

TOOL 1 Raising awareness and advocating for HIV and AIDS education in schools

The first part of Tool 1 is intended to raise awareness about the fact that HIV and AIDS concerns all persons for different reasons and to different extents and that the education sector has a major role to play in responding to the epidemic.

The second part of this Tool provides key information on how to effectively advocate for HIV and AIDS education in schools.

The third part of the Tool advances arguments for advocating for HIV and AIDS education in schools.

Practical activity 1 Short “Quiz” to raise awareness:

Tool 1 What do we know about some HIV & AIDS-related facts?

To begin, a short quiz on HIV and AIDS is proposed. This quiz can be easily used to initiate discussions and raise awareness on the importance of HIV and AIDS in the life of all persons. This quiz is not intended to test knowledge on HIV and AIDS, but to highlight the impact of the epidemic and allow for the sharing and exchange of accurate basic essential information. It is important to know and remember these facts and use them to mobilise support and work towards an effective response to the epidemic.

<p>1. How many people in the world are newly infected with HIV each day?</p> <p>(a) 7,000 (b) 9,000 (c) 11,000</p>	<p>2. How many people in the world are living with HIV and AIDS?</p> <p>(a) Approximately 20 million (b) Approximately 40 million (c) Approximately 60 million</p>
<p>3. Globally, what percentage of people living with HIV, are unaware of their status?</p> <p>(a) 50% (b) 70% (c) 95%</p>	<p>4. Globally, what is the principal mode of transmission of HIV?</p> <p>(a) Unprotected heterosexual relations (b) Infection through intravenous injections and exchange of syringes and needles (c) From a mother to her child (Vertical transmission)</p>
<p>5. Are HIV and AIDS only public health issues?</p> <p>(a) Yes (b) No</p>	<p>6. Can education help prevent the transmission of HIV and contribute to the mitigation of the impact of HIV and AIDS?</p> <p>(a) Yes (b) No</p>

Answers

1. **(c)** Everyday, an estimated 11,000 people get infected with HIV globally. In many nations, the impact of HIV and AIDS on schools is devastating. Increased absenteeism from teachers and school learners and the resultant decrease in the quality of education are the two most evident consequences of the epidemic.
2. **(b)** Today, 40 million men, women and children are living with HIV and AIDS. A significant proportion of them are teachers, learners, trainers of teachers, specialists in the field of school curricular programmes, school staff and administrators. Schools cannot function without these important people.
3. **(c)** 95% of people living with HIV do not know that they are infected. The fear of stigma, rejection and discrimination is one of the reasons which hinder many people from taking HIV tests. Education has to be used as a means to break the silence and reduce the stigmatization associated with HIV and AIDS. Education does not only provide information on the importance of screening, treatment and care but also non-discrimination, support and respect for people living with HIV.
4. **(a)** The principal mode of transmission of HIV is unprotected sexual intercourse. HIV could be eradicated because it results from behaviours which can and must be changed. Education has a central role to play in helping young people to adopt more responsible sexual behaviours. Furthermore education in itself constitutes a protective measure against HIV. Among young people, especially girls, the greater the level of education, the lower the rate of HIV infection.
5. **(b)** No. HIV and AIDS are not only public health issues. The epidemic increasingly constitutes an obstacle to development. It weakens economies, communities and schools. It weakens the human and material capacities of the institutions needed the most to respond to the epidemic, notably the education system.
6. **(a)** Yes, Education is essential and has a central role to play in preventing young people from contracting HIV. It is essential to provide complete information about all the protection methods and the opportunities for counselling, testing and access to treatment, care and support in order to give young people and children the tools they need to protect themselves, and respect people infected or affected. Thanks to HIV and AIDS education, issues relating to gender equity as well as overcoming stigma and discrimination will be addressed thus facilitating changes in behaviour and values that will allow people to enhance their ability to protect themselves and better manage the impact of HIV and AIDS on individuals and communities. Implementing quality education and education on HIV and AIDS will contribute to the acquisition of life skills in schools and the realization of the objectives of EFA.

Advocacy and action for HIV and AIDS education in schools

More than two decades after the advent of the HIV and AIDS epidemic, millions of children and young people still lack access to HIV prevention services and do not have adequate sex education, necessary for protecting oneself against HIV. Many people living with HIV – including those who learn or work in the education sector – are denied their fundamental human rights to adequate health care and treatment, education and other services essential for an effective response to the HIV epidemic.

Advocacy and action are important steps in the process to rectify this situation. They ensure that both policy makers and the general public are kept informed of the problems, their urgency and the options for response.

The following sections were prepared by the IBE in the framework of the UNAIDS initiative EDUCAIDS, and can be found in the document *“Towards a comprehensive Education Sector Response: A Framework for Action”*, edited in 2006.

What are the common shortcomings of HIV and AIDS education in schools?

Many countries already include HIV and AIDS education in their curricula and develop effective supporting teaching materials. However, recent evaluations of HIV and AIDS education in schools reveal a number of common and serious shortcomings presented subsequently:

- HIV and AIDS education is added to already crowded curricula and there is not enough space and time allocated to it.
- When the issue of HIV and AIDS is part of the curriculum, it is covered in a limited manner concentrated on the technical or scientific aspects only.
- Teaching and learning material is poor or not available.
- The learning usually focuses on factual information and overlooks the question of protective attitudes and behaviours, necessary to prevent the infection.
- Teaching methods are not appropriate, notably with regards to issues related to the problems of gender equity, dimensions of socio-cultural context and life skills education for everyday life.
- Teachers are not adequately trained or supported to provide effective HIV and AIDS education.
- No specific or relevant assessment of learning outcomes, notably the acquisition of life skills, is conducted.

Overall, these weaknesses mean that the topic of HIV and AIDS is often not covered in a relevant and in-depth way, with sensitive but vital issues often left out. In some cases, HIV and AIDS is simply not taught at all.

Why does HIV and AIDS education in schools matter?

It is imperative that HIV education be integrated into the curricula of schools because:

1. Schools are embedded in communities, with the potential to reach more children and young people than any other institution
2. Schools often do serve as community hubs and centres for outreach, providing opportunities for individuals and a wide range of groups to participate in HIV and AIDS prevention and education measures.

3. Teachers are an invaluable resource for education and information, often motivated and willing to contribute to HIV prevention.
4. As a group with the majority not infected with HIV, children and young people represent the “window of opportunity” and it is vital not to miss them.

Advocacy should address the following issues:

- Prevention must be mainstay
- Building strong national programmes: nationally developed and coordinated and led in a supportive environment
- The education “environment” has to support the taken or proposed measures
- Development of a comprehensive approach: overcome stigma and discrimination, respect and support for people living with HIV, prevention, treatment and care
- Measurement of progress – assessing results
- Addressing the needs of marginalized and vulnerable populations
- Adopting a long term perspective

Practical activity 2 Awareness of the importance of HIV and AIDS education in schools, and arguments against this type of education
Tool 1

1) From your observations and experience, what is the level of awareness of the importance of HIV and AIDS education in schools?

Awareness	Non-existent	Very little	Moderate	High
At the ministry (Political level) Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At the ministry (Technicians) Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Among education officials (Decentralized level) Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Among School Officials Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Among Teacher Trainers Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Among Teachers Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Among Parents Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Among Learners Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Among Traditional or Religious authorities Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Among members of Community Organisations Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Within Public Opinion Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Through the Media Comment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2) What arguments do you often hear against HIV and AIDS education? What are the possible responses one could give in support of this education?

Argument 1	Possible response
Argument 2	Possible response
Argument 3	Possible response
Argument 4	Possible response
Argument 5	Possible response
Argument 6	Possible response

Practical Activity 3 Arguments for advocacy: explore reasons why HIV and AIDS education in schools is important

You may ask the following questions either in group discussions or individual sessions:

1. Why is it so important to address HIV and AIDS education among children and young people?
2. What are the particular characteristics of schools which make them especially suitable for HIV prevention and HIV and AIDS education? Please mention at least 2 characteristics.
3. At what age should one start HIV and AIDS education? And why?

4. Is it sufficient to inform learners about the risks and means to protect themselves only? What else should they learn?

5. What should be your response when you are told that prevention programmes which include sex education are dangerous and useless?

Responses – Advocacy for comprehensive HIV and AIDS education

Below are some useful points in answering questions and advocating for a comprehensive age-specific HIV and AIDS education in schools.

1. Why is it necessary to address HIV and AIDS education among children and young people?

As a group with the majority not infected with HIV, children and young people represent the “**window of opportunity**” and this is the reason why it is worth doing everything to prevent every single infection.

2. Why is school so important?

Schools represent an already existing **access point**, already organized to teach many children. Even if in some countries a lot of children and young people are out of school, no other institution offers such an opportunity to reach a large number of children and young people.

Furthermore, children and young people who go to school are in contact with friends who are not in school, thus information and skills can be exchanged between peers (and between generations) among families and communities. It will be a pity and even irresponsible to allow such an opportunity to be missed.

3. Why is it important to start HIV and AIDS education in primary school?

It is vital that **HIV and AIDS education starts at an early age** in primary school and be sustained throughout secondary school because:

Reason 1:

All studies on behaviour show that it is **easier to adopt new values and behaviours than to change them** once they are acquired. In this regard, one needs to teach children and young people and make them sensitive to values which are essential for an effective response to HIV and AIDS. One should teach at an early age, values such as teamwork, non discrimination, respect for other people and more equitable relationships between men and women.

Regarding **modes of transmission**, it is necessary to teach children very early to know and respect their feelings and their body, as well as that of others. One should also cover issues related to love, feeling, attraction between boys and girls, as well as sexuality. It is important to begin prior to the onset of sexual activity. This way, they will be more likely to adopt protective behaviours that are responsible to themselves and other people. By receiving quality HIV & AIDS and reproductive health education which are gender-sensitive and age-specific, young people are more likely to adopt low risk sexual practices.

Reason 2:

In many countries heavily affected by HIV and AIDS, most young people barely complete primary school and do not go on to secondary school. The only opportunity to reach them is to start at primary school with quality and comprehensive HIV and AIDS education adapted to their age, covering issues such as values and feelings, and taking into account the sex differences.

Furthermore, studies show that in order to be effective, HIV and AIDS education needs to be continued and repeated throughout schooling. It has to be adapted to suit the different successive stages of the development of children and accompany the passage from childhood to adolescence

Finally, special programmes must be established to reach out-of-school youth.

4. Life skills education is central to HIV and AIDS education. It is about interactive teaching and learning which leads learners to acquire knowledge, attitudes and skills thus allowing them to adopt non-risky (or lower risk) behaviours and show solidarity.

One should give children and young people tools to make them able to take care of themselves and others. Thus, they have to know how their body functions, how to manage their feelings (attraction, repulsion, fear, sadness, etc.), and what leads to good health and wellbeing. School can and must contribute to giving children and young people the necessary means to develop beneficial social relationships.

Furthermore, the teaching of life skills in schools will be useful in other areas of life such as: life in a multicultural world, sustainable development and peace education among others.

5. Finally, (this point is essential for advocacy), the overwhelming majority of credible and comprehensively evaluated HIV and AIDS programmes confirm that **HIV and AIDS education**, if well done, is effective in:

- Reducing risk
- Fostering care and support for people living with HIV within the community

Additionally, when HIV and AIDS education programmes are effectively and efficiently implemented, they can lead to outcomes such as; delay of the onset of sexual activity, reduction in the number of sex partners, increase in the use of condoms, increased uptake of VCT and reduction in vulnerability and high risk behaviours such as injecting drugs.

In other words, there is no credible study that shows that HIV and AIDS education and/or sexual education encourage young people to initiate sex activities early.

What needs to be done?

To achieve national coverage of effective HIV and AIDS education programmes, a two-fold approach is needed, combining:

- Local level action, innovation and experimentation, implementation of existing best practice HIV and AIDS education programmes in schools and teacher training institutions and
- Integration of HIV and AIDS education into official curricula

Overall:

1. Curricula need to provide strong requirements as well as clear and practical conditions to ensure that HIV education is actually implemented in schools
2. Adequate time needs to be allocated specifically to HIV and AIDS education
3. Systematic assessment of learning outcomes should be undertaken
4. Life skills education must be age-appropriate, culturally sensitive, and start before the onset of sexual activity. It should include self-respect, respect for others, assertiveness, critical thinking, resolving problems and communication
5. HIV and AIDS education should be comprehensive and provide a range of different behaviour choices/options for prevention covering:
 - Relationships and sexuality
 - Gender issues and inequalities
 - Stigma and discrimination
6. HIV and AIDS education should be introduced when young people are starting to develop their values and behaviours
7. HIV and AIDS education would be further strengthened if it were made an “examinable” subject within the curriculum

What works?

For effective HIV and AIDS education, knowledge alone is inadequate

Experience and evaluations of programmes have shown that, to be effective, curricula and programmes should:

- Actively involve young people, community leaders and other representatives of civil society in the development, adaptation and implementation of initiatives
- Provide opportunities to practice communication, negotiation and individual decision-making skills
- Use teaching methods that help learners to personalize information, especially about risk and vulnerability
- Have adequate time (long enough HIV and AIDS education sessions) in order for the approach to be comprehensive
- Select, train and use teachers or peers who are strongly motivated and really believe in the importance of their work
- Focus on behaviours that put people at risk

Governments can take the lead by:

- Setting standards for the content and minimum duration of HIV and AIDS education programmes
- Providing practical examples of good, simple and comprehensive HIV and AIDS education programmes, with instructions for teachers and activity sheets for learners
- Developing tools to adapt and implement curricula in local contexts

RESOURCES TO GO FURTHER

1. “HIV & AIDS and education: a toolkit for ministries of education”, 2003, UNESCO Bangkok.

- Document available in: [English](#)

- Website: http://www2.unescobkk.org/elib/publications/aids_toolkits/index.htm

2. “Education and HIV/AIDS: a window of hope”, 2002, World Bank

- Document available in: [English](#)

- Website:

http://www1.worldbank.org/education/pdf/Ed%20&%20HIV_AIDS%20cover%20print.pdf

3. “Education and HIV/AIDS: window of hope”, 2006, World Bank

DVD available in English, French and Portuguese versions.

To order the DVD

email: eservice@worldbank.org

4. “Impact of sex and HIV education programs on sexual behaviour of youth in developing and developed countries”, 2005, Doug Kirby

- Document available in: [English](#)

- Website:

<http://www.fhi.org/NR/rdonlyres/erqbb5vka5vlp7caw2yev3q6bevlbe56gpuzwkbtsi3dgi0fl2722nq6raq7kqdkkdzrsihccwsvf/sexedworkingpaperfinal2.pdf>

5. “EDUCAIDS, Towards a comprehensive Education Sector Response. A Framework for Action”

“EDUSIDA, Hacia una respuesta integral del sector de educación. Un marco de acción”, 2006, UNESCO

- Document available in: [English](#), [Spanish](#)

- Website

English: <http://unesdoc.unesco.org/images/0014/001473/147360e.pdf>

Spanish: <http://unesdoc.unesco.org/images/0014/001473/147360s.pdf>

6. FRESH toolkit: “Making the case for HIV/AIDS/STI Prevention through Schools”, 2004, UNESCO

- Document available in: [English](#)

- Website:

http://portal.unesco.org/education/en/ev.php-URL_ID=35500&URL_DO=DO_TOPIC&URL_SECTION=201.html

7. FRESH toolkit: Someone at school has AIDS: sample school policy, 2004, UNESCO

- Document available in: [English](#)

- Website: http://portal.unesco.org/education/en/ev.php-URL_ID=35500&URL_DO=DO_TOPIC&URL_SECTION=201.html

8. “Skills for Health: Skills based health education including life skills. An important component of a Child-friendly/Health-Promoting School”, 2003, WHO

- Document available in : [English](#)

- Website:
http://www.who.int/school_youth_health/media/en/sch_skills4health_03.pdf

9. “UNAIDS Report on Global AIDS Epidemic”, 2006, UNAIDS

- Document available in: [English](#), [Russian](#), [Spanish](#)

- Website:

Available in English at:

http://www.unaids.org/en/HIV_data/2006GlobalReport/default.asp

Available in Spanish at:

http://www.unaids.org/en/HIV_data/2006GlobalReport/2006-GR_es.asp

Available in Russian at:

http://www.unaids.org/en/HIV_data/2006GlobalReport/2006-GR_ru.asp

10. “WHO Information Health Series on School Health: Teachers’ Exercise Book for HIV Prevention”, 2003, Section (II)

- Document available in: [English](#)

- Website:

http://www.who.int/school_youth_health/resources/sch_document61_HIV_prevention_env2.pdf