIV/AIDS Strategy | 3 | 4 | 4 | 3 | 0 | 4 | 4 | 4 | 4 | 4 | 4 |
| 5 | EDSEC HIV/AIDS Policy | 0 | 1 | 4 | 1 | 4 | 2 | 1 | 3 | 2 | 3 | 0 |
| 6 | EDSEC HIV/AIDS Strategy/Action Plan | 3 | 3 | 0 | 4 | 3 | 3 | 0 | 1 | 3 | 2 | 3 |
| 7 | EDSEC HIV/AIDS Workplace Policy | 1 | 2 | 2 | 0 | 2 | 4 | 4 | 2 | 0 | 3 | 4 |
| 8 | EDSEC HIV/AIDS Prevention Strategy | 1 | 2 | 3 | 4 | 2 | 0 | 0 | 0 | 2 | 4 | 3 |
| 9 | National HIV/AIDS M&E Strategy | 2 | 3 | 4 | 4 | 2 | 3 | 4 | 4 | 2 | 4 | 4 |
| 10 | EDSEC HIV/AIDS M&E Strategy | 2 | 4 | 2 | 0 | 3 | 0 | 0 | 0 | 2 | 0 | 0 |
| 11 | EDSEC OVC Strategy | 3 | 4 | 2 | 2 | 0 | 4 | 3 | 4 | 0 | 3 | 4 |
| | Indicative score out of possible 44 | 19 | 31 | 29 | 24 | 23 | 30 | 22 | 28 | 22 | 31 | 24 |

¹ Scoring key: '0' - no documentation available; '1' - documentation available but more than 10 years old; '2' - documentation available and relevant, but more than 5 years old; '3' - documentation available, relevant and up to date; '4' - documentation available, relevant and provides for future planning, budgeting, monitoring and evaluation.

| | | | | | | | | | | | |
|---------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Indicative percentage achieved | 43% | 70% | 66% | 55% | 52% | 68% | 50% | 64% | 50% | 70% | 55% |
|---------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|

Table 1: Indicative Policy/Strategy scores by document category in 11 SADC countries

Positive progress in several countries was offset by inconsistent levels of response across the region, illustrated by; A complete absence of key documents in some cases; Out-dated policies and a lack of alignment due to gaps in publication dates; Documents in 'draft' for 10 years and more; and; Consistent failure to link policies, strategies and plans in an integrated framework.

Assessing the implementation status by policy and strategy category, established that large gaps in the framework and structure of the response remain, as do critical problems of capacity and sustainability. The main reasons for implementation failures includes; inadequate MoE capacity and resources; inadequate Leadership and guidance; lack of functional M&E and reporting systems; and ineffective and less empowered HIV&AIDS management units to mainstream the response.

Recommendations

- Hold national and inclusive policy review workshops to up-date and revise EDSEC policies and strategies to mainstream HIV&AIDS response, in line with existing policy deadlines and requirements.
- Review the structure, role and status of HIV&AIDS management units.
- Integrate HIV&AIDS response across all EDSEC sub-sectors as a systemic and routine management function and revise relevant job descriptions and terms of reference.
- Critical and evidence-based review of country EDSEC policy and strategy implementation.
- Build sector-wide skills for programme costing, budget development and reporting and

2. HIV&AIDS Knowledge in the SAQMEC Region

The key finding of the study is a vast gap between the targeted and actual HIV and AIDS knowledge levels for Grade 6 learners as exhibited on the exam in 2007. It is encouraging that teachers demonstrated high knowledge levels, with nearly 100% of teachers in all countries showing minimal knowledge levels, defined as mastery of at least 50% of the officially designated curriculum, and over 80% attaining desirable knowledge level (mastery of at least 75%). Given that many teachers already have the desired knowledge levels, it is particularly important to examine how, where and when teachers are successfully transmitting their knowledge to pupils and learn from these success stories.

Table 1: Performance of Grade 6 Pupils and Teachers on the HIV&AIDS Knowledge Test

| School System | Pupils | | | | | | Teachers | | | | | |
|---------------|-------------------|-----------------|-----------------------|----|-------------------------|----|-------------------|----|-----------------------|----|-------------------------|----|
| | Transformed Score | | Reached Minimal Level | | Reached Desirable Level | | Transformed Score | | Reached Minimal Level | | Reached Desirable Level | |
| | Mean | SE ² | % | SE | % | SE | Mean | SE | % | SE | % | SE |
| Mauritius | 453 | 5 | 17 | 2 | 2 | 1 | 698 | 6 | 98 | 1 | 63 | 3 |
| Lesotho | 465 | 4 | 19 | 1 | 5 | 1 | 751 | 8 | 99 | 1 | 82 | 3 |
| Zimbabwe | 477 | 5 | 30 | 2 | 4 | 1 | 785 | 7 | 99 | 0 | 93 | 2 |

² Standard error in sampling

| | | | | | | | | | | | | |
|---------------|------------|----------|-----------|----------|----------|----------|------------|----------|-----------|----------|-----------|----------|
| Seychelles | 488 | 2 | 25 | 1 | 3 | 0 | 789 | 3 | 99 | 0 | 95 | 0 |
| Zambia | 488 | 4 | 35 | 2 | 4 | 1 | 744 | 7 | 98 | 1 | 86 | 2 |
| Uganda | 489 | 4 | 33 | 2 | 4 | 1 | 708 | 9 | 98 | 1 | 72 | 3 |
| Botswana | 499 | 4 | 32 | 2 | 7 | 1 | 782 | 6 | 100 | 0 | 93 | 2 |
| SACMEQ | 500 | 4 | 36 | 2 | 7 | 1 | 746 | 7 | 99 | 1 | 82 | 2 |
| Zanzibar | 501 | 3 | 38 | 1 | 4 | 0 | 657 | 5 | 94 | 1 | 45 | 3 |
| Namibia | 502 | 3 | 36 | 2 | 6 | 1 | 764 | 6 | 100 | 1 | 87 | 2 |
| South Africa | 503 | 4 | 35 | 2 | 8 | 1 | 781 | 6 | 100 | 0 | 93 | 2 |
| Mozambique | 507 | 6 | 40 | 2 | 8 | 2 | 741 | 7 | 99 | 1 | 81 | 3 |
| Kenya | 509 | 4 | 39 | 2 | 7 | 1 | 793 | 8 | 100 | 0 | 95 | 2 |
| Malawi | 512 | 5 | 43 | 2 | 9 | 1 | 714 | 9 | 99 | 1 | 72 | 4 |
| Swaziland | 531 | 3 | 52 | 2 | 4 | 1 | 759 | 7 | 100 | 0 | 89 | 2 |
| Tanzania | 576 | 4 | 70 | 2 | 24 | 1 | 724 | 7 | 99 | 1 | 82 | 3 |

Recommendations

- Prioritise involvement of young people in the design of HIV and AIDS Programmes
- A thorough, country-by-country review of life skills education programmes in schools, based on needs of pupils, health goals such as avoiding HIV infection, STI, pregnancy and gender-based violence;
- The use of prototype curricula that are known to work and prevent content-censoring that negates its effectiveness;
- Implementation of school system policies and national laws, making sexuality education taught by skilled teachers mandatory for each class;
- The recurrent capacity development of school systems and teachers

Although the education sector has been playing an increasingly important role in the multi-sectoral response to HIV and AIDS, its contribution is poorly appreciated. This is partly due to lack of enough evidence, which itself is linked to gaps in the monitoring and evaluation (M&E) systems, supposed to measure both the readiness of the education sector in responding to the HIV epidemic and the outcomes in terms of changes in HIV knowledge and behaviours among young people.

¹³ SADC countries undertook a rapid assessment of M&E practices related to EDSEC and HIV&AIDS in September 2010, and made recommendations on HIV-sensitive indicator selection and data strengthening to reinforce regional EDSEC HIV&AIDS response. This assessment revealed great variation in; The provision of HIV&AIDS-sensitive and/or routine data by EMIS; The number and type of HIV&AIDS indicators used; and Country reporting on and utilisation of HIV&AIDS-sensitive indicators and country reports, including UNGASS reporting.

This consultative and participatory process was also designed to assist the UNAIDS IATT on Education to identify a number of core HIV&AIDS-sensitive indicators for regional and global use. It was agreed that these must have detailed definitions and guidelines. Eight Global Indicators and seven Additional Indicators were identified through the consultative process, with the latter being indicators that considered particularly relevant to generalised HIV-prevalence settings. These indicators are now being field tested in four SADC countries.

³ Angola, Botswana, Lesotho, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, Tanzania, Zambia and Zimbabwe

Recommendations

- Simplify M&E systems, their effectiveness and actual use;
- Identify a limited number of appropriate and HIV&AIDS-sensitive indicators;
- Ensure/enforce regular reporting to meet key management needs;
- Stimulate the internal appetite for data and information at every level.

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Sustained implementation of these policies has emerged as the key to comprehensive HIV&AIDS response. Linked to this is the need to capture reliable and up-to-date data on system performance, as a means to monitoring and reporting this HIV&AIDS response and demonstrating the success of prioritised implementation. Ministries of Education need to take a bold position on HIV&AIDS as a management issue of direct concern to education, and not dismiss it as a public health issue of passing interest. The reality is that education holds the key to prevention and the assurance of an HIV-free generation in the SADC region, and it must rise to this challenge with all the resources it can muster.

2. ***The Education Sector should ensure the access of every child to education:*** There is increasing evidence in SADC countries that those who have not been to school are more vulnerable to HIV infection than those who have been able to enroll and attend. Education does not benefit those who cannot access it. And within this perspective, there is need to provide more education and training for girls. Increasing and improving educational opportunities for girls may well be the single most important contribution an education ministry can make to overcoming HIV and AIDS. Also within this framework, it is necessary to ensure that, while in school, every child gets a good education, assimilating worthwhile knowledge, skills, understandings and attitudes.
3. ***More is still required from the Education Sector:*** Better and more effective HIV, sexuality and life skills education in schools, with all the support and monitoring needed for this; more determined mainstreaming of HIV and AIDS into the core business of the entire education sector; developing capacity at every level to spearhead a proactive response to the epidemic and its impacts; extending management information systems to incorporate relevant HIV indicators and using such systems for management and programmatic purposes; integrating HIV and AIDS issues into human resource, financial and physical planning for the sector; developing prioritized, accurate and costed plans which will be assured of implementation.
4. ***Leadership:*** The greatest need is for the leadership that can animate the reinvigoration of a ministry's HIV and AIDS response. The education sector would be well served if senior officers and management personnel could see – and make others see – that a society free of HIV and AIDS is possible, and that education can be a powerful force in accomplishing this.

Recommendations

- Ministers are requested to champion a SADC Ministerial Declaration on school-based Sexuality Education & HIV prevention .
- Support the development of Regional HIV&AIDS and Education responses Plan of Action which details guidelines and practical steps for (i) mainstreaming the HIV&AIDS response, (ii) reinforcing existing HIV programmes by refocusing on specific risky sexual and protective behaviors, and (iii) an effective monitoring and evaluation process;
- Commit to an assessment of the structure, role and status of HIV&AIDS management units in view of their empowerment for a reinvigorated, mainstreamed response
