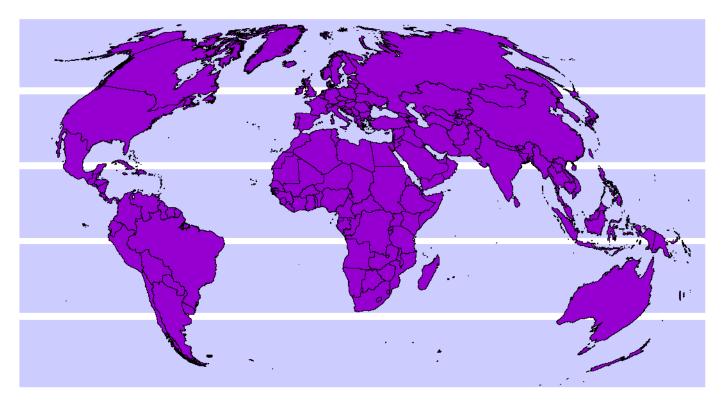
REPORT ON THE EDUCATION SECTOR GLOBAL HIV/AIDS READINESS SURVEY

2004



A review of the comparative readiness of the education sectors in 71 countries to respond to, manage and mitigate the impact of HIV/AIDS

Commissioned by:

UNAIDS Inter Agency Task Team on Education





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A review of the comparative readiness of the education sectors in 71 countries to respond to, manage and mitigate the impact of HIV/AIDS



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The choice and presentation of the facts contained in this publication do not necessarily represent a position of the IATT or of the Health Economics & HIV/AIDS Research Division (HEARD) of the University of KwaZulu Natal, Durban, South Africa and the Mobile Task Team on the Impact of HIV/AIDS on Education (MTT) and do not commit these Organizations.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of IATT concerning the legal status of any country, territory, city or area, or of its authorities, or concerning the delimitation of its frontiers or boundaries.

For information about IATT go to: http://portal.unesco.org/aids/iatt-education

A survey conducted by the Health Economics & HIV/AIDS Research Division (HEARD) of the University of KwaZulu Natal, Durban, South Africa and the Mobile Task Team on the Impact of HIV/AIDS on Education (MTT) for the UNAIDS Inter-Agency Task Team on Education (IATT).

The research team included:

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Joint Foreword by the Director-General of UNESCO and the Executive Director of UNAIDS

As it gathers strength, the AIDS epidemic threatens education systems in a number of important ways. The ill-health or death of educational personnel and their family members reduces the human capacity of education institutions. Enrolment rates stagnate or decline due to the effects of AIDS on children who are orphaned, required to work or care for sick relatives, or unable to go to school through increased poverty.

On the other hand, education systems everywhere are challenged to make a significant contribution to limiting the spread and effects of the epidemic through teaching, workplace policies and the creation of an environment in which the vulnerability of individuals and groups is reduced. The role of education systems in battling the spread of HIV and AIDS has been highlighted for some time. However, the response of education authorities has generally been weaker in action than in words.

The Inter Agency Task Team on HIV/AIDS and Education (IATT), created in 2002 by UNAIDS and led by UNESCO, has become a leading forum for international organizations working in HIV/AIDS and education. It has been at the forefront of several initiatives to push a scaled-up response to HIV and AIDS. Early in its existence, many members pointed out that knowledge of how education authorities were responding to the epidemic was, at best, anecdotal. Conscious of the need to avoid creating complex new data collection systems, but also of the need to have some view of the situation world-wide, IATT decided to ask ministries to report on their own policies. This would serve to stimulate national reflection on the education sector response as well as develop an official view of what is happening that could be open to scrutiny and discussion with a variety of development partners.

To this end, IATT turned to the Health Economics & HIV/AIDS Research Division (HEARD) to conceive and develop an instrument that would facilitate the conduct of a baseline survey of ministerial policies and practices, to be reported on by ministries themselves. HEARD developed an instrument that was discussed and revised in several meetings of the IATT. The survey itself was carried out over a nine-month period from March to November 2004. Thanks to financing from the Canadian International Development Agency (CIDA), a companion study was carried out during the same period by ActionAid, entitled "Education and HIV/AIDS: Strengthening Civil Society's Role". It is hoped that additional funding will enable a further survey to be conducted in 2006 that will provide a view of changes over time, and help both countries and funders to identify some key policy implications.

The results of the survey give reason for both optimism and alarm. The optimism stems from the widespread acknowledgement of HIV and AIDS as factors affecting education systems and requiring attention on the part of ministries of education. The alarm comes from the fact that, in key countries or in key areas in many countries, the level of resources and concrete action is far from adequate given the scale and character of the problem. The survey should be useful for individual countries examining their own policy responses, for benchmarking international action, and for helping civil society groups to pinpoint areas needing further attention.

Peter Piot Executive Director Joint United Nations Programme on HIV/AIDS Koïchiro Matsuura Director-General UNESCO

Acknowledgements

This document was prepared by Peter Badcock-Walters, Wendy Heard and Daniel Wilson, from the Mobile Task Mobile Task Team on the Impact of HIV/AIDS on Education (MTT) at the Health Economics & HIV/AIDS Research Division (HEARD) of the University of KwaZulu Natal, Durban, South Africa. The research team also included Chris Desmond and Marelize Gorgens with special advisors Rose Smart and Professor Michael J. Kelly. Nuria Chat from UNESCO/IIEP Paris provided significant logistical and administrative support throughout the project. Additional statistical analysis was carried out by Cathy Connolly of the South African Medical Research Council. The project was coordinated by Alexandra Draxler from UNESCO/IIEP Paris.

This report would not have been possible without the support and valuable contributions of members of the Inter Agency Task Team (IATT) on HIV/AIDS and Education who, through various meetings, made significant input to the research process and survey design.

Lastly, we are indebted to the in-country representatives from UNESCO, UNAIDS and UNICEF who agreed to facilitate the survey, ensure it was completed it in the proper manner and expedited its return to HEARD. These facilitators provided valuable feedback and we thank them for their assistance and cooperation.

Acronyms

AIDS Acquired Immune Deficiency Syndrome

CIDA Canadian International Development Agency

EFA Education For All

DEMMIS

District level Education Management and Monitoring Information

System

EMIS Education Management Information System

GCE Global Campaign for Education

GFATM Global Fund to Fight AIDS, Tuberculosis and Malaria

HEARD Health Economics HIV/AIDS Research Division, University of

KwaZulu-Natal

HIV Human Immunodeficiency Virus

HSRC Human Sciences Research Council, South Africa
UNAIDS Inter Agency Task Team on Education

IIEP International Institute for Education Planning

ILO International Labour Organisation

INSET In Service Education and Training of teachers

MRC Medical Research Council, South Africa

MTT Mobile Task Team on the impact of HIV.AIDS on Education

Number of responses

OVC Orphans and other vulnerable children

RAISON Research and Information Services of Namibia

RR Response Rate, percentage of the selected countries that

responded

SADC Southern Africa Development Community

UN United Nations

UNAIDS Joint United Nations Programme on HIV/AIDS

UNESCO United Nations Educational, Scientific and Cultural Organisation

UNICEF United Nations Children's Fund

US United States of America

VCT Voluntary Counselling and Testing

WHO World Health Organisation

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Executive Summary

This first IATT *Education Sector Global HIV/AIDS Readiness Report* is based on a groundbreaking survey of the capacity and readiness of vulnerable or affected countries to manage HIV/AIDS impact on their education systems. The survey was successful in capturing responses from 71 countries which ranged from high to medium and low HIV prevalence, based on criteria and methodology described in Part 1 of this Report. This represents a 61% response rate for the 117 countries invited to respond. In summarising data derived from the survey's 11 sections and some 108 questions, it useful to make a few preparatory comments:

First, the research process involved self-reporting and assessment, with limited external facilitation and oversight; it will be obvious that there will have been some potential for providing 'appropriate' answers and even unfounded assumptions rather than informed and accurate responses. This potential is acknowledged and indeed comment is made in a number of sections regarding what might be the recitation of Education Ministry goals, rather than recorded achievements. Additional commentary is made in the Civil Society component of this survey, in which a number of non-government organisations revisited the questions answered by Ministries and recorded often quite different responses. It is a methodological problem that reflects the tension between the need for a rapid, global appraisal to benchmark an emergency situation, and an infinitely longer, more complex and expensive process of independent, country-level research. On balance, we would contend that this survey approach has considerable value and provides sufficient of a guiding framework for immediate development agency and government response, as well as an agenda for further, perhaps more detailed, research into a number of key issues.

Second, the Education Ministry teams responding to the survey were largely drawn from the central or headquarters level, and it is clear that here too there is some margin for error in reporting activities and implementation down to the district and school levels. This issue of central policy, controls and reporting versus decentralised management, budgeting and implementation of HIV/AIDS activities permeate the survey, and in some cases country responses may seem very optimistic about achievement at lower levels of the system. This does not however suggest deliberate misreporting. There is simply a significant disconnection in many systems between central policy and planning, and practical outcomes on the ground, including the flow of accurate operational information to officials at the highest levels. This need for better monitoring, evaluation and reporting is a recurrent theme borne out by responses to this survey and suggests the issue as an urgent priority for action.

Third, it is necessary to report that a few countries refused to participate in the survey because they did not believe they had a problem, or that it was not an issue of direct concern to them. Their freedom of choice in electing not to participate is not at issue; what is of concern is the fact that a number of these are nations which generously provide resources to developing countries to help fund programs, including response to HIV/AIDS. This curious sense of security and detachment is perplexing, not least because it is common cause that those able to do so should lead by example. Perhaps more disturbing is the fact that, in 2005, any nation could imagine that it is and will remain exempt from the impact of HIV/AIDS.

Key outcomes of the survey may be summarised as follows:

1. HIV/AIDS Management Structures: Dedicated management structures to coordinate Ministry response to HIV/AIDS impact were almost universally seen to be important, with most countries (72%) reporting either the existence of such structures or

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the current development of these (7%). Significantly, 95% of high prevalence countries reported establishment of such structures, while the only country reporting that it had yet to establish such a structure added that it had a focal point person in place with Ministry support systems, but did not regard this as a committee per se. With this definitional distinction, it would be fair to say that *all* high prevalence countries have recognised the importance of such structures and sustained coordination. Interestingly, while these structures involved senior staff, only 59% of all countries and 70% of high prevalence countries had a dedicated budget, suggesting that they have some way to go to fully empower these structures.

- 2. HIV/AIDS Management Structure Representation: In terms of divisional or professional representation on these structures, most countries reported the direct involvement of Planning (76%), Finance (63%), Curriculum (85%), Human Resources (69%) and EMIS (45%). While this is pleasing, it is equally alarming to see the relatively low level of EMIS involvement, given that the key to better understanding, planning and response is accurate, relevant and timeous management information. This concern is compounded by an only slightly better level of representation in high prevalence countries (47%) and confirms that the majority of countries have not come to terms with the need to adapt and reform their management information systems. This may constitute a priority for intervention.
- 3. Dedicated Staff in the National Ministry: Only 45% of Ministries at the national level indicated that they had staff who dealt *only* with HIV/AIDS. On a more positive note, this figure rose to 95% in high prevalence countries reinforced by the fact that an estimated 84% of these were at senior level. On the question of the existence of *any* staff working on the issue as opposed to dedicated, 'HIV/AIDS-only' staff, the figure for all countries rose to 95%. While positive, this confirms that many Ministries continue to treat HIV/AIDS as a part-time problem, and fail to recognise that it is a long-term, systemic management problem deserving of full-time attention.
- 4. Financial Resources: Resources for activities other than awareness, prevention, behaviour change or curriculum development were shown to be limited. Only 43% of all countries made these available, rising to 60% in high prevalence countries. This signals that commitment of resources to managing response and even some workplace issues is still uncertain and that resourcing continues to flow as it has done for many years. Of concern is that only 79% of these resources are fully utilised every year across all countries, and that in high prevalence countries, it drops to 73%. This speaks to the continuing problem of capacity and systemic response, and raises the possibility that what dedicated staff is available is overwhelmed by an uncoordinated workload not least responding to requests for proposals and other development agency requirements.
- 5. Sourcing Finance: Interestingly for Ministries of Education, 60% of all countries rising to 80% in the case of high prevalence countries have made application to the Global Fund, although there is no information on how many of these bids were successful. In a wider context, 26% of all countries reporting said their financial resources consisted solely of donor funds, dropping to only 15% of high prevalence countries.
- 6. Sub-National HIV/AIDS Structures: 76% of high and medium prevalence countries reported having sub-national structures responsible for implementing HIV/AIDS response, defined as including for example provincial, regional, district and school levels. Of these, 83% had senior staff in place but only 24% had their own budgets, raising the prospect of limited powers at these levels; the situation was significantly better in high prevalence countries, 90% reported having sub-national structures, of which 94% had senior staff and 37% had their own budgets. This suggests the need to support the

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decentralisation of resourcing to empower local level decision-making and more rapid response.

- 7. Institutional Capacity: A very pleasing 90% of education institutions within countries, as well as in high prevalence countries, have working groups or committees that address internal and external HIV/AIDS issues. Since these committees and groups play a critical role in advocacy and building partnerships, the fact that 10% of countries do *not* have such capacity is worrying and suggests that these countries should be targeted for support at this level.
- **8.** Advocacy: Ministry of Education officials in 71% of all countries report having heard their Minister speak out publicly about the impact of HIV/AIDS on the education sector, suggesting that officials in 29% of countries have not. In high prevalence countries this figure rises to 95%, while in medium prevalence countries the figure is still positive at 73%, only dropping to 57% in low prevalence countries. This augers well for the wider process of advocacy although it should be hoped that those yet to speak may be persuaded to do so.
- 9. Management Focus: HIV/AIDS was claimed to be a standing item on the agenda of senior education management meetings in 56% of all countries, but on 80% of agendas in high prevalence countries. This is positive, provided of course there is substantive discussion and reporting on these issues, and concomitant commitment to action. In equivalent meetings of teacher unions, some 68% of countries reported HIV/AIDS as a standing item, suggesting greater concern about the issue than in similar Ministry meetings. In high prevalence countries however, the equivalent figure was 1% down on the Ministry figure although both suggest a serious engagement with the issue.
- 10. Institutional Regulations: 86% of all countries had regulations in place for schools and other education institutions to govern admissions and fees, a figure rising to 95% in high prevalence countries, declining to 79% in medium prevalence countries and climbing again to 84% in low prevalence countries. This higher level of readiness in low prevalence countries may have as much to do with the comparative capacity and resourcing of their systems as equivalent concern for impact per se.
- 11. Free Education: While a significant percentage of countries confirmed that they offer free education, this is very definitional. In the first instance, the level of education concerned was not specified in the question and many Ministries may have responded in the affirmative, while meaning that this applies only to primary education, for example; in the second, while a national Ministry of Education may claim to provide free education (primary or otherwise), many schools may still charge admission, voluntary, stationary or other fees on an ad hoc basis to ensure some measure of survival. With these caveats, it can be reported that 89% of all countries claimed to provide free education, dropping to 75% for high prevalence countries before rising again to 87% for medium and 97% for low prevalence countries.
- 12. Fee Exemption: 62% of all countries had regulations that provided for exemption from school fees for children from poor or vulnerable families. This rose marginally to 65% for high prevalence countries before declining to 27% in medium prevalence countries. Ironically the figure is highest in low prevalence countries, perhaps again reflecting the comparative strength of their economies.
- 13. HIV/AIDS Policy: The Ministries of Education have a sector specific HIV/AIDS policy in 32% of all respondent countries. This figure rises to 40% in high prevalence countries, declines to 27% in medium prevalence countries before rising again to 30% in low prevalence countries. The lack of sector specific policy in many of these countries is an issue of major concern as the specific needs of the education sector cannot be

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- adequately dealt with by a national policy framework or set of guidelines. This too, ranks as a priority issue for intervention and development. That said, Ministries that do not have a sector specific policy claim to address these issues in other policies governing the education sector in 91% of all countries declining to 67% in high prevalence, and 0% in medium prevalence countries. In low prevalence countries the figure rises to 100%.
- 14. Workplace Policy: While workplace policy is an integral component of education sector policy Ministries were asked specifically about the existence of a workplace policy relating to HIV/AIDS. 19% of all countries, 30% of high prevalence, 21% of medium prevalence, and 11% of low prevalence countries claim to have such a policy in place. Interestingly, 83% of these Ministries claimed to have involved their employees in workplace policy development, a figure declining to 67% in high prevalence and 100% in medium prevalence countries. Of these countries 64% claimed to review this policy regularly; only 20% of high prevalence countries made this claim, rising to 100% of medium and low prevalence countries, again suggesting greater capacity and resourcing.
- **15.** Rules and Regulations: In light of the impact and implications of HIV/AIDS, Ministries of Education should be reviewing many of their rules and regulations. However, only 42% of all countries claimed to be doing this, a figure rising to 56% in high prevalence countries. This may be directly linked to the lack of sector specific HIV/AIDS policy and the impetus that this would provide for the review of such regulations.
- 16. Strategic Planning: 79% of all countries confirmed the existence of an education sector HIV/AIDS strategic plan. This figure rose, as might be expected, to 84% for high prevalence countries but begs the question of why 16% of this group do not have such a plan. Again, this may suggest the need for further intervention in this area and the linkage of such planning to the more sustainable process of policy development. Of the countries that indicated the existence of an HIV/AIDS strategic plan, 96% claimed to have an action plan in place for implementation; this figure decreased to 94% for high prevalence countries and increased to 100% for medium prevalence countries. The existence of such action plans, their currency and quality might well be an area for further research and support.
- 17. Planning: At the national level HIV/AIDS was explicitly considered and reported on in the planning process in a disappointingly low 55% of all countries. This figure rose to 74% in high prevalence countries but still points to the fact that 26% of these do not explicitly consider the issue in planning.
- Information Management System (EMIS) in place. This figure declines to 84% for high prevalence countries before rising to 93% in medium prevalence countries; while these figures may seem high at face value, the fact is that every Ministry should have such a system for basic management and planning purposes, as well as to help report and monitor HIV/AIDS impact. In this regard only 43% of all countries with EMIS reported that these systems have been reviewed and amended to include HIV/AIDS sensitive indicators. This disturbingly low figure rises to a more acceptable level of 67% for high prevalence countries, but declines to 15% in medium prevalence countries. Given earlier comments about the fundamental importance of data and management information, this reinforces the need for action in this area.
- 19. District Level Planning: 56% of all countries reported considering HIV/AIDS when making district level plans. This was true of all 74% of high prevalence countries, but only of 33% of medium prevalence countries. On a related theme 47% of all countries claimed to be collecting HIV/AIDS relevant data at district level. While this seems low, operational experience suggests that this claim might in fact be somewhat exaggerated or at least definitional.

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- 20. Impact Assessment: Only high prevalence countries were asked if they had conducted an assessment of HIV/AIDS impact on the education sector, and 58% of these confirmed that they had. Of those who had not yet conducted such an assessment, 75% indicated that one was planned, suggesting that most Education Ministries in high prevalence countries will have concluded such a study in the foreseeable future. This begs the further question, unasked in the survey, of how many countries had repeated such an assessment and measured it against the baseline?
- 21. Human Resource Policies: Only 9% of all countries reported having reviewed or amended their human resource policies to minimise sector vulnerability and susceptibility to HIV/AIDS. This alarmingly low figure was offset to some extent by the claim that 26% of all countries had such a review in process. This response was equally alarming in high prevalence countries in which only 11% of countries could confirm such amendments, while 32% claimed to have such a review in process. This presents another priority prospect for intervention and technical support.
- 22. Demand and Supply Analysis: Somewhat surprisingly, 53% of all high prevalence countries (the only category asked this question) claimed to have conducted an analysis on the impact of HIV/AIDS on the demand and supply of human resources in the education sector. While it might be hoped that this level would be higher, the miniscule level of attention to amending human resource policies described in the previous point makes this a comparatively pleasing response. The fact remains, however, that 100% of countries should be conducting such analyses. In cases where these analyses have been conducted, they have prompted changes in human resource planning in *only* 15% of these high prevalence countries. This apparently low-level of change in planning must, assumedly, be based on an informed view of impact, and certainly warrants further investigation as it would seem counter intuitive.
- 23. Teacher Training: Plans to train more teachers as a result of increased teacher attrition have been made in 24% of all countries, and 26% of high prevalence countries; this figure declines to 20% in medium prevalence countries. Again this suggests the need for further investigation and research and a review of the demand and supply analyses currently in use, since this level of response seems understated.
- 24. Human Resource Monitoring: High prevalence countries were asked if the effects of HIV/AIDS on human resources were being monitored and reported. 21% of these responded in the affirmative, suggesting that 79% of countries are not monitoring or reporting these issues. Given the proportion of education budgets committed to human resources this too should be seen as an issue of major concern and prompt early intervention and activity.
- 25. Guidelines for Teachers: All countries were asked if guidelines had been developed for teachers dealing with HIV/AIDS in schools. A disappointingly low 31% of all countries confirmed that they had, but a further 47% reported that the development of these guidelines was in process. Development in high prevalence countries was somewhat worse at 21% although 53% of these reported that they were developing such guidelines. The situation was similar in medium prevalence countries with 29% developed and 57% in process. Yet again, low prevalence countries seemed to be ahead of their higher prevalence peers, with 37% having developed guidelines and a further 40% in process. 77% of those countries that had developed guidelines claimed to have distributed these with supportive training, a figure that declined to 64% in high prevalence countries; the fact that 36% of these countries acknowledge the distribution of materials in this subject area without support training is however cause for some alarm.

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- Awareness Programs: Given the levels of investment and activity described in many of these responses, it might be assumed that every Ministry had an awareness program for its employees in place at the National level. However, this is only true for 37% of all countries, but rises to 70% for high prevalence countries (with 20% more in development) and 47% for medium prevalence countries (with a further 27% in development). Only 12% of low prevalence countries have such awareness programs but 27% have these in development. Such programs were only available at the district level in 36% of all countries (with 19% in process.) This level of readiness grows to 65% in high prevalence countries (with 25% in process) and 36% in medium prevalence countries (with 21% in process), before declining to 18% in low prevalence countries Awareness programs for staff at education institutions are (with 15% in process). available in 41% of countries (with 29% in process). The equivalent figures rise to 60% (with 25% in process) for high prevalence countries before declining to 40% (with 33% in process) for medium prevalence countries and 29% (with 29% in process) for low prevalence countries. The only consolation in this respect is that the media in most countries maintains high levels of general awareness that may compensate for this lack of sectoral programs.
- 27. Prevention Programs: High and medium prevalence countries were asked if their education ministries have prevention programs in place, intended to prevent HIV infection amongst staff. 71% of these countries reported having such programs; 89% of high prevalence countries confirmed this compared with 47% of medium prevalence countries. 79% of all these programmes were claimed to be gender sensitive but 29% high prevalence countries stated their programmes were not.
- 28. Universal Precautions: Intuitively, it might be assumed that over 20 years into the impact of HIV/AIDS on education systems, universal precautions would be universally available and accessible. Alas, the development of guidelines for implementing these precautions for use by staff has only been completed in 21% of all countries, with a further 27% in process. Worse, this figure drops to 16% in high prevalence countries with 37% in process. Medium prevalence countries are little better at 21% (with 29% in process) along with much less surprisingly low prevalence countries at 24%, with 21% in process. There is little to add other than to say this should be precisely the kind of simple supportive intervention that can be quickly and easily delivered by the health and education development community.
- 29. VCT Facilities and Access: Refreshingly, 96% of all countries reported the existence of VCT facilities, with 95% in high, 93% in medium and 97% in low prevalence countries. While this tells us nothing about the distribution of these facilities, the responding Ministries claimed that Ministry employees in 86% of countries can be referred to these. Levels of access enjoyed by employees are perhaps better in well-resourced low prevalence countries (91%), employees in only 71% of medium prevalence countries can be referred, and 89% in high prevalence countries. On balance, assuming that right of referral actually means access and receipt of services, this constitutes a high level of readiness; this would however require some further definitional research and perhaps cross-referencing with Civil Society observations.
- **30.** Treatment Referral Systems: Perhaps shedding some light on the last point, referral systems to facilitate access to HIV/AIDS treatment have as yet only been established in 51% of countries (50% high and 53% medium prevalence countries).
- **31.** Non-Discrimination Policy: Respondent Ministries were asked in all prevalence categories whether they had a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS. 66% of all of these countries confirmed that they had, rising to 80% in high prevalence countries, with 54% in medium prevalence countries and 62% in low prevalence

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- countries. While this demonstrates a significant degree of readiness, it also suggests that 34% of these countries still have much to do to entrench the rights of those affected by HIV and AIDS.
- **32.** Confidentiality: Countries were asked whether confidentiality of information about Ministry employees affected by HIV/AIDS was enforced by their Ministries of Education. It is pleasing to record that 81% of all countries confirmed that this was the case, with 75% in high, 77% in medium and 85% in low prevalence countries.
- 33. Appropriate Accommodation: 15% of all respondent countries were able to confirm that where accommodation is provided by the Ministry, steps have been taken to ensure that it is appropriate for the needs of employees affected by HIV/AIDS. 11% of high, 13% of medium, and 18% of low prevalence countries confirmed this situation, suggesting again that low prevalence countries might be better resourced to deal with such issues.
- **34.** Condom Distribution: On the question of accessible outlet points within or in the vicinity of the workplace for the free distribution or purchase of condoms, 65% of all countries confirmed their state of readiness. This was slightly higher for high (70%) and low (71%) prevalence countries, but was significantly lower at 47% for medium prevalence countries.
- 35. Life Skills: Ministries were asked if life skills programmes had been established at the primary level: 84% of these confirmed that this was the case with 85% in high, 80% in medium, and 86% in low prevalence countries. This high state of readiness was repeated at the secondary level where 83% of all countries had programmes in place; 75% in high, 80% in medium, and 89% in low prevalence countries. There was an equally high confirmation of readiness in respect of life skills programme issues relating to gender, at 84% for all countries. This constituted a level of 80% in high and medium prevalence countries, and 88% in low prevalence countries.
- **36.** Curriculum: 79% of all countries confirmed that they addressed the issue of HIV/AIDS in the curriculum at the primary level. It is satisfying to report that this was at a 95% level of readiness in high prevalence countries, and 87% in medium and 66% in low prevalence countries. This trend improved at the secondary level with 89% across all countries, peaking at 90% in high prevalence countries; the rate was similar at 87% in medium and 89% in low prevalence countries.
- **37.** Support Materials: Respondents were asked whether support materials had been developed which addressed life skills and HIV/AIDS issues at the primary level. 71% of all countries confirmed this development, a level rising to 80% in high prevalence countries and declining to 47% in medium prevalence countries, before rising again to 76% in low prevalence countries. At the secondary level, readiness was slightly lower at 69% across all countries but declined significantly to 60% in high prevalence countries. The level was 50% in medium and 82% in low prevalence countries.
- **38.** Orientation Programmes: On a related issue, countries were asked if orientation programmes had been undertaken for teachers in life skills and HIV/AIDS in schools. 49% of all countries confirmed that they had, rising to 60% in high prevalence countries. Only 33% of medium prevalence countries could confirm this situation, rising to a level of 50% in low prevalence countries.
- **39.** Parental Orientation: It is disappointing to report that in the important area of orientation for parents, regarding life skills programmes in schools, only 29% of all countries confirmed their readiness; however a further 33% confirmed that development

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- of such programmes was in process. 30% of high prevalence countries reported that these programmes were in place and another 20% reported they were in process. At medium levels of prevalence, 13% reported programmes were in place, with 33% in process, and in low prevalence countries 34% reported readiness with 40% in process.
- **40.** Religious Leaders: Countries were asked whether efforts had been made to ensure that religious leaders supported the HIV prevention approach adopted by the Education sector, its message and materials. 64% of all countries indicated that these efforts had been made, with 65% of high and 80% of medium prevalence countries confirming these steps. In this instance lower prevalence countries were less proactive at 56%.
- 41. Tertiary Sector: 52% of all countries reported that HIV/AIDS materials were available to all students within the tertiary sector. This comparatively low level of readiness was echoed in high prevalence countries where only 50% could confirm availability, but the situation was far worse in medium prevalence countries, in which only one third (33%) of these had made such materials available. The highest levels of readiness were in low prevalence countries at 62%, again emphasising their comparative resourcing and capacity bias.
- 42. Teacher Training: Central to any HIV/AIDS response is the professional preparation of all new teachers. Countries were asked whether HIV/AIDS and life skills were integral components in the teacher training curriculum. 63% of all countries said they were, rising to 78% in high prevalence countries but declining to 47% in medium prevalence countries. 62% of low prevalence countries were able to confirm these provisions, but it remains a cause for concern that a significant percentage of countries have not risen to this central challenge.
- 43. Tertiary Curricula: On a related theme, countries were asked whether their university and tertiary institution curricula had been adapted to include subject-specific HIV/AIDS issues. Levels of compliance across countries were disappointingly low at 41%; 47% of high prevalence and only 33% of medium prevalence countries confirmed that curricula had been adapted. This failing poses a serious challenge for tertiary authorities, Education Ministries and their development partners, but given the comparative scale of the sector, it's problems should in principle be easier to address than those of the very much larger basic education sector.
- 44. Monitoring Prevention Messages: Also disturbingly low were levels of readiness in response to the establishment of systems to monitor the success of HIV/AIDS prevention messages throughout the education system. Perhaps this is not surprising given the difficulty of monitoring implied behaviour change, but the results suggest that little effort has been made in this regard. Only 20% of all countries claim to have established such monitoring systems, 16% in high, 7% in medium, and 29% in low prevalence countries.
- **45.** Out-of-School Youth: Countries were asked whether efforts had been made to include out-of-school youth in life skills and HIV/AIDS awareness efforts. Perhaps the somewhat loose framing of this question permitted a large percentage of countries to respond in the affirmative. However, countries were simply asked whether 'efforts' had been made, and 75% of them confirmed they had. Of this group, 63% of high, a surprising 87% of medium, and 77% of low prevalence countries confirmed that such efforts had been made.
- **46.** OVC: Ministries were asked whether they had programmes to address the needs of orphaned and vulnerable children in the education system. It should be noted that the question addresses those children *in* the system and not outside it, suggesting that levels

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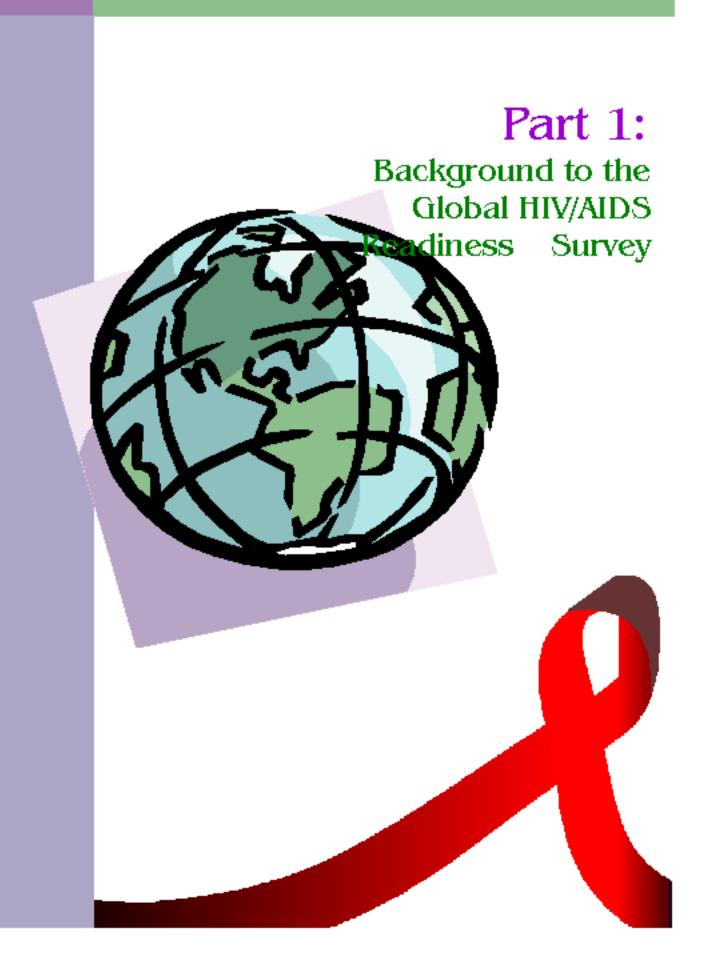
of readiness could or should have been higher than reported. In the event only 30% of all countries confirmed existence of such programmes, but a further 26% stated they were in process. In high prevalence countries, 40% confirmed such programmes and another 30% indicated they were in process. Only 13% of medium prevalence countries had programmes in place, with another 40% in process; 32% of low prevalence countries said the same with 18% in process. The number of countries with programmes in process suggests recognition of the importance of the issue and also that this might constitute a priority intervention for development agency support and technical assistance.

- **47.** School Feeding: Countries were asked whether there is currently a school feeding scheme in place; clearly the question allows for some ambiguity in response in respect of scale and depth but 73% of all countries confirmed this. 70% of high, 67% of medium, and 77% of low prevalence countries all indicated that there is currently a scheme in place. It would be important to interrogate this position in every country and ascertain the full extent of these schemes, their reach and sustainability; this might constitute an issue for further research and action.
- **48.** Caring for Infected Pupils: Countries were asked whether teachers had received training in caring for infected pupils. Only high prevalence countries were asked this question, of which only 25% were able to confirm that their teachers had received such training. Taken together with the paucity of guidelines on universal precautions reported above, this suggests a major failing in country system readiness.
- **49.** Counselling Services: Only 38% of all countries were able to confirm that counselling services, by trained counsellors, were available at most or all schools at the primary level. This situation was somewhat worse in high prevalence countries at 25% and medium prevalence countries at 27%; the average across all countries was inflated by a 50% level in low prevalence countries. This issue raises the question of whether the problem lies in the supply of trained counsellors or in the commitment of ministries to fund and develop counselling services; whichever the case, this constitutes a challenge for the education system. At the secondary level the situation is somewhat better but levels are still dangerously low: 44% of all countries provide such services, 35% in high, 27% in medium and 58% in low prevalence countries.
- **50.** Partnership: Countries were asked if they had made an effort to identify possible partners for the fight against HIV/AIDS within the education sector. With the caveat that the question was about effort as opposed to success, it is pleasing to report that 94% of all countries confirmed this. This included 95% of high, 100% of medium, and 91% of low prevalence countries.
- 51. Education Sector Strategy: 94% of countries confirmed that they have a shared strategy for the fight against AIDS. Only high (100%) and medium (85%) prevalence countries were asked this question, but it appears to support the view that Ministries of Education are moving beyond their comfort zones to engage their development partners within the sector.
- 52. Multi-Sectoral Response: Education Ministries were asked if they involved other government agencies or Ministries in their fight against HIV/AIDS. It is gratifying to report that 99% of all countries responded in the affirmative. 100% of high, 93% of medium and 100% of low prevalence countries confirmed their multi-sectoral relationships and commitment. 79% of high and medium prevalence countries involved the private sector; 99% of all countries involved NGOs and 73% of all countries involved faith-based organisations and religious groups. This is important evidence of the shift from a single-sector approach to growing reliance on strategic partners for advocacy, delivery, support and technical assistance.

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53. Research: Countries were asked whether a research agenda had been defined, that prioritised gaps in knowledge are the impact of and response to HIV/AIDS within the education sector. Predictably there were low levels of agreement in evidence, with only 38% of countries confirming such an agenda. This was highest, appropriately, in high prevalence countries at 50%, but was only at 27% in medium, and 35% in low prevalence countries. These countries were also asked whether any research had been commissioned to inform the education sector response to HIV/AIDS. While the rate for all countries was also at a low of 46%, it climbed to 70% in high prevalence countries, 40% in medium prevalence countries, and stayed constant at 35% in low prevalence countries.

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1

Introduction

Project conception

"In education it can no longer be business as usual – it can no longer be education as usual. Education can never again be the same. Its overall purpose – to prepare individuals to live harmoniously, constructively and happily as members of local, national and international communities – remains unchanged. But the ways of achieving this purpose in a world with AIDS are very different from what they were in a world without AIDS".

Prof Michael J Kelly

University of Zambia (ret) and Mobile Task Team on the Impact of HIV/AIDS on Education (MTT)

C'social vaccine'. Indeed, there is growing, even overwhelming evidence, that retention within a functional education system - ideally of the kind envisaged in EFA - will provide the quality of education and skills development necessary to reduce or eliminate sexual and lifestyle risk. This strongly suggests that the cognitive and literacy skills required to make informed choices in respect of HIV/AIDS risk and behaviour change, are substantively based on levels of education and literacy¹. Indeed, the Global Campaign for Education stated in 2004 that the general cognitive and social gains from a basic education are the most important factor in protecting adolescents and young adults from infection.

Education also contributes towards restricting the very conditions that assist the spread of HIV/AIDS: poverty, ill health, violence and abuse. Education has a crucial role to play in the mitigation of the impact of HIV/AIDS and in limiting the spread of HIV. Thus the importance of education and the urgency of an educational response means that more needs to be known about what works and why. Many Ministries of Education have already initiated a significant level of response and it is important to review what has been done to date and also to consider what impact this has had.

The UNAIDS Inter-Agency Task Team on Education and HIV/AIDS (IATT) aims to act as a catalyst for the exchange of information about what is known, what is available and what still needs to be learned about how education can mitigate the effects of the HIV/AIDS crisis, thus reducing vulnerability and impact. For these reasons, the IATT elected to conduct a global review to capture and calibrate qualitative and quantitative information on the state of readiness of the education sectors of those countries most at risk, to respond to, manage and mitigate the impacts of HIV/AIDS. The IATT therefore commissioned the first *Education Sector Global HIV/AIDS Readiness Assessment Survey*, to be conducted amongst a sample of the world's most HIV-vulnerable countries, in order to:

- Assess countries in terms of readiness and response capacity
- Analyse vulnerability/need in order to guide development agency support and activity, and
- Establish a benchmark for countries, on the basis of low, medium and high prevalence, for the regular updating of this information.

An additional benefit of the survey was seen to be the advocacy and learning process of completing the survey and it was anticipated that the participating countries would use the survey to:

- Help education sector personnel to conceptualise the wide range of HIV/AIDS impact issues
- Develop a checklist of issues to be flagged and identify problem areas or omissions
- Guide strategic planning and help develop and prioritise action plans.

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The Health Economics & HIV/AIDS Research Division (HEARD) of the University of KwaZulu Natal (South Africa), was commissioned to undertake the survey at the beginning of 2004, and established a technical survey team for this purpose.

Proposed methodology

The survey was intended to be conducted amongst the 100 countries most at risk of HIV/AIDS, based on UNAIDS published prevalence data. Since prevalence rates vary considerably amongst this group, it was felt that they should be segmented into three groups according to HIV prevalence, with slightly different survey instruments being used in each case.

The survey was developed as an electronic instrument in Excel with embedded comments providing guidelines for completion. It was suggested that it be available in five languages: English, French, Portuguese, Russian and Spanish. It was further recommended that, for a survey as wide ranging and logistically complex as this, in-country facilitation be requested. Fortunately, UNESCO, UNICEF and the UNAIDS Secretariat agreed to request their education personnel to provide the support necessary to facilitate the survey.

Within each Education Ministry, a small but senior team (3 to 4) of officials was proposed to work together to complete the survey form, facilitated by an IATT representative. Once completed, the method of return of the survey form was via email, within 30 days of receipt. A signed hardcopy was also requested, signed by a senior official empowered to sign on behalf of the Ministry.

The survey form

Design Process

The survey form was originally conceived as a series of Yes/No questions, grouped into themed sections, designed to be completed electronically. The main impetus for the survey design came from the Rapid Assessment Framework used by the Southern African Development Community (SADC), adapted and refined by the Mobile Task Team on HIV/AIDS Impact on Education (MTT) for use across Africa. The initial list of questions was derived from the work of Rose Smart and Michael Kelly, both MTT members; these were provided to a review team for comment. The questions were also segmented for use in different country HIV-prevalence settings, since it was felt that not all questions would be pertinent in medium and low prevalence countries. The review team was therefore asked to consider the inclusion and exclusion of questions for different prevalence levels.

A key issue during the survey design process was whether or not the proposed list of questions was sufficient to judge a country's state of readiness, given different prevalence levels. The idea was to ask as few questions as possible to limit response fatigue, whilst still assuring the capture of enough data to make a reasonable assessment. It was also acknowledged from the outset that the format might limit the capture of important nuances and grey areas. However it was agreed that the purpose of this first survey was to establish a benchmark that could be applied universally and to confirm conclusively whether Education Ministries had taken certain key steps. This would open the way to follow-up surveys to track change and help set a research agenda to investigate certain of the more complex issues arising. The focus of the survey was thus specifically on issues of readiness and not on the degree of implementation.

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The first version of the survey consisted of 88 questions, which were divided into 8 themed sections as follows:

- 1: Ministry of Education HIV/AIDS structures
- 2: Enabling environment for an effective response to HIV/AIDS
- 3: HIV/AIDS mainstreaming
- 4: Workplace HIV/AIDS programmes
- 5: HIV/AIDS and curriculum
- 6: Responses aimed at the infected and affected
- 7: Partnership development
- 8: Research guiding the response to HIV/AIDS

The feedback from the review team suggested that the proposed list of questions was very comprehensive, but some changes were recommended. A number of questions were modified so that they addressed HIV/AIDS issues and the education sector more specifically. It was also agreed that some questions were subjective; for example: Do political leaders show commitment to the proactive management of HIV/AIDS within the Education Sector? In these cases the questions were revised to cite specific actions that could be used to measure issues such as commitment or resolve. Three questions were identified as focusing on more than one issue simultaneously, and these were split into separate, discrete questions.

It was also noted that terms such as *Education Sector* and *District*, which were used throughout the survey, would need to be clearly defined in order to avoid ambiguous responses and misunderstandings. A Guide to Completing the Survey was therefore produced which defined all key terms and provided further explanation and clarification of many of the guestions².

The survey form was also presented to survey design specialists at the Human Sciences Research Council (HSRC) in South Africa. One of their observations was that there was a 'positive response bias' in that all questions were of the Yes/No type, with the implication that 'Yes' was the preferred (or correct) answer. It was felt that this pattern in the survey might encourage some respondents to simply tick all the 'Yes' boxes without really interrogating what the question was asking, and considering their answer in full. To obviate this potential problem, a series of sections were changed to questions of True/False type and a few were framed in the negative; for example:

5.2 As yet there are NO plans to train more teachers as a result of increased teacher attrition due to AIDS (True / False)

It was subsequently recognised however that the few questions that were placed in the negative might cause some confusion (particularly once translated into other languages) so this practice is unlikely to be continued in follow up surveys. This is one of several important lessons learnt in this first *Education Sector Global HIV/AIDS Readiness Assessment Survey*, all of which will be reviewed ahead of the planned follow-up survey.

Piloting

The draft survey form was piloted with Education Ministries in two countries: Namibia and Jamaica. In the case of Jamaica, Mr Michael Morrissey (Senior Education Consultant, UNESCO, Caribbean) acted as in-country facilitator, and in Namibia, Dr John Mendelsohn (RAISON, Namibia) performed this role. Their function was to contact the Ministry of Education concerned, set up a meeting with an appropriate Ministry team, observe the survey completion process and provide written feedback to the survey designers.

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It was proposed that the Ministry team tasked to complete the pilot survey should optimally consist of up to 5 persons: It was suggested that these should include the HIV/AIDS focal point person (if one existed), the heads of planning, EMIS/data and analysis, and human resources – as well as an additional senior manager. The intention was also to test the viability of the electronic instrument: The survey was to be completed on-screen, based on an annotated Microsoft Excel template, with a series of Yes/No and True/False questions.

The pilot exercise was successful with neither country experiencing any difficulty completing the electronic instrument. Comments on the survey completion process were positive: It was also noted that even though the survey actually took less than two hours to complete, it initiated a lengthy dialogue amongst team members, since it represented a checklist of issues for the Ministry to consider. Comments included:

"... the Ministry has until recently not 'mainstreamed' HIV/AIDS responses, but in the past half year senior officials have been exposed to several workshops and activities which made the 'climate' for responding to the instrument more 'conducive' than it may have been 12 months earlier – i.e. MOEYC senior officials had already begun to recognise the relevance of the questions even if, as yet, their responses individually may have been minimal³."

Another key observation concerned the difficulty of dealing with issues that were underway (in process) but not yet complete:

'The officials were concerned that Yes/No responses to certain questions did not allow them to demonstrate that there was work in progress, even though they recognised that there was far to go for activities to be generalised⁴.'

and

It was difficult to draw a line between a "Yes" and a "No" as most of the things are to an extent halfway done⁵.'

It was therefore agreed that several questions be modified to include a third 'in process' option that allowed countries to indicate that significant steps had been taken. This was designed to recognize situations where Ministries had taken substantive steps towards the realization of some goal and that work was in progress.

Both pilot countries raised concerns about the wording of some questions: Several were identified as lacking in clarity and were subsequently refined by the design team. Additional clarification was also requested for some of the terminology used in the survey, which was subsequently added to the Guide to Completing the Survey. Finally, it was observed that the self-assessment section of the survey (where Ministries were asked to rate themselves) was not easy to complete owing to its highly subjective nature, although its role as a useful policy dialogue tool was understood. All these issues were addressed as far as possible in the review of the survey before taking it to scale.

Input from IATT

Following the pilot survey, the IATT were invited to comment on the form and to suggest improvements or modifications. Once again, the feedback was comprehensive and useful.

On the subject of gender issues it was recognized that more attention was required to the language and questions in the survey form, particularly to ensure that it was possible to

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derive some measure of gender disaggregation in the analysis. However it was pointed out and was noted that the survey aimed to seek responses on systemic capacity; on this basis the emphasis was on ensuring that attention to the gender issue was flagged as part of Ministry's of Education's systemic response.

On workplace issues it was suggested that the International Labour Organistaion (ILO) be contacted for discussion. Following discussions with and input from the ILO, a list of additional questions were identified and added to Sections 3 and 6 of the survey form as follows:

Enabling Environment:

The Ministry of Education has a workplace policy relating to HIV/AIDS (True/False)

If true: Were Ministry employees involved in the development of the HIV/AIDS

workplace policy? (Yes/No)

If true: Is the policy regularly reviewed? (Yes/No)

Workplace HIV/AIDS programs:

Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS? (Yes/No)

Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? (Yes/No)

Where accommodation is provided by the Ministry have steps been taken to ensure that it is appropriate for the needs of Ministry employees affected by HIV/AIDS? (Yes/No)

Do you have accessible outlet points within or in the vicinity of your workplace for the purchase or free distribution of condoms? (Yes/No)

The opportunity for Ministries to rate themselves (self-assessment and prioritization) was welcomed. It was noted that the intention was to gain an understanding of how Ministries rated their state of readiness in relation to nine key areas of response. Three questions were included in this new section. The first asked Ministries to rank themselves on a scale of 1 to 5, where 1 = low and 5 = high in each of the designated priority areas. The second question required Ministries to rank the importance of funding different activities (using a scale of 1 to 9) and the final question required them to rank these in terms of importance of receiving technical assistance.

Concern was raised on the issue of ranking affected/vulnerable countries. It was understood and agreed that no ranking would be involved, per se, in the analysis or publication that would prejudice or disadvantage any respondent country. However, it was accepted that the use of maps and spatial analysis to show comparative circumstances could be very effective and objective.

As a data verification check, it was proposed that Ministries be asked to ensure that the full name and title of a senior official who was empowered to sign on behalf of the Ministry be included on Page 1 of the Survey Form. The instructions on the form subsequently asked to them to print out a hardcopy of the completed form, ensure that the senior official concerned signed it and then post it to HEARD at the University of KwaZulu-Natal in South Africa.

Finally, it was noted that it would be important to list a set of professional or divisional profiles that together would constitute an ideal 'Ministerial committee' to respond to the survey. This was already contained in the Guidelines to Completing the Survey, but these were reviewed to make sure the message was adequately conveyed.

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Language Issues

The final approved survey form consisted of 11 Sections and 108 questions. With the agreement of the Inter Agency Task Team (IATT) on Education and the assistance of the International Institute for Education Planning (IIEP) (UNESCO) in Paris, the survey form was translated into Spanish, Russian, Portuguese and French. Since the form was to be completed electronically, all five versions of the form were integrated into one Microsoft Excel document, which could be emailed to in-country facilitators. Each of the languages was linked in the survey so that it was possible to view the responses in any language, irrespective of which language it had been completed in. Minimal typing and Microsoft Excel skills were required to enter responses, since the majority of questions had toggle buttons that simply needed to be clicked.

It was agreed by the IATT that every country should receive an English-language survey instrument as well as a translation. This would cover the monitoring/oversight of the IATT country representative where they were not completely fluent in the local language and thus ensure transparency.

Methodological issues

Selection of Countries

The project was originally conceived of as an Education Sector Survey of the 100 countries considered most at risk from HIV/AIDS. Since it was unlikely that all 100 selected countries would complete the survey (due to complications arising from political turmoil, warfare, natural disasters, organizational difficulties or refusal to participate, for example), a decision was taken to increase the number to 110 countries to allow for survey attrition and maximize the chances of receiving 100 responses.

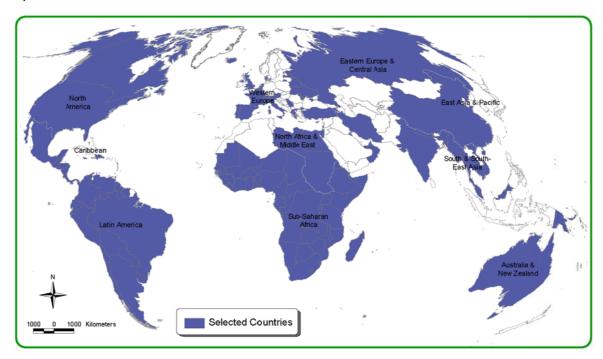
The selection of these countries was based on UNAIDS-reported adult (15-49) HIV prevalence rates for 2001⁶, since this was a commonly available and widely acknowledged data source⁷. The selection methodology was relatively straightforward: Countries were ranked from high to low according to their reported adult HIV prevalence rate for 2001 and the top 110 were selected. At the high end of the prevalence scale, countries immediately identified themselves for selection - there were 25 countries with adult rates of 5% and above in 2001. An additional 26 countries with reported prevalence rates of between 1% and 5% were then added to the selection. The remaining 59 countries in the original sample comprised those with a prevalence of less than 1%. Of these, 53 had reported rates of between 0.05% and 1.0%. The final six countries that made up the initial sample were comprised of countries where no UNAIDS estimates were available for 2001 but the where 1999 estimates warranted their selection. These included countries such as Liberia, Djibouti and Gabon.

When the proposed selection of 110 countries was presented to the IATT Steering Committee, a comment was made that it might appear 'geographically biased' and that some regions, particularly the Middle East, were under-represented. While it was acknowledged that this was to be expected, given the geographic specificity of the epidemic and its concentration in Sub-Saharan Africa, it was agreed that further revisions would be made. In the event, to accommodate a greater geographic spread, five additional countries were added to the sample as follows: China, Egypt, Iran, Israel and Turkey. Two more additions were made: The Civil Society group, which was conducting a parallel study of 19 of these

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countries, asked for Bolivia to be added, as it was one of the 19 countries they had selected; the second was Scotland, which submitted a separate survey form from England and Wales.

The final sample therefore consisted of 117 countries, the distribution of which appear in the map below:



Map 1. Distribution of countries selected for Education Sector Global Readiness Survey

Segmentation of Countries by Prevalence

It has already been indicated that the selection of participating countries in the survey was based on UNAIDS-reported HIV prevalence rates for 2001. These rates varied from a high of 38.8% in Botswana to a low of 0.05% in Egypt, Iran and Turkey. There was clearly a huge variation in the scale and impact of the HIV/AIDS epidemic from country to country and a corresponding variation in the measures that countries could be expected to undertake to ameliorate this impact. The affects on education sectors in countries with adult prevalence rates above 20%, for example, are likely to be far more severe and wide-ranging than in countries where rates are below 1%; as a consequence, we would expect to see quite different and significantly more extensive attention to planning and policy issues in the former than the latter. The concept of education sector 'readiness' is therefore context specific and the questions required to judge a country's readiness will vary, given quite different prevalence levels and resultant circumstances.

Given this situation, it was felt that a survey form that asked the same questions of every country would not be satisfactory – it ran the risk of either not providing sufficient detail for high prevalence countries (through focusing on generalities only) or of asking questions relating to issues that would be considered irrelevant or too specific in low prevalence countries (with the attendant risk that countries would not respond to the survey). A decision was therefore taken to segment the 117 countries into *three* prevalence categories and to use slightly different survey forms in each case. The general principle was to ask as few questions as possible, whilst still being able to make a reasonable assessment of education sector readiness.

High prevalence countries were defined as those that had a reported adult HIV prevalence in 2001 (or 1999 in the case of six countries) of 6% or more, yielding a total of 24 countries.

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Medium prevalence countries were defined as those have an adult HIV/AIDS prevalence in 2001, 1999 or 1997 of between 2% and 6%, a category that included 23 countries. Low prevalence countries had a prevalence of below 2% and above 0.05%, a category that included 70 countries. This segmentation of these bands is illustrated in the table below, which shows clearly that the majority of the countries in the survey were classified as low prevalence:

Prevalence Category	Reported UNAIDS adult HIV prevalence rate	Number and percentage of Countries
High prevalence	6% or more in 2001 or 1999	24 (21%)
Medium prevalence	Between 2% and 6% in 2001, 1999 or 1997	23 (20%)
Low prevalence	Between 0.05% and 2% in 2001 or 1999	70 (59%)

Table 1. Categories used to segment countries by prevalence

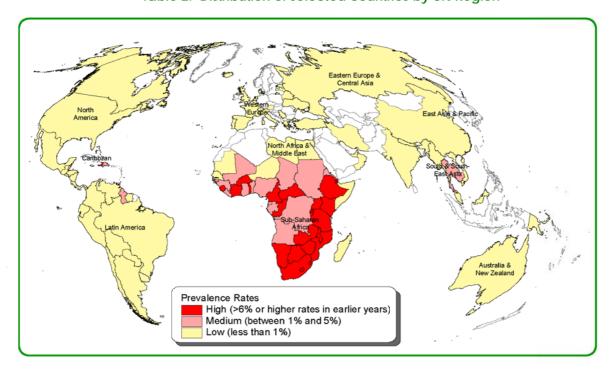
It is recognized that this segmentation is different to that used by the World Health Organisation (WHO) which currently classifies HIV epidemics in terms of 'low', 'concentrated' and 'general'⁸. 'Concentrated' epidemics refers to countries with prevalence rates of over 5% in any sub-population at risk such as drug injectors, sex workers etc. 'Generalised' epidemics refers to cases where HIV is over 1% in the general population and 'low' epidemics denote countries where relatively little HIV is measured in any group.

The table and map below shows the distribution of selected countries by prevalence and UN Region. Not surprisingly, Sub-Saharan Africa accounts for the bulk of both the high and medium prevalence countries (23 out of 24 and 14 out of 23 respectively), with the remaining high-prevalence country in the Caribbean. Thereafter, amongst medium prevalence countries, the Caribbean accounts for four countries and South and South East Asia and Latin America two each. Low prevalence countries are distributed amongst all regions but particularly Western Europe, South and South East Asia, Latin America, Eastern Europe and Central Asia.

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		Prevalence		
UN Region	High	Medium	Low	Total
Australia & New Zealand	0	0	1	1
Australia & New Zealand	0%	0%	100%	100%
Caribbean	1	4	1	6
Caribbean	17%	67%	17%	100%
East Asia & Pacific	0	0	2	2
Last Asia & Facilic	0%	0%	100%	100%
Eastern Europe & Central Asia	0	0	7	7
Lasterii Europe & Centrai Asia	0%	0%	100%	100%
Latin America	0	2	18	20
Laun America	0%	10%	90%	100%
Horth Africa & Middle East	0	1	9	10
	0%	10%	90%	100%
Horth America	0	0	2	2
	0%	0%	100%	100%
South & South East Asia	0	2	8	10
South & South Last Asia	0%	20%	80%	100%
Sub-Saharan Africa	23	14	6	43
Sub-Salialali Allica	53%	33%	14%	100%
Western Furane	0	0	16	16
Western Europe	0%	0%	100%	100%
Total	24	23	70	117
Total	21%	20%	60%	100%

Table 2. Distribution of selected countries by UN Region



Map 2. Distribution of countries by Adult HIV Prevalence rates (2001) and UN Region

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High prevalence countries were asked to complete a survey consisting of 11 sections and 108 questions. A copy of this survey form is shown in the Appendix. Medium and low prevalence countries completed forms that were subsets of the high prevalence form – the bulk of the questions remained the same, but in certain cases less detail was asked for. For medium prevalence countries, 8 of the questions pertaining to high prevalence situations were removed. Low prevalence countries completed a reduced version of the medium form in which a total of 27 questions were removed.

There were therefore 73 questions that **all** countries had to respond to, which are reported on for all three prevalence levels in the summary. An additional 27 questions pertained only to medium and high prevalence countries and 8 questions to high prevalence countries only. The survey findings clearly state which questions pertain to all three prevalence levels and which are selective. Some examples of the differing level of detail in the survey questions are shown in the table below:

Question	In High Prevalence Survey Form	In Medium Prevalence Survey Form	In Low Prevalence Survey Form
2.1 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes	Yes	Yes
6.2 Does the Education Ministry have a prevention programme aimed at preventing HIV infections among staff?	Yes	Yes	No
8.3 Have teachers received training in caring for infected pupils?	Yes	No	No

Table 3. Examples of variations in the content of survey forms for high, medium and low prevalence countries

Who responded, who didn't and why?

Of the 117 countries that survey forms were sent to, 71 responded, representing a response rate of 61%. The response rate varied by prevalence level, with the best response found amongst high prevalence countries. Of the 24 high prevalence countries selected, a total of 20 responded, representing a response rate of 83%. Of the 23 medium prevalence countries selected, 15 responded (65%), and of the 69 low prevalence countries selected, 37 responded (53%).

These response rates are summarized in the table below.

Prevalence	Countries Selected	Countries Responding & Response Rate (%)	Countries Refusing to Participate
High prevalence	24	20 (83%)	0
Medium prevalence	23	15 (65%)	0
Low prevalence	69	37 (53%)	4 (6%)

Table 4. Survey response rates for high, medium and low prevalence countries

Response rates also varied by geographical region, the worst being from Western Europe, where only 5 out of the 15 selected countries completed a survey and several actually

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refused to participate. The response from selected countries in Sub-Saharan Africa and Latin America was however very encouraging. The table below shows the distribution of the returned surveys by UN region and prevalence:

		Prevalence			
UN Region		High	Medium	Low	Total
Australia & New Zealand	N			0	0
	RR (%)			0%	0%
Caribbean	N		2	1	3
	RR (%)		50%	100%	50%
East Asia & Pacific	N			2	2
	RR (%)			100%	100%
Eastern Europe & Central Asia	N			7	7
	%			100%	100%
Latin America	N		1	11	12
	RR (%)		50%	61%	60%
North Africa & Middle East	N		1	5	6
	RR (%)		100%	56%	60%
North America	N			0	0
	RR (%)			0%	0%
South & South East Asia	N		2	3	5
	RR (%)		100%	38%	50%
Sub-Saharan Africa	N	20	9	2	31
	RR (%)	87%	64%	33%	72%
Western Europe	N			5	5
	RR (%)			31%	31%
Total	N	20	15	36	71
	RR (%)	83%	65%	51%	61%

N = Number of Responses from selected countries

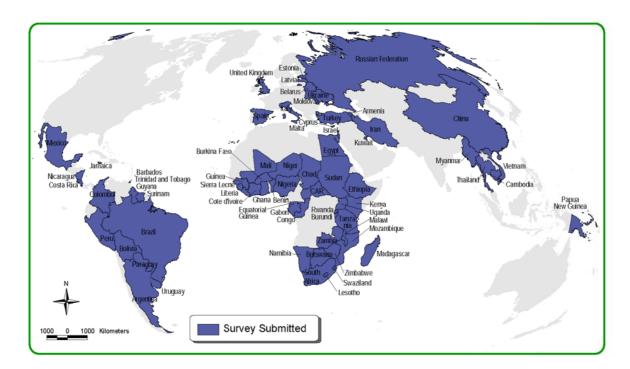
RR (%) = Percentage of selected countries in UN Region and Prevalence Category that responded

Table 5. Response rates by UN Region and prevalence level

One particularly prompt response was received in the same month that the survey was sent out (Latvia) but most countries took a few months to respond and, in some cases, required some persuasion on the part of in-country facilitators and the IATT coordinator. By the end of June (three months after the forms were sent out), only 36 countries had responded and a decision was taken to undertake the labor intensive process of contacting countries individually, and also to extend the deadline for submission of forms. This has meant a gap of seven months between when the first forms were submitted and the last, a delay which affects the currency of some of the information provided, but which, in the event, was unavoidable.

The final distribution of the 71 countries that responded in illustrated in the map below:

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Map 3. Distribution of countries that had submitted a survey form as at November 2004

Quality of Responses

The quality of responses varied from cases where only one section in the form was completed (in this case not counted as a returned form) to where a completed form was submitted, together with notes arising from the meeting and a covering letter from the Ministry. All of the observations and comments that were submitted were extremely useful, and in fact very positive.

It was observed that high prevalence countries tended to respond in more detail and were more likely to provide supporting information when returning survey forms. This was presumably because many of the issues identified in the survey were current and under consideration.

Some countries elected to leave certain questions blank rather than respond 'Yes' or 'No'. It was not clear whether this was due to the perceived irrelevance of the question, lack of information on the part of the respondent or a reluctance to indicate that a particular measure had not been taken. There was an average of 2 non-responses per question, which out of 71 respondents is a non-response rate of three percent.

Another occasional problem was a failure to follow skip patterns in the questions in form of "If yes, answer the following question:". In all cases the analysis sub-selected the results based on a positive response to the proceeding question and reported on these only.

The section on Education System and Statistical Indicators in the form was not completed as well as the other sections. This section of the survey required ministries to provide basic education and statistical indicators for their country. Twelve countries for example were unable to indicate what percentage of total government expenditure was on education. Seventeen countries were. Ten countries did (or could) not state how many primary school teachers they had.

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This may have been a reflection on the composition of the team completing the survey (it may have lacked a representative from EMIS/Statistics and not had the data to hand) or an indication of the poor state of EMIS and information systems in some countries.

In the field

Use of Facilitators

'.... I recommend that implementation globally include a local "external" facilitator from a cooperating/concerned agency ... This "external presence" helps (i) to get the four officials round the table and keep them there despite other urgent demands on their time, (ii) to keep the meeting on track and take decisions, and (iii) to assist with explanations and interpretation.

Although it was intended that the survey be self-administered by Ministries of Education, it was strongly felt that in-country facilitation (by the coordinating/cooperating agency concerned) would be needed to introduce the survey to Ministries, to ensure that senior officials completed it in the proper manner and to expedite its return to HEARD. A set of guidelines were subsequently developed for facilitators that stated the intended purpose of the facilitation.

The facilitators were also provided with a covering letter to be forwarded to the Ministry's Permanent Secretary as a means of introducing the survey. It was emphasized that this process could also be supplemented by utilising existing contacts within the Ministry as well as knowledge of local protocol.

It was agreed by the IATT that UNESCO representatives would be well placed to perform a facilitation function and a list of in-country representatives and their email addresses were subsequently provided to the survey team. These representatives proved invaluable in facilitating the survey and in many cases went to great lengths in difficult circumstances to ensure that it was completed (Liberia being a case in point). In cases where UNESCO representatives were not available, or unable to assist, UNAIDS and UNICEF stepped forward to provide valuable support and assistance, with support at the highest levels. In some cases however, it took several months to identify an appropriate representative to facilitate the survey at country level, which was the principal source of delay in the survey process. The survey team would like to acknowledge all the valuable support and assistance that was offered and provided by UNESCO, UNAIDS and UNICEF representatives.

A final comment made in the Guidelines for Facilitators concerned the need to allay countries fears that the survey results would be used to rate or rank them:

'The questionnaire/response process provides a checklist of appropriate actions to manage and mitigate HIV/AIDS impact and therefore constitutes a useful learning experience. It should be emphasised however that the list is illustrative and not prescriptive and that the survey results will not be used to 'rate' or 'rank' countries in a negative sense. The results will be used as a means of identifying readiness and appropriate levels of support and prioritised needs'¹⁰.

Documentation

An introductory email was sent out from the IATT, in English and French, to identified UNESCO and UNAIDS country representatives in February and March 2004. This email

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explained that the purpose of the survey was to develop a Global Research Report on the comparative readiness of country education sectors, to manage the impact of HIV/AIDS in order to better direct development and donor agency support for affected and vulnerable countries. The email requested the support of in-country facilitators, highlighting the fact that the survey was commissioned by the UNAIDS Inter-Agency Task Team on Education and HIV/AIDS (IATT).

A second email containing the survey form was sent out in March and April 2004. Several attachments were also included:

- 1. Notes for Facilitators: Guidelines to assist in facilitating the process in country
- 2. Letter from HEARD, University of KwaZulu-Natal: A letter addressed to the Ministry of Education to request their participation in the Education Sector Global HIV/AIDS Readiness Assessment Survey
- 3. Guidelines for the Completion of the Survey: A guide to completing the survey

The survey form was attached in English, French, Portuguese, Russian and Spanish. Facilitators were asked to review the documents and address any queries to the survey team.

The task of sending out this relatively large package of information to 117 representatives worldwide was not without its difficulties and may be instructive: Some of the email addresses proved to be invalid and correspondence was 'bounced back' (user unknown) to the survey team – these had to be re-verified via UNESCO/IIEP in Paris. In some cases local email servers rejected the message on the basis that it was 'spam' or that the attached survey document in Microsoft Excel might contain malicious viruses. In a few instances it was not possible to verify whether the message had been received or not and it was only through telephonic contact that this could be ascertained.

Follow up

During the months after the initial documentation was dispatched, countries were gradually classified according to various status codes as follows:

- No contact/documents not sent
- Documents sent
- Follow up in progress
- Not willing to participate
- Survey with Ministry
- Survey submitted to HEARD

It became clear that there were many surveys 'in the field' and 'in progress', but it was impossible to determine at what stage they would be returned and whether sufficient priority was being given to the exercise. Email contact and reminders lacked the personal touch and encouragement that was clearly needed.

Fortunately, the survey team was able to call on the assistance of UNESCO/IIEP in Paris, who offered to make one of their staff members available to help expedite the survey. In this respect it is essential to acknowledge the critical role played by the IIEP and in particular Ms Nuria Chat who tirelessly phoned, emailed and good humouredly cajoled countries into submitting survey forms. It was largely due to her efforts that the response rate was so high and a lesson that unsolicited email requests for assistance have to be followed up by personal contact to yield results.

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Civil Society Component

Background

In a number of the selected countries, the Global Campaign for Education (GCE) was supported by the Canadian International Development Agency (CIDA) to provide a civil society perspective on the issues raised by the Global Readiness Survey. GCE was contracted to hold civil society workshops in 19 of the countries in the IATT Global Readiness Survey sample. The purpose of these workshops was to engage the view of civil society and to ascertain the extent to which civil society organisations have been informed of, and involved in, Ministry of Education (MoE) HIV/AIDS planning and response.

Specifically, the stated objectives of this GCE study were:

- 1) To improve the accuracy and usefulness of the Global Readiness Report by feeding civil society perspectives and experiences into the research process.
- 2) To enable national civil society to engage government, media and others in serious dialogue on the policy issues raised in the Report, in order to ensure that the findings of the GRR are not ignored by senior policy-makers in government.
- 3) To lay the foundations for ongoing civil society involvement in shaping AIDS and education policies by increasing levels of AIDS awareness and concern among education NGOs and teachers' unions, and by linking these groups to civil society AIDS networks, MoE and donor agencies (specifically, members of the UN's Inter-Agency Task Team on HIV/AIDS and Education).

It was strongly felt that civil society perspective would temper the self-reporting of the MoEs concerned, provide critical commentary and suggest complementary or even alternative strategies. It was anticipated that this would be particularly important in regard to issues of consultation with partners, policy, advocacy, curriculum content, implementation, scaling and delivery.

Of the 19 targeted countries, workshops, meetings or surveys are reported in 17 of these in Table 2 below, including:

- Bolivia
- Burundi
- El Salvador
- Gambia

India

- Ghana
- Haiti

- Kenya
- Mali[′]
- Nepal
- Nigeria
- Senegal
- South Africa
- Sudan

- Togo
- Uganda
- Tanzania
- Zambia
- Zimbabwe

GCE Process

A civil society coalition representative was identified by the GCE in each of these countries. This representative then set up and coordinated a civil society 'pre-meeting' and invited the in-country UNESCO/UNAIDS/UNICEF Global Readiness Survey facilitator to attend. In turn, the civil society representative was invited to attend the meeting in which MoE officials completed the Global Readiness Survey (GRS), in order to take notes and identify issues for further discussion. Once the Survey was completed, the representative was to report back to the civil society coalition and, based on the outcome of the MoE meeting, identify issues of concern or contention for further discussion or research. The GCE, together with their civil society partners, then conducted further in-depth research in a number of these countries

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(Six of the participating coalitions bid for and received additional funding to carry out more detailed studies on particular issues highlighted in the Global Readiness Survey).

GCE Report

In its Executive Summary, the GCE Report says that its research shows that in the view of civil society, only two of these 19 countries have a coherent education sector AIDS strategy actually being implemented. It notes that some of the hardest-hit countries are falling at the first hurdle – unable to keep children in school, with teachers teaching, as the epidemic takes hold. They argue that enrolment rates, already falling in communities struggling with the poverty and hunger that AIDS brings, will probably decline further unless governments abolish school fees and introduce extra support, such as school feeding programmes. The Report concludes that few donors are delivering the coordinated large-scale assistance that would be needed to implement such measures.

The GCE Report notes that while education's potential to halt the spread of HIV is being underexploited, the blame cannot simply be passed on to national governments – it argues that there has also been a significant lack of leadership and political commitment by the international donor community, and although this has been changing, mobilisation has been slow and recent. Equally, it says, education NGOs are surprisingly under-informed about the epidemic, even in high-prevalence countries, and their contributions have been patchy at best.

But, the Report goes on to say that whilst the response to date is undoubtedly too little, it is not too late: It argues that if donors, governments and civil society groups act together now, it is not too late to break the deadly inertia surrounding HIV/AIDS and education.

The GCE Report documents some promising initiatives, which it says could provide the beginnings of an effective strategy to tackle the crisis. It stresses that civil society has played an active role in some communities in providing school-based HIV/AIDS education, and in caring for orphans and vulnerable children. And it adds that MoEs have made some progress in developing HIV/AIDS strategies, and introducing HIV/AIDS curriculum modules, while donors have inaugurated an inter-agency working group to try to improve their collective understanding of the AIDS crisis in education.

The full GCE report is available and provides additional methodological and output information; the GCE may be contacted on www.campaignforeducation.org.

For the purpose of this Global Readiness Report therefore, the GCE Report provides a valuable counterpoint to the self-reporting of MoE officials, and shows the strategic importance of engaging countervailing views in pursuit of coordinated response – particularly those of partners in the wider education sector. For example, according to the GCE Report, in only two of the 19 countries included in this civil society research did the MoE have a clearly formulated strategic plan on HIV/AIDS, that was actually being implemented, either as part of a wider sector plan or as an add-on to such a sector framework. In the remaining 17 countries, the report argues that MoE readiness can be characterised as either, a) zero policy response or, b) plans that exist in draft form or, c) plans that have been finalised but have not been translated into budgets and implementation.

Inevitably, these views are sometimes at variance with those expressed by MoE officials in their self-reporting. That said, a review of the comparative perspectives listed in Table 2 below shows a surprising degree of coincidence on the majority of strategic issues being considered. In fact, the divergence of opinion and often robust criticism of MoE performance is much more marked in the anecdotal comments reported, than in structured responses to the same questions – where the same instrument was used.

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But this is less a matter of who is right or wrong: The fact that any divergence of perceptions on the same issues exists indicates a critical lack of communication and partnership, notwithstanding the consistently high priority attached to the achievement of this by the MoEs. This is an important point, as a meeting of minds in a coalition of government and civil society interests is vital if partnerships are to be forged and coordinated progress made.

Consolidated Data and Reporting

Optimally, data from the 19 respondent countries of the GCE Report should be cross-matched with the GRS data to provide a direct comparison and clear insight into the divergence of opinion on the issues under review. This would facilitate consolidated reporting and add value to each country response. Unfortunately this was not entirely possible, for a number of reasons:

- 1) Triangulation: Only 13 of the 19 reports could be used for triangulation purposes. The remaining countries did not submit a completed GRS questionnaire, or even the customized GCE questionnaire, making comparison between the data sets impossible. In the case of Zimbabwe, for example, a GCE report was not supplied at all, although there is a note that it is available in hard copy format.
- 2) Parallel Questionnaire: The development of a parallel questionnaire for distribution to civil society workshops and discussion groups further complicated this. In other words, a different data capture instrument was used in most cases, although it covered the most of the same sections and structure as the GRS.
- 3) Consistency: There was a lack of consistency in the nature of the civil society data supplied: In some cases, the Pre-Meeting Report was supplied, while in other cases the Civil Society Questionnaire answers were supplied, sometimes simply in the form of a workshop report.
- 4) Incomplete Data: In cases where only a workshop report was supplied, it was difficult to engage in a direct comparison, as the information provided was often anecdotal and discursive and did not directly compare with the data requested in the GRS questionnaire.
- 5) Unlinked Countries: The civil society study was undertaken in 6 countries that did not respond to the Global Readiness Survey, so there was no basis for comparison. These countries included El Salvador, Gambia, Haiti, India, Nepal and Tanzania.

The civil society reports were most useful where the GCE facilitators used the *same* GRS questionnaire as a basis for the workshop interaction (Bolivia is a prime example). This allows for direct comparison between self-reported answers from the MoEs involved and the GCE-facilitated civil society workshop answers.

However, The GCE process allowed for *additional* information to be collected that was not a part of the Global Readiness Survey. This is important as it might inadvertently create the impression view that the GRS questionnaire provided incorrect information, when in fact it should be recognized that the civil society workshop process *supplemented* and added to the GRS self-reported information provided by MoEs.

In terms of format, the civil society country-level workshops that followed a group work methodology, with unstructured feedback provided by the groups, generated the least useful results from a comparison and triangulation point of view. However, it should be said that

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this does not in any way under-value the outcomes of this dialogue or its contribution to a wider understanding of the issues – it is simply noted that such unstructured feedback could not be directly compared to the GRS data and therefore precludes direct comparison or merged reporting.

On a positive note, the civil society process identified some shortcomings in the GRS questionnaire structure: For example, in Section 2 of the GRS questionnaire, the existence of a dedicated HIV/ AIDS management unit was queried, when in fact the MoE might only have one dedicated HIV/AIDS advisor — an anomaly identified in three civil society responses. In another example, Section 6 of the GRS questionnaire asked about the development of HIV/AIDS materials, but did not investigate, in detail, the distribution of these to school level. These and other anomalies should be addressed ahead of the planned second round of the Global Readiness Survey, and additional issues identified in the civil society dialogue should be considered for inclusion.

Comparative Rankings

In four countries where the civil society questionnaire format was used and where GRS data were available (Burundi, Mali, Uganda and Zambia), a detailed comparison was possible. However, of these 4 countries, only 2 countries (Burundi and Zambia) provided a complete ranking of the 9 areas covered in the Global Readiness Survey. A comparative ranking analysis has been provided below for illustrative purposes, and demonstrates the value of using the same instrument:

Table 1: Comparative GRS and GCE ranking of the 9 areas that were surveyed

GRS		BURL	INDI	ZAI	MBIA
NUMBER	PANKING AREAS		GCE RANKING	GRS MOE RANKING	GCE RANKING
11.1.1	Ministry of Education HIV/AIDS structures (Section 2)	4	5	5	5
11.1.2	Enabling environment for an effective response to HIV/AIDS (Section 3)	3	4	4	4
11.1.3	HIV/AIDS mainstreaming (Section 4)	3	4	3	3
11.1.4	Human resources adaptation to the impacts of HIV/AIDS (Section 5)	1	2 answers supplied	4	2
11.1.5	Workplace HIV/AIDS programmes (Section 6)	1	1	5	5
11.1.6	HIV/AIDS and the curriculum (Section 7)	4	1	5	4
11.1.7	Responses aimed at the infected and affected (Section 8)	1	2 answers supplied	3	3
11.1.8	Partnership development in response to HIV/AIDS (Section 9)	3	3	4	4
11.1.9	Research guiding the response to HIV/AIDS in the education sector (Section 10)	3	1	2	5

Interestingly, in the two countries where comparative rankings were available, these are the same for most of the 9 areas included in the list of rankings. A similar pattern of agreement on the majority of issues may be observed in Table 2, below, in which GRS and GCE responses have been linked as far as possible, given the data constraints. Thus, while the important anecdotal comments and critical dialogue from several of the civil society

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interactions point to a marked divergence in perspectives, the use of a common instrument suggests that the two sides might be closer in their views than at first suggested.

Conclusions

As will be seen from the comments above and the detailed comparison captured in Table 2 below, it will be clear that insufficient amounts of comparable data exist to allow for a direct comparison, or consolidation of the Global Readiness Report and the GCE civil society report. There has been considerable merit in triangulating the results from the four countries where good quality, comparable data was received from the civil society study. Indeed, in these four countries, there is a good correlation between the two data sets as will be seen from the examples of Burundi and Zambia in Table 1. Thus, the civil society validation process was shown to be very successful on an individual country level, where the same instrument was used and the data captured accordingly.

But given the role of civil society as critical observer and monitor, it is equally important to highlight areas where there was *no* correlation between the GRS data set and the civil society data set. In other words, where civil society vigorously disagreed with the self-reported information of the MoE, or where civil society identified further layers of detail of strategic importance. Variances that were consistently observed in countries where comparison was possible, included the following:

- 1) HIV/AIDS and the Curriculum: Most of the countries where a comparison between the two data sets was possible disagreed on either, a) whether or not there *is* an HIV/AIDS curriculum or, b) the extent to which IEC materials are available and the quality of these materials. This could be because the GRS questionnaire did not ask 'who is undertaking the HIV education in schools?', but only whether or not HIV education *was* taking place in schools. Thus, it is entirely possible that the MOE, when conducting the self-assessment, could have construed this as the HIV education undertaken by NGOs in schools.
- 2) HIV/AIDS Policy: This is apparently a fairly straightforward and simple question; ie whether or not an education sector HIV/AIDS policy exists or not? In countries where a variance in views was observed, this could be due to a lack of communication by the Ministry of Education, confusion between national and sectoral policy or uncertainty about what policy is, and points to the need for stronger advocacy and more effective communication on the part of the MoE/Government. It also underscores a general misunderstanding about the role and strategic importance of sector policy in informing legal frameworks, regulations and conditions of service.
- 3) Extent/Effectiveness of MoE Management and Coordination: This is necessarily a very subjective assessment, and more detail may be required to make a valid comparison between the GRS and GCE answers. It is to be expected that civil society would be critical of this fundamental aspect of the MoE's performance and would not agree with the self-assessment of the MoE concerned. This divergence in fact spotlights an opportunity to advocate for better relations and improved partnership structures, which should be strongly encouraged.
- 4) Extent of Civil Society Involvement: From the GCE workshop perspective, this is very subjective, as the workshop reports themselves did not provide an objective assessment of how representative civil society involvement at these workshops was and consequently how well informed this answer would be. This points to a need for technical assistance in this area and a further need to open lines of communication and reporting in the sector to facilitate improved civil society coordination and networking.

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In summary, triangulation of data sets and responses is extremely useful in a survey of this kind, particularly as this is the first such global review of its kind. However, for triangulation to be meaningful, it is necessary for all the primary data to be comparable and of good quality. Given the variable nature of the civil society data and the extent to which the data sets diverged, there are limits to the value of attempting to consolidate these in a single report. For this reason, and to ensure that the very real value of the civil society perspective is factored, the key points and themes contained in it will be considered in a further paper assessing the policy implications of the Global Readiness Report. It is hoped that in this way, this important and indeed groundbreaking civil society study contributes to the wider Global Readiness Report and informs the way forward.

There are important lessons in this summary for the next round of the Global Readiness Survey: It is vital, for example, that pre-planning and coordination ensures that there is ONE data collection instrument and a shared methodology for the capture and analysis of data. This will obviate the problems described above, but should not in any way diminish the energy and robustness of the civil society perspective; it is evident from the depth of the anecdotal comments and sustained scepticism about self-reported MoE information, that this is the key insight into much of what is really happening in any country education sector.

Second, flowing from this, the teams involved should liaise at every level on country selection, timing, approach and output. Given that one of the key themes of these studies was evaluation of the effectiveness of partnerships, advocacy for cooperation and shared direction, it is critical that the next round of the Global Readiness Survey itself demonstrates the coordinated planning and a smooth roll-out of a single plan of action.

Finally, as has been noted, further work will be undertaken on this data and information, designed to identify the key policy implications arising from this benchmark study. This should pay particular attention to the issues raised by the civil society report, since they raise the spectre of this critically important development sector being marginalized by uncertainty, lack of information and even mutual suspicion. This issue should be central to the considerable advocacy opportunity that the release of the 2004 Global Readiness Report is sure to generate.

Table 2: Detailed comparison between GRS data set and GCE data set for 16 countries, included in the civil society survey, for which data were available

COUNTRY NAME	QUALITY AND TYPE OF GCE QUESTIONNAIRE and/or REPORT	COMPARISON WITH GRS QUESTIONNAIRE DATA
Bolivia	Survey of secondary school students The information is in the form of a workshop report, which details a series of questions asked to three workshop groups. These questions corresponded with the GRS questionnaire sections.	The same information is gathered from both groups (MoE and GCE workshops). The GCE workshops provided additional information about the fact that there are HIV/AIDS policies in the health sector that allows for HIV/AIDS education in secondary schools. It also refers to the fact that there are a number of non-governmental organisations working on HIV/AIDS programmes in schools (the GRS questionnaire did not allow for this information to be supplied) The areas where the responses differ are: Existence of an HIV/AIDS policy – According to the MoE there <i>is</i> an HIV policy, and according to the GCE workshop feedback, there is no specific HIV policy, but a section on HIV and the curriculum in the health sector HIV policy. HIV/AIDS education in the curriculum - According to the GCE workshop responses, there is no structured HIV/AIDS education in schools, except where it "unilaterally included HIV/AIDS as a crosscutting theme in the mainstream curriculum" (Bolivia report, page 10).

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COUNTRY NAME	QUALITY AND TYPE OF GCE QUESTIONNAIRE and/or REPORT	COMPARISON WITH GRS QUESTIONNAIRE DATA
		 The GCE workshop report further lamented the lack of materials, and stated that materials that had been developed, were developed with NGO resources and assistance from the Ministry of Health, not the MoE. The GCE questionnaire made some valid and interesting comments regarding the need to make the different workshops run by the NGO community compatible, so that they may be incorporated into the curriculum with relative ease. The GCE workshops also made comments regarding the lack of follow-up after workshops and the lack of commitment to fulfil promises. In terms of scoring, the GCE workshop comments and the MoE self-assessment scores were the same for all areas, except for HIV/AIDS and the curriculum, where the MoE rated itself "5" and the GCE workshops provided a less positive picture.
Burundi	Used customised GCE questionnaire, following the same sections as the GRS questionnaire	 The two sources of information agree on: The existence of a person responsible for HIV/AIDS in the MoE (an MoE focal point person) The extent to which HIV/AIDS is incorporated into the curriculum The lack of support to OVCs The extent of a workplace programme, and the involvement of teachers in the design of a workplace programme The strength of the partnership between MoE and civil society (MoE ranked it high in terms of importance, and high in terms of need for technical assistance) The two sources of information disagree on: The extent of consultation with and the involvement of civil society in the process In addition, the GCE questionnaire feedback made some interesting comments on how the civil society may support the MoE in terms of HIV/AIDS, and how partnerships may be fostered and strengthened.
El Salvador	Used customised GCE questionnaire, following the same sections as the GRS questionnaire	There was no GRS questionnaire data for El Salvador, so comparison was not possible.
Gambia	The information is in the form of a report that states that the questionnaire was distributed, but the questionnaire responses are not detailed in the report, which contains only logistical information.	There was no GRS questionnaire data for Gambia, so comparison was not possible.
Ghana	The information is in the form of a workshop report, which details a series of questions asked to three workshop groups. These questions do not correspond with the GRS questionnaire sections, and there is limited overlap between the GCE report data and the GRS	 The two sources of information agree on: The lack of a good orientation programme in HIV/AIDS for teachers The existence of an HIV/AIDS policy The pro-activeness of government in taking a lead role in the response to HIV/AIDS The importance that government accords to partnerships The two sources of information disagree on: Whether there is an HIV/AIDS curriculum or not (GRS answer = yes, GCE workshop feedback = no, it is the responsibility of the NGO sector) Whether teachers have been trained in HIV/AIDS or not (GRS answer =

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COUNTRY NAME	QUALITY AND TYPE OF GCE QUESTIONNAIRE and/or REPORT	COMPARISON WITH GRS QUESTIONNAIRE DATA
	questionnaire.	yes, GCE workshop feedback = not well trained) The extent of management and coordination (GRS answer = yes, there is coordination, GCE workshop feedback = no proper management and coordination) Although not a part of the GRS questionnaire, the GCE workshop feedback provided information regarding the quality of materials, which was said to be "foreign and in most cases irrelevant to the cultural, social, and religious needs of school children".
Guinea	The information is in the form of a workshop report, which provides very brief answers to the GCE questionnaire. Since the GCE workshop feedback constituted one page of a report, it was not possible to do a detailed comparison.	 The two sources of information agree on: The fact that a national and regional HIV/AIDS structures have been set up The fact that there is HIV/AIDS education in schools The extent of the partnership that government has established with international agencies and NGOs The lack of a research agenda The two sources of information disagree on: Whether or not HIV/AIDS education takes place at all levels of the school system (GRS answer = yes at primary and secondary level, GCE workshop feedback = no, only from Year 5 until the last year of secondary school) Whether or not government partners with faith-based community (GRS answer = yes, GCE workshop feedback = only NGOs and international development community)
Haiti	The information is in the form of a workshop report, which details a series of questions asked to participants. These questions do not correspond with the GRS questionnaire sections.	There was no GRS questionnaire data for Haiti, so comparison was not possible.
India	The information is in the form of a set of minutes with general comments, but did not follow the GCE questionnaire structure	There was no GRS questionnaire data for India, so comparison was not possible.
Kenya	The information is in the form of a workshop report, which details the response from group work sessions. The issues addressed in the report do not correspond precisely with the GRS questionnaire sections, so a detailed comparison was not possible.	 The two sources of information agree on: The fact that there is HIV/AIDS education in schools The fact that civil society and the faith-based sector is involved in HIV/AIDS curriculum issues The fact that there is political support for HIV/AIDS The existence of an HIV/AIDS policy for education The extent to which HIV-sensitive data is collected in the school system (GRS answer = yes, GCE feedback = more accurate information is needed) The extent to which civil society and the faith-based sector is involved in HIV/AIDS curriculum issues (GRS answer = yes, GCE feedback = should be more participative and representative) The need for additional management support to implement existing programmes The extent of funding available for HIV/AIDS (GRS answer = yes, GCE feedback = bureaucracy prevents NGOs and CSOs from accessing

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COUNTRY NAME	QUALITY AND TYPE OF GCE QUESTIONNAIRE and/or REPORT	COMPARISON WITH GRS QUESTIONNAIRE DATA
		funding) The GCE report feedback deliberated on issues of substance and did not directly assess government's performance in the area of HIV/AIDS. This limited any meaningful comparison between data sets.
Mali	Used customised GCE questionnaire, following the same sections as the GRS questionnaire.	 The two sources of information agree on: The existence of a national HIV/AIDS unit within MOE The existence of some regional HIV/AIDS units The existence of partnerships between MOE and NGOs, and the extent of these partnerships The lack of a study to assess the impact of HIV/AIDS on the education sector work force The lack of teacher training to sensitise teachers to the fact that AIDS is an epidemic The lack of a programme to support infected and affected teachers and learners Whether or not the national HIV/AIDS unit at MOE has a budget (GRS answer = no, GCE workshop feedback = yes) Whether or not the regional HIV/AIDS units are in ALL regions (GRS answer = yes, GCE workshop feedback = only in some regions) The importance of partnerships (GRS answer = ranked only of 7 out of 9, GCE workshop feedback = civil society to play a stronger role) Whether or not a specific HIV/AIDS policy exist (GRS answer = yes, GCE workshop feedback = no) The extent to which HIV-related data is collected (GRS answer = yes, GCE workshop feedback = scant information is available, needs to be consolidated) The extent to which partnerships are formed (GRS answer = yes for NGOs, GCE workshop feedback = cordial but with minimum interactions and conflict between different authorities)
Nepal	The information is in the form of a workshop report, which details the response from group work sessions.	There was no GRS questionnaire for Nepal, so comparison was not possible.
Sudan	The information is in the form of a workshop report, which details the responses from participants in the 9 areas covered in the GCE questionnaire.	 The two sources of information agree on: The number of education ministries in the country The existence of a national (federal-level) HIV/AIDS Committee The lack of regional (at State-level) structures to deal with HIV/AIDS (the Federal Committee has no links to the 26 MOEs at State level) The lack of training of members of the Federal HIV/AIDS Committee The lack of political support for HIV/AIDS (confirmed that the Federal Minister of Education has not once spoken about HIV/AIDS and that it is not a standing item on any agenda) The lack of an assessment of the impact of HIV/AIDS on human resources in the education sector Guidelines for teachers have been developed, but not yet distributed The existence of an HIV/AIDS strategic plan The lack of an HIV/AIDS workplace programme in education institutions The existence of non-discrimination policies The lack of a completed orientation programme for teachers and

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COUNTRY NAME	QUALITY AND TYPE OF GCE QUESTIONNAIRE and/or REPORT	COMPARISON WITH GRS QUESTIONNAIRE DATA
		parents The two sources of information disagree on: Whether or not MOE employee could be referred to VCT services (GRS answer = no, GCE workshop feedback = yes) The existence of a life skills programme at primary and secondary levels (GRS answer = yes at primary and secondary level, GCE workshop feedback = no, not yet)
Tanzania	Used customised GCE questionnaire, following the same sections as the GRS questionnaire.	There was no GRS questionnaire for Tanzania, so comparison was not possible.
Uganda	Used customised GCE questionnaire, following the same sections as the GRS questionnaire.	 The two sources of information agree on: The existence of a dedicated HIV/AIDS coordinator and structure The fact that the development of an HIV/AIDS policy is in progress The involvement of civil society in curriculum design and general partnership The lack of programmes that focus on children infected and affected by HIV/AIDS The two sources of information disagree on: The membership of the HIV/AIDS structure at MOE (GRS answer = all MOE departments represented, GCE feedback = it is a "one person band") The GCE questionnaire was only partly completed and completed in the first person ("I don't think so", etc.), creating the impression that the questionnaire was completed by one person and not in a workshop format.
Zambia	Used customised GCE questionnaire, following the same sections as the GRS questionnaire.	 The two sources of information agree on: The existence of a national structure to deal with HIV/AIDS The involvement of civil society in curriculum design and related HIV programmes The fact that the development of an HIV/AIDS policy is in progress Some HIV-related data is available each year Teachers have been trained in life skills and HIV/AIDS HIV/AIDS is part of the professional training programme for teachers Life skills materials for primary schools have been developed and are being distributed The two sources of information disagree on: The extent to which partnerships are important (GRS answer = only ranked at 8th out of 9, GCE feedback = very important and needs to be strengthened) The GCE questionnaire was completed with care and thought, and a thorough comparison was possible.
Zimbabwe	No questionnaire available	Not applicable

References:

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Badcock-Walters, PJ, Kelly MJ and Görgens, M: Does Knowledge Equal Behaviour Change?, UNESCO paper, 2004

² See Appendix for a copy of the Guide to Completing the Survey

Report on Pilot Testing of the Survey, Michael Morrissey, UNESCO Caribbean, 2004

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Completing the Survey, Michael Morrissey, UNESCO Caribbean, 2004

Completing the Survey Clouding Tilbung, Ministry of Rasic Education

⁵ Comments on Pilot Testing of the Survey, Claudia Tjikuua, Ministry of Basic Education and Sport and Culture, Namibia, 2004

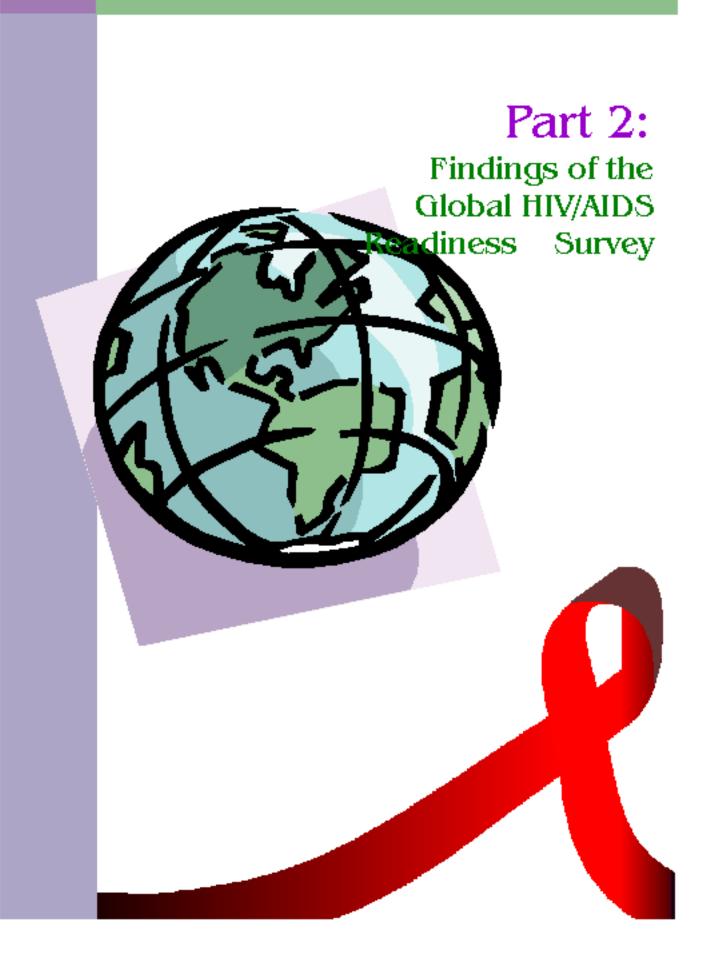
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⁶ Note that recently published UNAIDS rates for 2003 were not available when the sample of countries was originally drawn. The adult (15-49) HIV prevalence rate (%) is calculated by dividing the estimated number of adults living with HIV/AIDS at the end of 2001 by the corresponding adult population.

This acknowledged that UNAIDS estimates are not necessarily the official estimates used by national governments and that

some reported rates are under dispute. Regional models of older data may have been used to produce minimum estimates for countries where no recent data was available (Report on the Global HIV/AIDS Epidemic, UNAIDS 2002).

http://www.who.int/hiv/strategic/surveillance/en/
 Report on Pilot Testing of the Survey, Michael Morrissey, UNESCO Caribbean, 2004
 Notes for Facilitators, Education Sector Global HIV/AIDS Readiness Assessment Survey, HEARD 2003



1 Introduction

Section Overview

This part of the report deals with the results of the nine main sections in the Education Sector Global HIV/AIDS Readiness Survey. Each section is analysed separately in terms of responses to the questions with, in most cases, responses being segmented by prevalence level. The commentary explains the significance of each question from an Education Ministry context and provides contextual background. A combination of tables and graphs has been used to illustrate the results, with occasional maps included to illustrate spatial patterns in responses.

Each section is concluded with a summary of how ministries assessed their performance on a scale of 1 to 5 in the key area as well as the priority they assigned it (on a scale of 1 to 9) in terms of importance for funding and for technical assistance.

The nine main sections in the survey were:

- 1. Ministry of Education HIV/AIDS structures
- 2. Enabling environment for an effective response to HIV/AIDS
- 3. HIV/AIDS mainstreaming
- 4. Human resources adaptation to the impacts of HIV/AIDS
- 5. Workplace HIV/AIDS programmes
- 6. HIV/AIDS and the curriculum
- 7. Responses aimed at the infected and affected
- 8. Partnership development in response to HIV/AIDS
- 9. Research guiding the response to HIV/AIDS in the education sector

Please note where numbers of countries are referred to in the analysis of specific questions, it implies the number of *respondents* to that question. Since some countries failed to respond to specific questions, the totals may therefore not add up to the total countries that returned a survey form i.e. 71. Note also that percentages have been rounded to the nearest whole number for convenience and may not add up to 100%.

The survey asked ministries to provide some basic education and statistical indicators for their countries. The indicators required were listed in a section in the survey entitled

'Education System and Statistical Indicators'. This information was generally not as thoroughly provided as other sections, with a number of non-responses leading to gaps in the data. However, some of the salient results are discussed below.

This introduction also identifies the countries that responded to the survey, listing their prevalence category and UN Region. It also includes a brief commentary on the size and composition of the teams completing the survey as well as details of how many signed copies were received by post.

This was the first opportunity - I believe - when the officials of planning, statistics, personnel and HIV/AIDS coordination were together round a table to discuss HIV/AIDS matters; the opportunity brought about by the Survey was therefore valuable in itself, internally. There was a consensus that the time spent was useful to the four participants in their future work.

Report on Pilot Testing of the Global HIV/AIDS Readiness Assessment Instrument, Michael Morrissey, UNESCO Office for the Caribbean

Which countries responded and which didn't?

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Survey Forms

A total of 71 countries had responded to the Global Readiness Survey by the end of November 2004, a nine-month period since the first forms were dispatched.

Preva-**UN Region Country** lence Low Argentina Latin America Eastern Europe & Armenia Low Central Asia Caribbean Barbados Medium Eastern Europe & Belarus Low Central Asia Benin Medium Sub-Saharan Africa Bolivia Low Latin America Botswana Sub-Saharan Africa High Brazil Latin America Low Burkina Faso High Sub-Saharan Africa Burundi Sub-Saharan Africa High South & South East Medium Cambodia Asia Central African High Sub-Saharan Africa Republic Chad Medium Sub-Saharan Africa China East Asia & Pacific Low Colombia Low Latin America Congo High Sub-Saharan Africa Costa Rica Low Latin America Cote d'Ivoire High Sub-Saharan Africa North Africa & Cyprus Low Middle Fast North Africa & Egypt Low Middle East Equatorial Guinea Medium Sub-Saharan Africa Eastern Europe & Low Estonia Central Asia Sub-Saharan Africa Ethiopia High Gabon Medium Sub-Saharan Africa Ghana Medium Sub-Saharan Africa Guinea Medium Sub-Saharan Africa Guyana Medium Latin America Iran (Islamic South & South East Low Republic of) Asia North Africa & Israel Low Middle East Italy Western Europe Low Jamaica Caribbean Low Kenya High Sub-Saharan Africa Kuwait Low North Africa &

These countries are listed below, together with their UN Region and prevalence category.

Country	Preva-	UN Region			
Country	lence				
		Middle East			
Latvia	Low	Eastern Europe & Central Asia			
Lesotho	High	Sub-Saharan Africa			
Liberia	Medium	Sub-Saharan Africa			
Madagascar	Low	Sub-Saharan Africa			
Malawi	High	Sub-Saharan Africa			
Mali	Medium	Sub-Saharan Africa			
Malta	Low	Western Europe			
Mexico	Low	Latin America			
Moldova	Low	Eastern Europe & Central Asia			
Mozambique	High	Sub-Saharan Africa			
Myanmar	Low	South & South East Asia			
Namibia	High	Sub-Saharan Africa			
Nicaragua	Low	Latin America			
Niger	Low	Sub-Saharan Africa			
Nigeria	Medium	Sub-Saharan Africa			
Papua New Guinea	Low	East Asia & Pacific			
Paraguay	Low	Latin America			
Peru	Low	Latin America			
Russian Federation	Low	Eastern Europe & Central Asia			
Rwanda	High	Sub-Saharan Africa			
Scotland	Low	Western Europe			
Sierra Leone	High	Sub-Saharan Africa			
South Africa	High	Sub-Saharan Africa			
Spain	Low	Western Europe			
Sudan	Medium	North Africa & Middle East			
Surinam	Low	Latin America			
Swaziland	High	Sub-Saharan Africa			
Thailand	Medium	South & South East Asia			
Trinidad and Tobago	Medium	Caribbean			
Turkey	Low	North Africa & Middle East			
Uganda	High	Sub-Saharan Africa			
Ukraine	Low	Eastern Europe &			

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Country	Preva- lence	UN Region		
		Central Asia		
United Kingdom	Low	Western Europe		
Tanzania	High	Sub-Saharan Africa		
Uruguay	Low	Latin America		

Country	Preva- lence	UN Region			
Vietnam	Low	South & South East Asia			
Zambia	High	Sub-Saharan Africa			
Zimbabwe	High	Sub-Saharan Africa			

Table 1-1. Countries that responded to the Education Sector Global HIV/AIDS Readiness Survey

A total of 46 countries did not respond to the survey. Four of these were within the

Preva-**Country UN Region** lence Angola Medium Sub-Saharan Africa Australia & New **Australia** Low Zealand **Austria** Low Western Europe Medium Caribbean **Bahamas** North Africa & **Bahrain** Low Middle East Low Western Europe Belgium **Belize** Medium Latin America Brunei South & South East Low Darussalam Asia Sub-Saharan Africa High Cameroon Canada Low North America Chile Latin America Low **Comoros** Low Sub-Saharan Africa **Democratic** Sub-Saharan Africa Medium Republic of Congo Western Europe Denmark Low Djibouti High Sub-Saharan Africa Dominican Caribbean Medium Republic **Ecuador** Latin America Low El Salvador Low Latin America **Eritrea** Medium Sub-Saharan Africa France Low Western Europe Sub-Saharan Africa Gambia Medium Low Western Europe Greece Guatemala Low Latin America Guinea-Bissau Medium Sub-Saharan Africa Haiti High Caribbean Honduras Low Latin America

high prevalence segment, eight medium and 34 low prevalence.

Country	Preva- lence	UN Region		
Iceland	Low	Western Europe		
India	Low	South & South East Asia		
Libyan Arab Jamahiriya	Low	North Africa & Middle East		
Luxembourg	Low	Western Europe		
Malaysia	Low	South & South East Asia		
Mauritania	Low	Sub-Saharan Africa		
Nepal	Low	South & South East Asia		
Netherlands	Low	Western Europe		
Oman	Low	North Africa & Middle East		
Panama	Low	Latin America		
Portugal	Low	Western Europe		
Senegal	Low	Sub-Saharan Africa		
Serbia	Low	Western Europe		
Singapore	Low	South & South East Asia		
Somalia	Low	Sub-Saharan Africa		
Switzerland	Low	Western Europe		
Togo	High	Sub-Saharan Africa		
United Arab Emirates	Low	North Africa & Middle East		
United States of America	Low	North America		
Venezuela Low		Latin America		

Table 1-2. Countries that did not respond to the Education Sector Global HIV/AIDS Readiness Survey

Teams completing the form

It was recommended that a small group (3 to 4) of Education Ministry officials work together in completing the survey form, facilitated by the IATT representative. It

was proposed that this group include representatives from Planning, Personnel, Finance, Statistics/EMIS and Curriculum if possible, together with HIV/AIDS focal

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point persons or those charged to deal with HIV/AIDS in the education sector.

The form also asked individuals present during completion to add their names, position or responsibility and contact telephone and email address. In this way it was possible to ascertain the size of the ministry team that was present and the range of ministry responsibilities that were present.

The average number of individuals that completed the form was 3.6. The largest

team that participated in completing the survey was in Uganda, where 9 people included their names on the form. In high prevalence countries participating teams were generally largest with 63% of the teams consisting of 5 individuals or more, a reflection of the level of interest and concern with HIV/AIDS issues affecting education in high prevalence situations. In nine cases (eight of which were in low prevalence countries) only one individual's name appeared on the form.

No. of Persons:	1	2	3	4	5	6	7	9	Not indicated	Total
Low prevalence	1	4	3		6	6	1	1		22
Medium prevalence	8	5	6	6	5	1			4	35
High prevalence		4	3	1	3	3				14
Total	9	13	12	7	14	10	1	1	4	71

Table 1-3. Frequency of countries by number of persons involved in completing the form

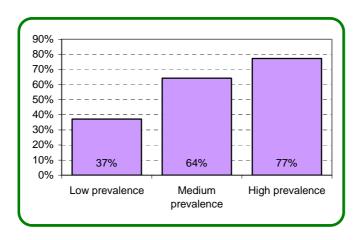
Signed hardcopies

The survey form was designed as an electronic instrument, which could be easily returned for analysis via email. However, in an attempt to ensure that the survey represented the 'official' ministry response, countries were asked for a person empowered on behalf of the ministry to sign a hardcopy and for it to be returned to HEARD at the University of KwaZulu-Natal in South Africa.

This requirement created an additional administrative hurdle. Some in-country facilitators reported that they had difficulty in obtaining an 'official' signature from ministries and that to insist on one would create long delays and possible non-return

of the form. In certain cases teams completing the survey may have been reluctant to state categorically that their responses were the official Ministry position.

The number of countries that returned a signed copy was 39. Nearly 80% of high prevalence countries (17) met this requirement (at times even appending a letter signed by the Permanent Secretary or Minister of Education), whilst 64% of medium prevalence and 37% of low prevalence countries provided a signed copy. Several countries elected to email a scanned front page showing the appropriate signature.



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Figure 1-1. Proportion of countries that returned a signed copy of the form by prevalence category

Education System and Statistical Indicators

This section of the form was intended to capture basic education and statistical indicators for countries. It included questions on education expenditure, numbers of schools, enrolment, teachers and frequency of data collection. Ministries were also asked, if possible, to estimate the number of OVC in the basic education system and the percentage of total teachers who leave the system annually.

One education ministry or two

Countries were asked to indicate whether, in their countries, there was a single education Ministry or two, such as a Ministry of Basic Education and Ministry of Higher Education. Fifty-three countries (75%) responded by indicating that there was only one Education Ministry. An additional fourteen countries indicated that there were two ministries and in two cases, there were three.

It was noted during the pilot survey that some of the required information was routinely requested by UNESCOs Institute of Statistics and that this additional request might be considered duplicated effort. The comparatively poor response to this section of the survey does perhaps bear this out, although it might also reflect the lack of reliable education statistics in some countries.

Questions referring to the 'ministry' might have created difficulties for those countries where more than one ministry existed. In those cases where a specific ministry responded (for example Basic Education) the response would have been from its perspective only. In instances where both ministries were present, they would have had difficulty indicating that one ministry had taken a particular step and the other had

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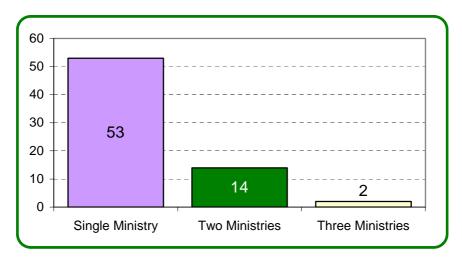


Figure 1-2. Number of countries with a single Education Ministry, two ministries or three

Differences in scale

The responses to questions on the number of schools, enrolment and teachers, illustrates the huge variation in size of country education sectors. For example, the total number of primary schools in countries varied from a massive 425,846 in China to just 300 in Surinam. Amongst those high prevalence countries that provided data, Kenya and South Africa were the two largest in terms of numbers of primary schools Swaziland was the smallest.

The picture for enrolment was similar with China having a reported primary school enrolment of 116.8 million whereas Cyrus had in the region of 60,000. Kenya reported the highest enrolment amongst high prevalence countries, with 7,200,000 pupils. South Africa however reported the largest number of primary teachers amongst high prevalence countries, stating that they had 179,829.

Enrolment Trends

Countries were asked whether total enrolment in their schools was growing, shrinking or remaining stable. Sixty-five percent of respondents said that their enrolment was growing, compared to 21% that said that it was stable and 15% that it

was shrinking. Amongst high prevalence countries the proportion indicating that enrolment was growing was higher, with nearly 80% stating it was growing and only 11% indicating that it was shrinking.

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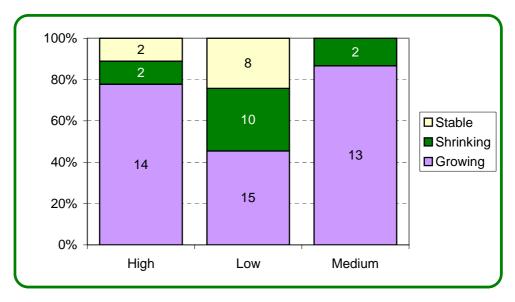


Figure 1-3. Whether total enrolment in schools is growing, shrinking or remaining stable by prevalence group

* Teacher attrition and children out of school

When countries were asked whether they could estimate the percentage of total teachers employed who leave the system annually for any reason, only 21 countries responded. This attrition was assumed to include retirement, resignation, death, promotion and so forth.

The estimates varied from a high of 10% in Congo Brazzaville and 11% in Gabon to a low of 2% in Papua New Guinea and Madagascar. As stated earlier, the majority of countries did not respond to this question.

The response to the question on children out of school was somewhat better, but 24 countries still not respond. The guidelines for completing the survey defined children of school-going age as the age group in which children *should* be attending school, or for which attendance at school was compulsory.

Countries that indicated very high percentages were Burkina Faso with 52.5%, Central African Republic (51%), Niger (50%) and Liberia (48%). The lowest reported figures were in Latvia 0.67% and Estonia 0.68%.

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2

Ministry of Education HIV/AIDS Structures

Section Overview

Experiences from many countries have confirmed the need to establish HIV/AIDS management structures or committees to direct, guide and monitor the education sector's HIV/AIDS response. The establishment of a management unit is also in line with the "UNAIDS Three Ones Principle" which encourages countries to have "one National AIDS Coordinating Authority, with a broad based multisectoral mandate" to strengthen the coordination of national AIDS responses¹. The form taken by these structures varies considerably from one situation to another, as well as at national and sub-national levels.

This section investigates the degree to which structures have been established within the Ministry of Education to address and manage issues relating to HIV/AIDS. For the purpose of the survey, a management unit was defined as a dedicated structure or committee consisting of two or more individuals whose primary task is to manage the Ministry's response to the impact of HIV/AIDS. Management units that have been established at

national and sub-national level were explored and Ministries were asked to report on representivity, budget issues and capacity building of members. Several more detailed questions relating to the constitution and funding of HIV/AIDS management structures were *not* asked of the low prevalence countries.

AIDS is likely to be with us for a very long time, but how far it spreads and how much damage it does is entirely up to us.

Peter Piot Executive Director, UNAIDS

Structures at a National Level

Existence of HIV/AIDS structures

80% (55 countries) of the responding countries indicated that already have or are in the process of establishing a dedicated committee or management unit

responsible for co-ordinating the response to the HIV/AIDS epidemic within the education sector.

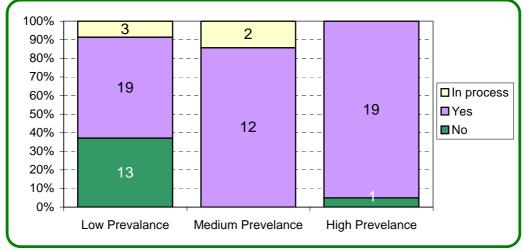


Figure 2-1. Status of HIV/AIDS structure development at a national level

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72% of the responding

countries have established

HIV/AIDS management

structures and all existing

HIV/AIDS management

structures have senior staff

represented.

The one high prevalence country that indicated it did not have a management

structure, explained that they only had one person appointed full-time and hence did not see this as a "structure" or a "committee". They noted however that a committee exists but that the officials serving on it have other responsibilities and are not able to commit all of their time to HIV/AIDS issues². From the

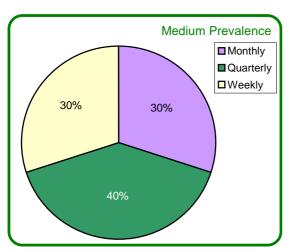
responses provided, it can be seen that Ministries of Education consider these structures to be important: only 13 low prevalence countries have not established such committees or units and all the countries (31) with already established structures indicated these had senior staff representation. Senior staff was defined

as a head or director of a department or unit within the Education Ministry. Two

countries elected not to answer the question regarding the existence of a dedicated HIV/AIDS structure.

Ministries of Education were requested to indicate how often their management structures met and interestingly four countries again chose not to answer the question. This lack

of response may suggest that while the structures "exist", they may not meet as frequently as required to make them operational. While there is a fairly even spread of response it appears that high prevalence countries prefer to meet monthly and medium prevalence countries tend to meet on a quarterly basis.



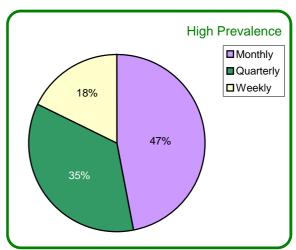


Figure 2-2. Frequency of meetings of the HIV/AIDS structures at a national level in high and medium prevalence countries

Representation and training of the HIV/AIDS structures

All medium and high prevalence countries were requested to indicate which of the

following divisions within the Ministry are represented in the HIV/AIDS committee or management unit: Planning, Finance, Curriculum, Human Resource and EMIS (Education Management Information System). Five high prevalence countries, Kenya, Malawi, South Africa, Uganda

and Zambia, indicated they have all these divisions represented in their HIV/AIDS structures, while three of the medium

prevalence countries, Barbados, Chad and Mali, indicated the same.

The planning, finance, curriculum, human resource and EMIS units are all represented in the HIV/AIDS management structures of five high prevalence countries.

Of the divisions and directorates represented in **HIV/AIDS** these structures. Curriculum and Planning were found to be the most widely represented, while EMIS were least represented. Operational experience in many of these countries suggests that

the response of Ministries of Education to the impact of HIV/AIDS impact has largely focused on prevention and curriculum

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change. The lack of attention to the collection of HIV/AIDS- sensitive data, to support planning, monitoring and

evaluation, remains a major challenge for most Ministries.

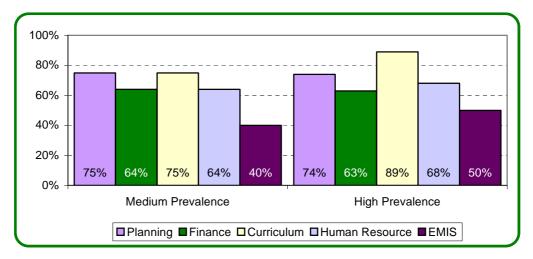


Figure 2-3. Divisional representation included in HIV/AIDS structures at the national level

Clearly, an HIV/AIDS management unit will function more effectively if its staff is appropriately trained and skilled. When asked whether any HIV/AIDS related

training had been provided to members of the committee or management unit concerned, 7 countries or 23% indicated that *no* training had been provided.

	Yes	No
Modium provolonco	67%	33%
Medium prevalence	(8)	(4)
High provolence	83%	17%
High prevalence	(15)	(3)

Table 2-1. Countries with HIV/AIDS structures at the national level that have received HIV/AIDS training

19 of the 20 high

prevalence countries have

staff at the national

ministry dedicated to only

deal with HIV/AIDS

issues.

allowing

Dedicated staff at the national level

Ideally, an HIV/AIDS management unit structure should include a number of

positions, dedicated thus members to give their undivided attention to **HIV/AIDS** related issues. However this tends to be the exception rather than the rule. More often than not the unit is headed by a full time coordinator with most, if not all, of the other unit members having

additional professional responsibilities as well as their HIV/AIDS-unit roles and functions. This suggests that the unit head/co-ordinator should have seniority, a clearly defined mandate and multiple skills

(as well as a solid HIV/AIDS background) if he or she is to ensure the unit's functionality.

31 countries indicated they had dedicated staff appointed to deal with HIV/AIDS issues. It is encouraging to note that 95% of the high prevalence countries (19) indicated that they have staff at the national Ministry level that *only* deals with

HIV/AIDS issues. The majority of the medium and low prevalence countries (37 countries) reported that they did not have dedicated staff dealing with HIV/AIDS issues. However, amongst these 37

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countries without dedicated staff, 35 countries or 95% indicated they did have other professional staff whose responsibilities included HIV/ AIDS.

Only two countries, Peru and Kuwait, in the low prevalence grouping, do not have dedicated staff that deal with HIV/AIDS; nor do they have other staff whose responsibilities include HIV/AIDS.

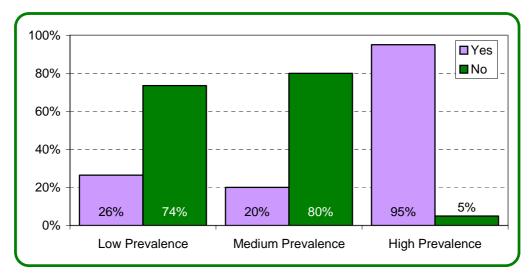


Figure 2-4. Percentage countries that have staff at the national level who only deal with HIV/AIDS issues

Of the 31 countries with dedicated staff dealing with HIV/AIDS issues, 74 % (23 countries) indicated that these officials were appointed at a senior level. This is pleasing as operational experience again suggests that if a Ministry's HIV/AIDS management unit is to become its 'Joint Operational Command Centre' in the fight against HIV/AIDS, it must have a quite

exceptional mandate and the power to access and guide the highest levels of the Ministry³. Such a mandate requires that the HIV/AIDS unit head and other professional officers should be appointed to positions of appropriate seniority and that they have some measure of job security.

	Yes	No
Low prevalence	67%	33%
Low prevalence	(6)	(3)
Medium prevalence	33%	67%
Medium prevalence	(1)	(2)
High prevalence	84%	16%
Tilgii prevalence	(16)	(3)

Table 2-2. Countries that have dedicated staff dealing with HIV/AIDS issues at a senior level

Funding of HIV/AIDS structures

Ministries of Education in high and medium prevalence countries were requested to indicate if their HIV/AIDS structures had a dedicated budget. Answers to this question indicate the importance assigned by the Ministry of

Education concerned to such structures, in the face of competing demands for increasingly limited financial resources. These responses also inform and guide understanding of how seriously the HIV/AIDS issue is being taken and how

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sustainable such structures and posts might be.

Over 60% (19 countries) of all medium and high prevalence countries indicated that the HIV/AIDS management structures

within their Ministries of Education had a dedicated budget. The medium prevalence countries were equally divided between those that had a dedicated budget and those that did not.

	Yes	No
Modium provolongo	50%	50%
Medium prevalence	(6)	(6)
High provalence	68%	32%
High prevalence	(13)	(6)

Table 2-3. Countries that have HIV/AIDS structures at the national level with a dedicated budget

Financial resources at the national level

In terms of resource allocation, it is not enough for Ministries of Education to provide a dedicated budget to their unit alone, allowance should be made for funding to implement a wide range of programmes and activities, based on a national HIV/AIDS strategy and priorities. Although Ministries are seen to be allocating budgets to these units and HIV/AIDS response, the emphasis was still

on issues of prevention and curriculum change. When asked whether financial resources for issues other than awareness, prevention, behaviour change or curriculum development have been allocated to address the impact of the HIV/AIDS epidemic, only 15 high or medium prevalence countries, or 43%, answered Yes. This question was not asked of low prevalence countries.

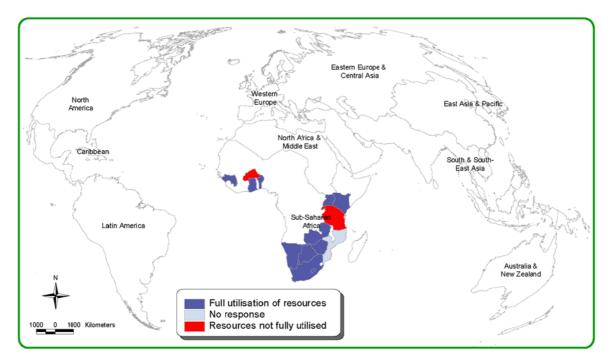
	Yes	No
Medium prevalence	20% (3)	80% (12)
High prevalence	60% (12)	40% (8)

Table 2-4. Countries that have allocated financial resources for activities *other than* awareness, prevention, behaviour change or curriculum development

What *is* alarming is how many medium and high prevalence countries have not been able to fully utilise the resources available to them every year. Only 11 out

of the 15 countries indicated they are able to use the available resources, in full, every year. All of these are countries located in Sub-Saharan Africa.

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Map 2-1. Countries indicating whether allocated financial resources *other than* for awareness, prevention, behaviour change or curriculum development were utilised in *full* every year

Countries were asked about applications for assistance to the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM). The Global Fund was created to finance a dramatic turn-around in the fight against AIDS, tuberculosis and malaria and to direct those resources to areas of greatest need. According to the Global Fund website⁴ it has committed US \$3 billion in 128 countries to support aggressive

interventions against all three of these diseases. Many of the national AIDS coordinating bodies would make direct application to the GFATM and the *Global Readiness Survey* aimed to assess how many countries involved their Ministries of Education in making application to the fund. 60% of the Ministries indicated they have been involved in applying to the Global Fund.

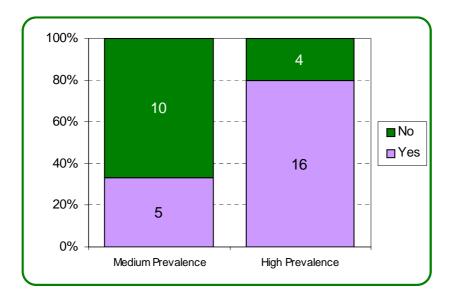


Figure 2-5. Number of Ministries involved in applications to the Global Fund (GFATM)

26% or 9 medium or high prevalence countries indicated that the only financial

resource available within the Ministry for HIV/AIDS response was foreign aid. A

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higher proportion of the high prevalence countries indicated they merely supplemented their state allocation with foreign aid.

	Yes	No
Medium prevalence	43%	57%
riedium prevalence	(6)	(8)
High provalence	85%	15%
High prevalence	(17)	(3)

Table 2-5. Countries whose financial resources consist only of foreign aid

While many countries have

established sub national

HIV/AIDS management

structures, these appear to

have more junior staff

appointed to them than the

national structures.

Structures at a sub-National Level

Existence of HIV/AIDS structures at a sub-National Level

Creating multiple layers of HIV/AIDS management structure – at national, regional, district and school levels – is time

consuming and requires considerable investment in human resources. This approach must surely have long-term benefits, particularly as the key point of the education sector's HIV/AIDS response must be at the district and local level⁵. For the purpose of the Global Readiness Survey, *Regions*

refer to any geographic division of the country below the national level, and might include regions, districts, divisions etc.

While 77% or 26 medium or high prevalence countries had regional structures in place to implement a

response to the HIV/AIDS pandemic, 91% (or 31 medium or high prevalence countries) of the same group had national structures. A regional structure was defined as a dedicated structure or committee consisting of two or more individuals whose primary task is to manage the Ministry's regional level response to the

impact of HIV/AIDS. All but 2 countries, one medium and one high prevalence, indicated that the regional structures include senior staff.

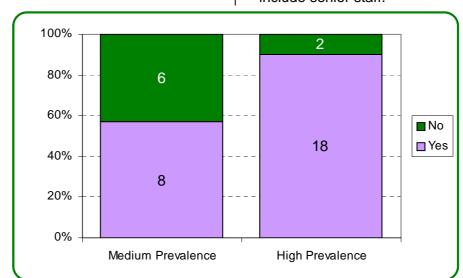


Figure 2-6. Number of countries with sub-national structures in place

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Funding of regional HIV/AIDS structures

Medium and high prevalence countries were requested to indicate whether their regional structures had their own budgets. Only 7 countries, all high prevalence, indicated that regions had their own budgets. However 72% (18 countries) indicated that their regional structures had no budget allocation. This is particularly problematic as the key to response lies in decentralized implementation.

While national implementation planning provides contextual guidelines, variations in impact at the district and local level demand the empowerment of decision-making and provision of adequate resources to mount response at these levels. It is incumbent on Ministries of Education in the AIDS era to recognize the need to review central planning and

funding controls, and instead facilitate decentralised and prioritized response management.

This extends to the sub-division of resources to enable district and local Ironically, this approach may delivery. also provide much more detailed and realistic implementation planning, and consequently expedite the draw-down and application of such resources. Operational experience confirms that district-level officials are quite capable of programming decentralized budgets and more likely to report effectively on expenditure under their direct control.

The funding of regional structures is therefore of the highest importance, as is the attitude of Ministries in this regard.

	Yes	No
Modium provolence	0%	100%
Medium prevalence		(0)
High provalence	39%	61%
High prevalence	(7)	(11)

Table 2-6. Countries whose sub-national structures have their own budget

Structures within education institutions

One question within the Global Readiness Survey related to the existence of HIV/AIDS response structures within education institutions. Education Ministries, in high prevalence countries, were requested to indicate if there were working groups or committees in such institutions that address internal and external HIV/AIDS-related matters. 90%

countries) indicated that such committees were in place at education institutional level. The value of these structures cannot be over-emphasised. These committees can play a vital role in focusing attention building and partnerships between institution-based structures, the community, NGOs and other important partners.

Self-assessment and prioritisation

Rating the state of readiness with regard to HIV/AIDS structures

For each of the sections within the Global Readiness Survey, the Ministries were asked to rate themselves according to a five-point scale. The intention was to gain an understanding of how Ministry officials rate their state of readiness in relation to

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HIV/AIDS management structures. One country elected not to complete this section. While the median for each of the prevalence groups was 'average' or a score of three, no high prevalence country

awarded itself the lowest score in the selfassessment exercise and no medium prevalence country indicated the highest score.

	Self assessment ranking							
	1 2 3 4 5 (high)							
	(low)							
Low prevalence	8	5	12	9	1			
Medium prevalence	1	6	4	4	0			
High prevalence	0	2	9	5	4			
TOTAL	9 (13%)	13 (19%)	25 (36%)	18 (26%)	5 (7%)			

Table 2-7. Distribution of countries by prevalence according to self-assessment ranking of HIV/AIDS structures

The majority of the high and low prevalence countries awarded themselves an average score while the majority of the medium prevalence countries rated themselves just below average.

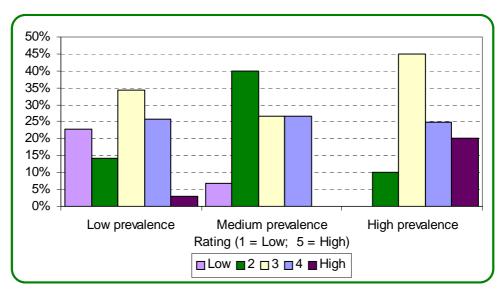


Figure 2-7. Self-assessment rating of countries for Ministry of Education HIV/AIDS structures

Ranking the importance of funding HIV/AIDS structures

Ministries were asked to rank their priorities in order of importance for funding, where 1 was considered to be most important and 9 to be the least important. The median for this ranking was three for medium prevalence countries, four for high prevalence countries and five for low prevalence

countries. In each of the prevalence categories, there were Ministries that identified funding to support the HIV/AIDS structures to be most important, (by selecting category one); while in low prevalence countries not a single Ministry indicated that it was least important (category 9).

Ranking the importance of funding for HIV/AIDS structures

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	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	13%	13%	13%	13%	0%	9%	22%	19%	0%
Medium prevalence	27%	20%	7%	0%	13%	7%	0%	0%	27%
High prevalence	16%	16%	5%	16%	11%	16%	11%	0%	11%
TOTAL	17% (11)	15% (10)	9% (6)	11% (7)	6% (4)	11% (7)	14% (9)	9% (6)	9% (6)

Table 2-8. Priority ranking for funding Ministry of Education HIV/AIDS management structures

Medium and high prevalence countries considered the ranking for the funding of HIV/AIDS structures to be more important than low prevalence countries. When considering the country ranking,

regardless of prevalence grouping, 41% of the countries considered the funding of HIV/AIDS structures to be important by scoring it a 1, 2 or 3.

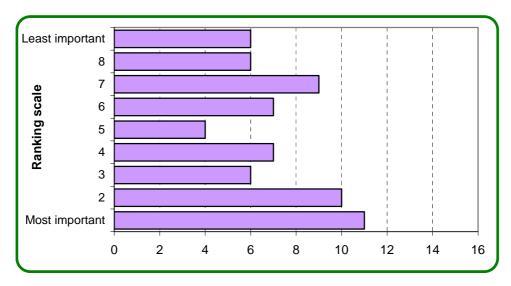
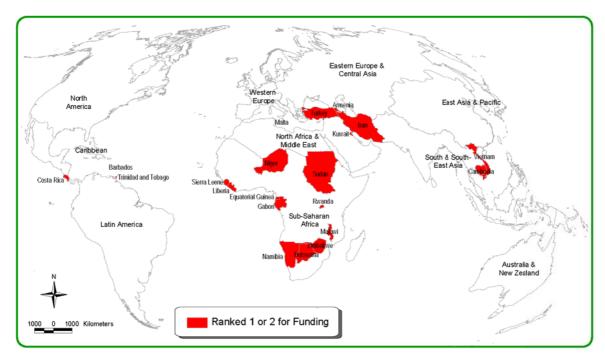


Figure 2-8. Combined ranking of the importance of funding Ministry of Education HIV/AIDS structures

A total of 21 countries ranked Ministry of Education HIV/AIDS management

structures as their first or second priority for funding.

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Map 2-2. Distribution of countries ranking Ministry of Education HIV/AIDS structures as priority 1 or 2 for funding

Ranking the importance of technical assistance for HIV/AIDS structures

Ministries were asked to prioritise the importance of funding technical assistance for HIV/AIDS structures, where 1 was considered to be most important and 9 to be the least important. The median for this ranking was identical to that for the funding of HIV/AIDS structures: three for medium prevalence countries, four for high prevalence countries and five for low

prevalence countries. Again, in each of the prevalence categories, there were some Ministries that identified technical assistance to support the HIV/AIDS structures as most important (category 1), while in low prevalence countries not a single Ministry believed it to be least important (category 9).

	Ranking the importance of technical assistance for HIV/AIDS structures								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	18%	9%	12%	9%	6%	6%	18%	21%	0%
Medium prevalence	27%	7%	0%	7%	13%	7%	13%	7%	20%
High prevalence	21%	5%	%%	5%	16%	5%	11%	11%	21%
TOTAL	21% (14)	7% (5)	7% (5)	7% (5)	10% (7)	6% (4)	15% (19)	15% (19)	10% (7)

Table 2-9. Priority ranking of technical assistance for Ministry of Education HIV/AIDS structures

There is no clear distribution pattern of the need for technical assistance amongst countries. Some countries, even those within the same prevalence grouping, indicated that providing technical assistance to the Ministry of Education HIV/AIDS management structure was very important, as 36% of the respondents

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scored this with a 1, 2 or 3, while 40% indicated it to be less important by

assigning a score of 7, 8 or 9.

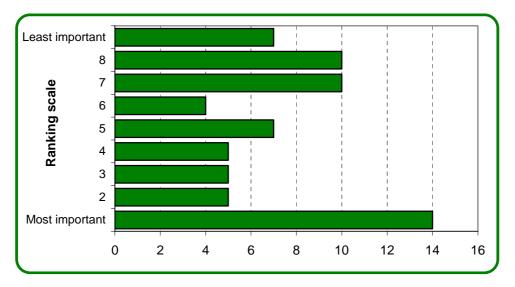


Figure 2-9. Combined ranking of the importance of technical assistance for Ministry of Education HIV/AIDS structures

References:

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¹ UNAIDS website: www.unaids.org/en/..../the three ones

² Botswana respondent provided comment on the completed survey submitted.

³ Smart, R: *Management Structures*, forthcoming training module, MTT/IIEP 2005

www.theglobalfund.org accessed on 30/12/04

⁵ Smart, R: *Management Structures*, forthcoming training module, MTT/IIEP 2005

Enabling Environment for an Effective Response

Section Overview

The HIV management structures described earlier cannot operate in isolation and need an enabling environment to be truly effective. An enabling or supportive environment is critical given that it provides the framework in which a suitable response to the challenges of HIV/AIDS can develop and evolve. This section of the survey aimed to assess the supportiveness of the broader political and regulatory environment in facilitating an appropriate response to the impacts of HIV/AIDS on education.

Ministries were asked whether their Minister of Education speaks out publicly about HIV/AIDS impact issues and whether this is dealt with at regular management meetings. The focus then moved to policy issues that might inhibit the entry of learners into the system

One high prevalence country

has not heard their education

minister speak publicly

or their retention in the system. Ministries also had to indicate if they had a specific HIV/AIDS or workplace policy and whether rules and regulations had been reviewed in light of the impact of HIV/AIDS and its implications.

The majority of the questions within this section were provided to countries of high, medium and low prevalence.

Over the years, one of the greatest obstacles to developing effective national AIDS responses is a lack of political will to tackle, or even talk about, the AIDS epidemic. Political commitment has recently increased in the hardest-hit countries. Still, in many countries where HIV is quickly spreading, such as those in Asia and Eastern Europe, a lack of leadership raises fears these countries will not adequately address the epidemic until is it too late

2004 Report on the global AIDS epidemic,

Leadership

Countries that are cited as providing a valuable response to the impact of

HIV/AIDS and those reporting a drop in HIV prevalence are likely to have strong political leadership with charismatic individuals who speak out publicly about HIV/AIDS and advocate the need for action to mitigate its impact. It was considered important, in the Global Readiness Survey, to gauge the perceived and

visible public involvement of Ministers of Education in the fight against HIV/AIDS. Over 95% (19 countries) of the high prevalence countries indicated that they had heard their Education Minister speak

> publicly about the impact of HIV/AIDS on the education sector, while the same can be said for 73% (11 countries) of the medium prevalence - but only 57% (20 countries) of the low prevalence countries.

> Ministries of Education were asked whether HIV/AIDS was a standing item on the agenda of

senior education management meetings, and indicated the following:

about the impact of HIV/AIDS on the education sector. 43% or 15 low prevalence countries can claim the same.

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	Yes	No
Low prevalence	50%	50%
Low prevalence	(17)	(17)
Medium prevalence	36%	64%
Medium prevalence	(5)	(9)
High prevalence	80%	20%
Tilgii prevalence	(16)	(4)

Table 3-1. Countries with HIV/AIDS as a standing item on the agenda of senior education management meetings

79% or 15 of the high prevalence countries that responded, indicated that HIV/AIDS was an important issue that was dealt with at Teacher Union meetings, and as such was a standing item on the

agenda of their meetings. 53% or 8 countries of medium prevalence indicated the same. This question was not asked of low prevalence countries.

School admission fees

School fees pose significant problems for AIDS-affected households; families simply cannot afford them. It is the primary reason children are withdrawn from school

The impact of HIV/AIDS on education in South Africa, Peter Badcock- Walters, 2001

One of the six *Education For All*¹ goals adopted in Dakar, Senegal, is:

'to ensure that by 2015 all children, particularly girls, children in difficult circumstances and those belonging to ethnic minorities, have access to and complete free and compulsory primary education of good quality'

Of the 70 countries that responded to the question regarding whether the country

offered free education, 8 countries or 11% indicated that they do not have free education. It is important to note that Ministries of Education indicated whether or not free education was provided at all levels; as a result, the many countries that offer only free education to primary levels may be concealed within the reported figures.

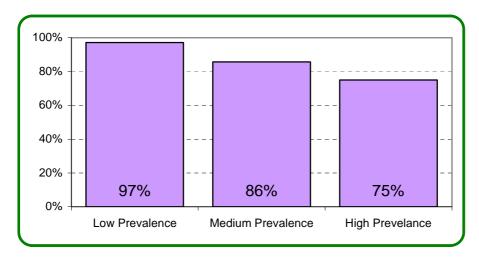


Figure 3-1. Proportion of schools that offer free education

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HIV/AIDS has created a greater sense of urgency in efforts to attain the *Education* for All goals and in turn has made the attainment of these harder. Most countries, 86% of the respondents in fact,

indicated that they have put in place the necessary regulations for schools and other education institutions, in terms of their admissions and fees policy.

	Yes	No
Low prevalence	84%	16%
Low prevalence	(27)	(5)
Modium provolonco	79%	21%
Medium prevalence	(11)	(3)
High provolence	95%	5%
High prevalence	(18)	(1)

Table 3-2. Countries that have regulations regarding admissions and fees

62% of the countries (33 countries) indicated that where fees are applicable, there are regulations that provide for the exemption from school fees for children

from poor families. However a high proportion of the respondents elected not to respond to this specific question.

HIV/AIDS policy development

Policies and strategic plans on HIV/AIDS are the foundations for any meaningful and sustained response to the epidemic. A policy provides an operating framework for people whose jobs entail prevention, treatment, care, support and generally reducing the impact of the epidemic on the population. Policies can include principles on Human Rights for all, and, specifically the rights of persons living with HIV/AIDS. They can also include strategies for reducing vulnerability to HIV/AIDS for specific groups. A country's policy on HIV/AIDS is a useful guide to domestic and international resource allocation to support specific programmes. Without a policy, those managing the response to HIV/AIDS have no sense of national direction. The policy directs the creation of strategic plans and the allocation of funds to activities aimed at achieving the stated objectives of the management of the HIV/AIDS situation.

An audit of HIV/AIDS policies in Botswana, Lesotho, Mozambique, South Africa, Swaziland and Zimbabwe, Human Sciences Research Council, 2004

In June 2000, 189 countries signed the Declaration on the Commitments on HIV/AIDS at the United Nations General Assembly, Special Session on HIV/AIDS².

This declaration stated that by 2003 countries should have developed multi-sectoral, national strategic plans that specifically address the HIV/AIDS epidemic. Very many national policies have been developed, led either by Ministries of Health, National AIDS Councils or similar

bodies. In addition to a national HIV policy, there is a need to develop HIV policies for the Education Sector that are in line with national policies.

Several Ministries of Education have responded to the need to develop a sector specific HIV/AIDS policy for the Education sector, to provide a legal and policy

framework for action. Sectorspecific policy is vital in addressing the particular needs of Education and its various constituencies. Such policy provides a comprehensive overview of the issues and should address prevention, care and support, workplace issues

and management of the response. It should be contextualized by the National Policy framework and be consistent with national laws, guidelines and regulations. Education sector HIV/AIDS policy should

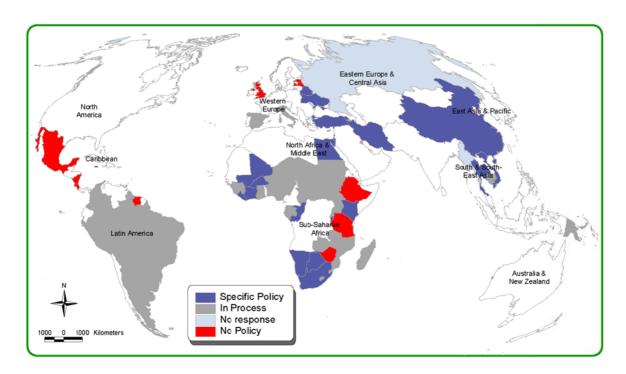
Ministries of Education are committed to the management of the HIV/AIDS epidemic and 32 % have adopted a sector specific HIV/AIDS policy and another 52% are in the process of developing this policy.

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be based on guiding principles, prioritize key issues and ensure every stakeholder in education understands their rights and responsibilities. Such a policy should also make a clear commitment to action and represents a public statement of intent against which the sector should be held accountable.

Some 84% of the countries responding indicated that they have adopted a sector specific HIV/AIDS policy (22 countries) or are in the process of developing the policy

(35 countries). Only 11 of the countries that responded to this specific question indicated they did not have an education sector specific HIV/AIDS policy. Of these 11 countries, 10 indicated that HIV/AIDS issues are addressed in other policies governing the education sector. However operational experience suggests that there may be definitional confusion over what constitutes an Education sector HIV/AIDS policy, and there may be assumptions involved that require further probing.



Map 3-1. Distribution of Ministries of Education that have a specific HIV/AIDS policy

In the AIDS era, the workplace must be characterised by non-discriminatory labour practices and terms and conditions of service that are sensitive and responsive to the impact of HIV/AIDS. The workplace is central to the supply of education and is most visibly at risk in terms of temporary and permanent attrition. Issues of prevention, treatment, care and support, training and replacement are all directly and indirectly linked to the workplace. It is also the point at which the Ministry of Education and its professional and development partners come together to HIV/AIDS impact. mitigate Several

Ministries have identified the need to develop a workplace policy relating to HIV/AIDS. For the purposes of the Global Readiness Survey, a workplace policy was viewed as a document of intent describing the objectives in relation to HIV/AIDS in the workplace, addressing issues such as non-discrimination, safety workplace, prohibition of compulsory HIV testing. confidentiality. openness. support acceptance, and care employees living with HIV, reasonable accommodation for HIV employees, benefits, dismissals and the development of a workplace programme.

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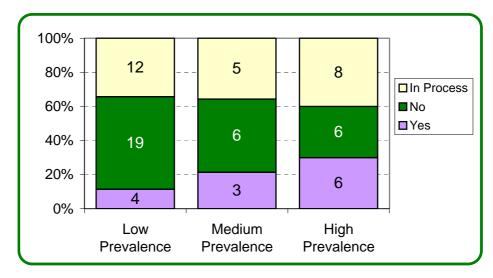


Figure 3-2. Ministries of Education that have workplace policies relating to HIV/AIDS

Of the 13 countries that indicated they have an HIV/AIDS workplace policy, 10 claimed that Ministry of Education were employees involved in its development. Of the 25 countries that are still in the process of developing such a policy, 12 indicated that Ministry of Education employees were also involved in its development. And of those countries that claimed to have HIV/AIDS workplace policy in place, 7 stated that this policy is regularly reviewed.

When asked if other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS, 42% or 27 countries responded in the affirmative. The distribution of this response across prevalence categories is as follows:

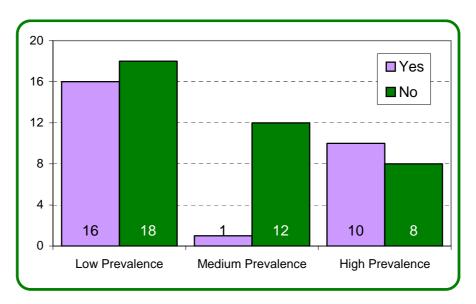


Figure 3-3. Ministries of Education in which rules and regulations have been reviewed with regard to the impacts and implications of HIV/AIDS

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Self-assessment and prioritisation

* Rating the state of readiness of the 'Enabling Environment for an Effective Response'

The Ministries of Education were asked to rate themselves according to a five-point scale. One country elected not to complete this section. For the component, 'enabling environment', the median for low and medium the prevalence groups was

three, while the median was slightly higher for the high prevalence group – a median of four. The spread of the scores amongst all the countries was in the higher rankings, between 3 and 5.

	Self assessment ranking								
	1	1 2 3 4 5 (high)							
	(low)								
Low prevalence	5	8	9	8	5				
Medium prevalence	3	3	5	3	1				
High prevalence	1	0	7	9	3				
TOTAL	9 (13%)	11 (16%)	21 (30%)	20 (29%)	9 (13%)				

Table 3-3. Distribution of countries according to self-assessment ranking of their enabling environment

The majority of the low and medium prevalence countries awarded themselves an average score while many of the high prevalence countries rated themselves above average, by allocating a score of 4.

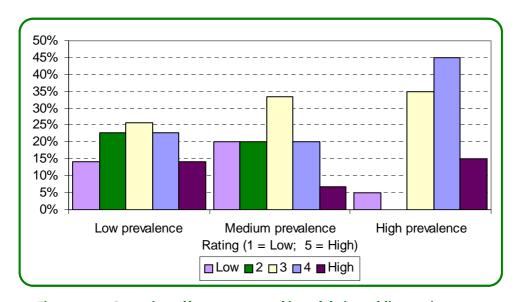


Figure 3-4. Countries self assessment ranking of their enabling environment

Ranking the importance of funding an 'Enabling Environment'

Ministries were asked to rank the importance of funding an 'enabling environment' in which 1 was considered to be most important and 9 to be the least important. The median for this ranking

was 4.5 for low prevalence countries, five for medium prevalence countries and six for high prevalence countries, indicating that higher prevalence countries consider funding for the enabling environment to be

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less important than low prevalence countries. In each of the prevalence categories, there were Ministries that identified funding to support the HIV/AIDS structures as most important (by selecting

category 1), while it was only amongst the high prevalence countries that some considered it to be of least importance by assigning it as a category 9 rating.

•	Ranking the importance of funding for an Enabling Environment									
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)	
Low prevalence	9%	6%	19%	16%	19%	19%	6%	6%	0%	
Medium prevalence	7%	7%	7%	20%	33%	7%	0%	20%	0%	
High prevalence	5%	11%	16%	0%	5%	16%	11%	21%	16%	
TOTAL	8% (5)	8% (5)	15% (10)	12% (8)	18% (12)	15% (10)	6% (4)	14% (9)	5% (3)	

Table 3-4. Ranking of the priority for funding the area of 'Enabling Environment'

Most the medium and low prevalence countries considered the ranking of funding for an enabling environment to be a more important issue than high prevalence countries. Most of the medium

and low prevalence countries ranked its importance between 4 and 6, while 47% of the high prevalence countries ranked this issue at a level of importance between 7 and 9.

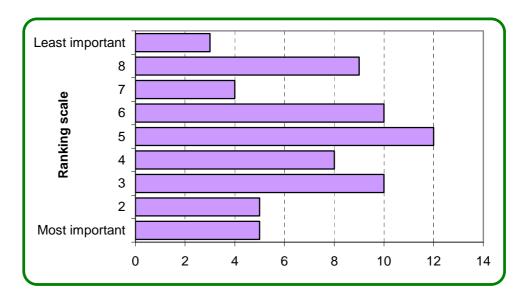


Figure 3-5. Combined ranking of the importance of funding an enabling environment

Ranking the importance of funding for technical assistance for 'Enabling Environment'

Ministries were then asked to rank the importance of funding technical assistance to assist in developing an enabling environment. The median for this ranking was five for low and medium prevalence countries and two categories higher for high prevalence countries. This

again points to the fact that higher prevalence countries consider technical assistance for an enabling environment to be less important than do low and medium prevalence countries. Two low prevalence and one high prevalence country identified technical support to support an enabling

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environment to be most important (by selecting category 1), while three high prevalence countries and one medium prevalence country considered it to be of least importance by assigning it a category 9 rating.

	Ranking	Ranking the importance of funding technical assistance for an enabling environment									
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)		
Low prevalence	6%	3%	18%	21%	21%	9%	12%	9%	0%		
Medium prevalence	0%	2%	2%	2%	2%	4%	2%	0%	1%		
High prevalence	5%	5%	5%	0%	2%	\$%	2%	5%	3%		
TOTAL	4% (3)	6% (4)	13% (9)	13% (9)	16% (11)	16% (11)	12% (8)	12% (8)	(6% (4)		

Table 3-5. Ranking of the priority for technical assistance for 'Enabling Environment'

30% of the countries ranked technical assistance in creating and maintaining an enabling environment to be less important, while 23% considered it to be most important. 45% of the countries considered it to be of average importance

by assigning their ranking within the band of 4 and 7. Technical assistance in creating and maintaining an enabling environment was fairly evenly distributed around the bands of 5 and 6.

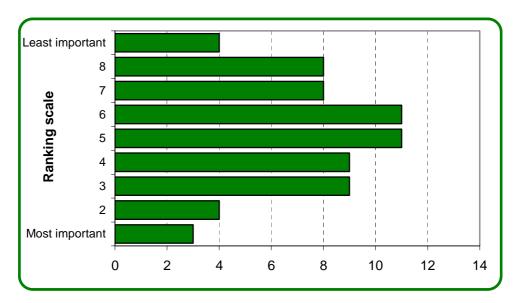
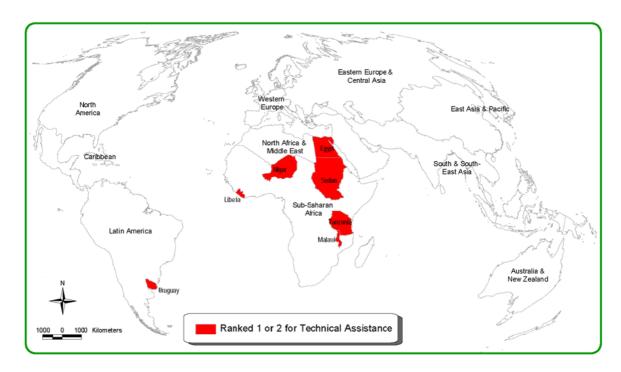


Figure 3-6. Combined ranking of the importance of technical assistance for an enabling environment

Only seven countries ranked Enabling Environment as a very high priority for Technical Assistance. Five of these are in Sub-Saharan Africa and the remaining two are in North Africa and Latin America.

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Map 3-2. Distribution of countries ranking an enabling environment as Priority 1 or 2 for technical assistance

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References:

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¹ Education for All website: www.unesco.org/education/efa/index ² APCASO: *Making UNGASS work, 2nd edition,* APCASO, Malaysia, 2004

4 HIV/AIDS Mainstreaming

Section Overview

Mainstreaming means just what it says: In the context of managing and mitigating the impact of HIV/AIDS on education, it literally implies locating that response in the main current of education system management and administration. It assumes that HIV/AIDS is a systemic management problem, rather than a public health issue intruding briefly on the business of teaching and learning. Acceptance of HIV/AIDS as a mainstream issue locates it at the heart of policy, planning, implementation, delivery, monitoring and reporting. It acknowledges that for the foreseeable future, notwithstanding a medical breakthrough, HIV/AIDS will take centre-stage in the working lives of education professionals at every level.

This Global Readiness Survey has already established the extent to which education sector HIV/AIDS policy has been developed, particularly in respect of workplace policy. This

section reviews the central importance of the planning, implementation, management information and monitoring issues inherent in such mainstreaming. The availability of dependable data, and its rapid analysis to provide an effective decision support system for system managers, is mission-critical if Ministries and their development partners are to identify and monitor the extent of HIV/AIDS impact. As matters stand, many systems in developing country

"Without attention to the management of education systems, and efforts to improve the overall quality of education, HIV/AIDS prevention and impact mitigation must surely fail"

HIV/AIDS & Education: A Strategic Approach, IATT 2003

Ministries have begun to adapt to the routine capture of HIV and AIDS-sensitive indicators; simple additions, such as capturing school-level data on teacher and pupil mortality, as has been done in South Africa's EMIS, can have considerable value and enhance decision making effectiveness. The seriousness of the data issue – both for the monitoring of HIV/AIDS impact and the effective, routine functioning of the system – can not be overemphasised and begs the rapid development of supplementary management information systems at the district level.

This section also questions whether or not strategic plans – if developed – have been implemented; it asks whether or not HIV/AIDS is explicitly considered in the Ministry's mainstream planning processes; it probes the existence of education management information systems and whether or not these have been reviewed to ensure sensitivity to HIV/AIDS indicators and issues. The issue of HIV/AIDS incorporation in decentralised planning is questioned, as is the collection of HIV/AIDS relevant data at this level – in other words, has response moved beyond the security of central planning to the point of delivery. And finally, it asks if a sector impact assessment has been conducted or is planned. These are self-evidently all key issues, fundamental to protecting the education system from the erosive assault of the pandemic.

The questions in this section were only asked of high and medium prevalence countries.

Strategic Planning

Of the 35 high and medium prevalence countries responding to the Global Readiness Survey, nearly 80% indicated that they did have an education sector HIV/AIDS strategic plan. Four that did not were medium prevalence countries and three high prevalence countries in Sub-Saharan Africa: Central African Republic,

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Sierra Leone and Swaziland, also stated that they did not. These assertions are very positive, but may require further investigation as field experience suggests that *experience* of strategic planning workshops and other processes may be confused in some cases with the finalisation, adoption and publication of an encompassing sector plan per se.

This is also true of the perceived availability of completed action plans for implementation, queried in the next question; any future survey might do well to seek clarification on whether or not such a plan is current, sector-wide, inclusive, implementable and fully costed. What is significant is that Ministries recognised the importance of having such a plan however.

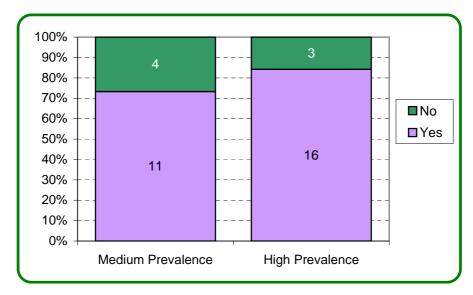


Figure 4-1. Countries which have an education sector HIV/AIDS strategic plan

A follow up question in the survey asked Ministries to indicate whether their strategic plan had an associated action plan dealing with implementation issues. Perhaps not surprisingly, all but one of the countries stated that an implementation

action plan did exist. Cote d'Ivoire did not at the time of completing the survey have an action plan for implementing their HIV/AIDS strategic plan.

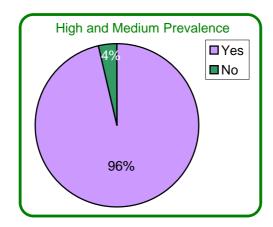


Figure 4-2. Countries with an action plan for implementing the Education Sector HIV/AIDS Strategic Plan

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Planning Processes and HIV/AIDS

Ministries of Education in high and medium prevalence countries were requested to indicate whether at the national level HIV/AIDS was explicitly considered and reported on in the planning process. Several examples of the ways in which HIV/AIDS might be considered and reported on were provided such as:

- Increased pupil and teacher attrition and absenteeism
- · Effects on the fee income of schools

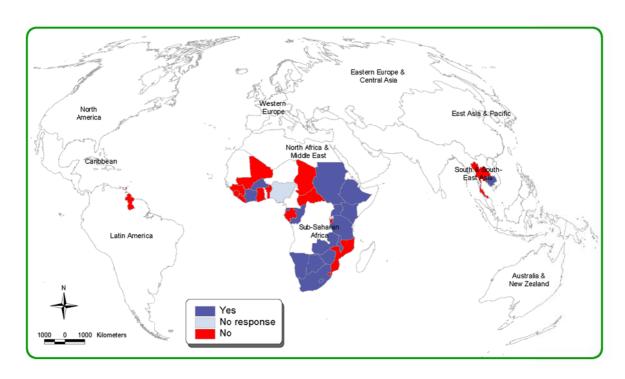
 An examination on the vulnerability of education plans to the impact of HIV/AIDS

The response suggests that high prevalence countries are much more likely than medium prevalence countries to have integrated HIV/AIDS into their planning and reporting. It is still disconcerting to note that over one quarter of high prevalence countries have not done so.

The majority of medium prevalence countries had not yet taken this initiative.

	Yes	No
Medium prevalence	4 (29%)	10 (71%)
High prevalence	14 (74%)	5 (26%)

Table 4-1. Countries in which HIV/AIDS is explicitly considered and reported on in the planning process



Map 4-1. Distribution of high and medium prevalence countries that indicated whether their planning process included, integrated and reported on HIV/AIDS

Education Management Information Systems

Education Management Information Systems (EMIS) have a crucial role to play in the provision of data and support for HIV/AIDS planning. Traditionally they have been used to routinely collect information for schools relating to enrolment, numbers

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and characteristics of teaching staff, equipment and physical infrastructure on an annual basis.

Increasingly EMIS systems are being required to provide more regular strategic information and indicators that point to seasonal fluctuations in learner numbers, increasing rates of pupil drop-out, teacher attrition etc. This trend is far from universal though, due to the limitations of some of these systems, and it is sometimes the case that even basic planning information relating to schools, enrolment or teachers

is incomplete, error-prone and past its sellby date.

Most high and medium prevalence countries indicated that had an EMIS system. For those that did not, one can assume that political instability and/or other socio-political or infrastructural problems have created difficulties in maintaining records and statistics, but that the process of building an EMIS is underway.

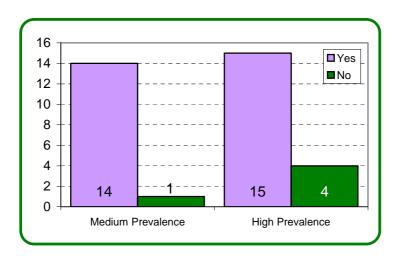


Figure 4-3. Number of high and medium prevalence countries with an Education Management Information System (EMIS)

Over half of high and medium

prevalence countries had not amended their EMIS systems to

include HIV/AIDS sensitive

indicators

Countries with an EMIS unit were asked a further detailed question to ascertain whether it was functioning in a 'business

as usual mode' or had been modified to include HIV/AIDS sensitive indicators.

Examples were provided of modifications to annual School Census surveys to monitor illness and death

among teachers, orphaning, reasons for teacher attrition and school drop-outs. It is pleasing to report that there are many current instances where such modifications have been actioned in Sub-Saharan Africa. This information could both be gathered and reported on an

annual basis and sometimes even more regularly.

Over half of the responding countries with EMIS systems indicated that no such modifications had yet taken place. Two thirds of high

prevalence countries had however reviewed and amended their systems to include such HIV/AIDS sensitive indicators – a very gratifying development.

	Yes	No
Medium prevalence	2 (15%)	11 (85%)
High prevalence	10 (67%)	5 (33%)

Table 4-2. Countries in which EMIS systems been reviewed and amended to include HIV/AIDS sensitive indicators

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74% of the high

prevalence countries

indicated that district

planning took

HIV/AIDS into

consideration

HIV/AIDS and District Planning

The responsibility for dealing with the impacts of HIV/AIDS on the education system (and sector) lies first and foremost with the national Education Ministry, yet issues of implementation and response are largely dependent on structural and human resource capacity at sub-national levels.

The disconnection between centralised policy and planning and the realities of sustained delivery at the district and local level is not a new issue. However, in the AIDS era, this administrative and logistical disconnection has taken on a

more disturbing dimension as district managers deal literally with issues of organisational human and survival. Effective HIV/AIDS response must of operational necessity move to accommodate more decentralised planning and responsibility, albeit with appropriate training and budgetary support.

One dimension of this strategic need is the move to empower district level officials with locally relevant data collection and monitoring systems. A number of countries in southern and East Africa are taking steps in this direction and anticipate monthly or quarterly reporting of key HIV/AIDS indicators in future. In this section of the survey, countries were asked whether HIV/AIDS was considered when making district-level plans. For

these purposes a district referred to any geographical sub-division of a country, which, depending on country-specific terminology, may be known as a region, province or division.

The response reflects the operational realities of Education

Ministries in high prevalence countries: fourteen out of the nineteen indicated that district planning took HIV/AIDS into consideration. The five that indicated they did not were Central African Republic, Cote d'Ivoire, Malawi, Mozambique and Swaziland.

By contrast, amongst medium prevalence countries, only a third (5 out of 15) stated that they included HIV/AIDS in the district planning process.

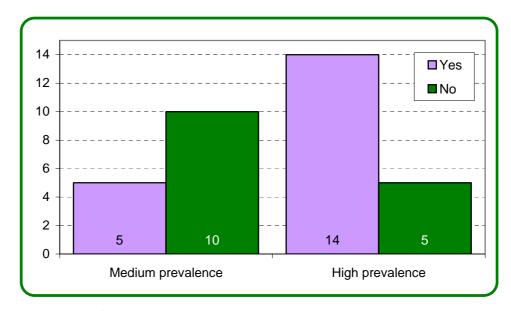
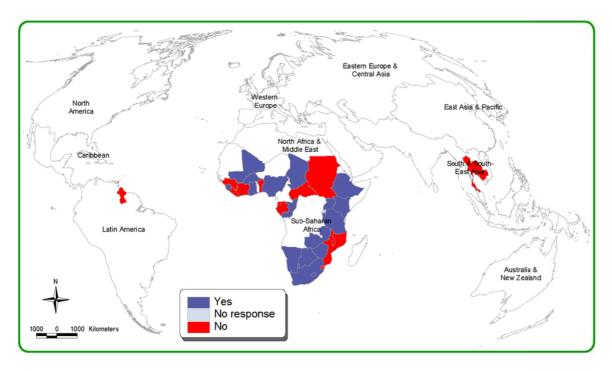


Figure 4-4. Number of countries in which HIV/AIDS is considered when making district level plans

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Map 4-2. Distribution of high and medium prevalence countries which consider HIV/AIDS when making district level plans

A critical input to national and district planning is the availability geographically disaggregated indicators of impact. Some countries have, in addition to maintaining a national EMIS system, opted to empower district officials to capture and analyse indicators of local HIV/AIDS impact. This decentralised approach yields major benefits and is likely, in addition, to lead to better quality of data since the point of collection and review is much closer to schools.

Of concern is the fact that amongst the high prevalence countries that responded, less than half were currently collecting HIV/AIDS data at the district level. These included Burkina Faso, Central African Republic, Congo, Kenya, Lesotho, South Africa, Uganda, Zambia and Zimbabwe. However, several of these are known to be addressing this issue and will be collecting such data in 2005.

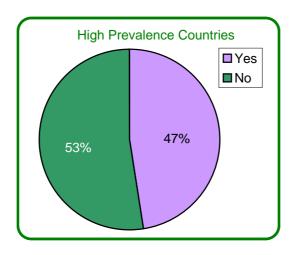


Figure 4-5. Countries in which HIV/AIDS relevant data is being collected at the district level

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Impact Assessments

The purpose of an impact assessment is to provide a baseline planning tool for education system management, and in particular to provide an input to the Ministry's strategic development planning process. Importantly, it should be a practical study to provide practical information to guide decision-making and management response; it should not be an academic study and must be accessible in language and style to system managers at Such studies should be all levels. purpose designed to meet the needs of a given Ministry and take cognisance of the HIV prevalence levels within which it operates.

Typically, an impact assessment might ascertain the current and projected levels of impact of HIV/AIDS on the country's education system; second it might assess the opportunities for remedial action, both in terms of service provision to learners, and in terms of the role of education in containing the epidemic. In light of the time and cost involved in commissioning full impact assessments, an increasing

number of Ministries are opting for rapid sector assessments. These may take a fraction of the time of a full assessment and cost very little, but may not provide quite the same level of detail or indeed a baseline planning tool.

High prevalence countries were asked whether they had conducted assessment of the impact of HIV/AIDS on the education sector. The majority (eleven out of nineteen that responded) confirmed that an impact assessment had been conducted. Of the eight that had not yet conducted an assessment, indicated that one was planned. This underlines the strategic value of such assessments and growing recognition of their value.

The remaining two high prevalence countries that responded, Malawi and Sierra Leone, stated that an education sector impact assessment was not planned at present.

	Yes	No
An assessment of the impacts had been conducted	11 (42%)	8 (56%)



	168	INU
An assessment was planned	6 (75%)	2 (25%)

Table 4-3. Number of countries in which an assessment of the impact of HIV/AIDS on the education sector has been conducted or is planned

Self-assessment and prioritisation

Rating the state of readiness in the area of 'HIV/AIDS Mainstreaming'

Ministries in high and medium prevalence countries were asked to rate themselves on a scale of 1 to 5, where 1 = low and 5 = high in terms of the importance of HIV/AIDS mainstreaming. The median for both prevalence groups was 3, implying an average rating.

No high prevalence country awarded itself the lowest score (1) in the self-assessment exercise and no medium prevalence country indicated the highest score.

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	Self assessment ranking							
	1 (low)	2	3	4	5 (high)			
Medium prevalence	3	1	6	5	0			
High prevalence	0	6	10	3	1			
TOTAL	3 (9%)	7 (20%)	16 (46%)	8 (23%)	1 (3%)			

Table 4-4. Distribution of countries according to self-assessment ranking of readiness in HIV/AIDS

Mainstreaming

All high prevalence country ratings were located between 2 to 5, with a tendency towards an average self-assessment rating of 3. Medium prevalence countries

were less satisfied with their performance; three of these rated themselves as 'poor' in terms of HIV/AIDS mainstreaming.

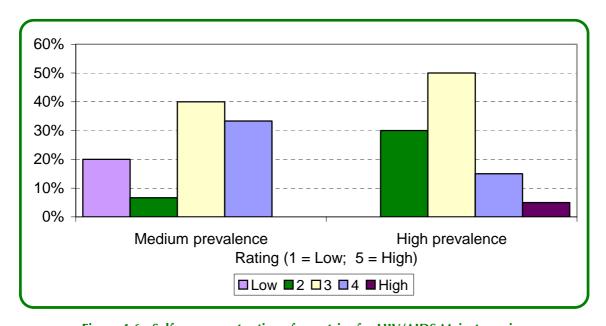


Figure 4-6. Self-assessment rating of countries for HIV/AIDS Mainstreaming

Ranking the importance of funding HIV/AIDS mainstreaming

Ministries were asked to rank the nine priority areas in the survey in order of importance for funding, from 1 to 9, where 1 was most important and 9 least important. The median for this ranking was 6 for medium prevalence and 5 for high prevalence countries. In both

prevalence categories, there were Ministries that identified funding to support HIV/AIDS mainstreaming as their most important priority (by selecting category 1). Only one Ministry indicated that it was least important (category 9).

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	Ranking the importance of funding for HIV/AIDS mainstreaming									
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)	
Medium prevalence	13%	7%	7%	13%	7%	33%	0%	13%	7%	
High prevalence	5%	16%	16%	11%	5%	11%	21%	16%	0%	
TOTAL	9% (3)	12% (4)	12% (4)	12% (4)	6% (2)	21% (7)	12% (4)	15% (5)	3% (1)	

Table 4-5. Ranking the importance of funding the Ministry of Education's Mainstreaming of HIV/AIDS

Medium and high prevalence countries gave a very varied ranking of funding for HIV/AIDS mainstreaming, with no clear pattern emerging. The most common rank was 6, which was given by 7 countries and errs towards the 'less important' end of the

scale. Nevertheless, seven countries assigned it a priority of either 1 or 2 and another eight gave it 3 or 4, which suggests it lies near the top of the priority list for funding for nearly half the countries.

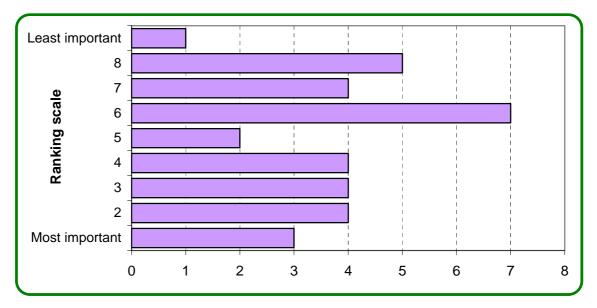
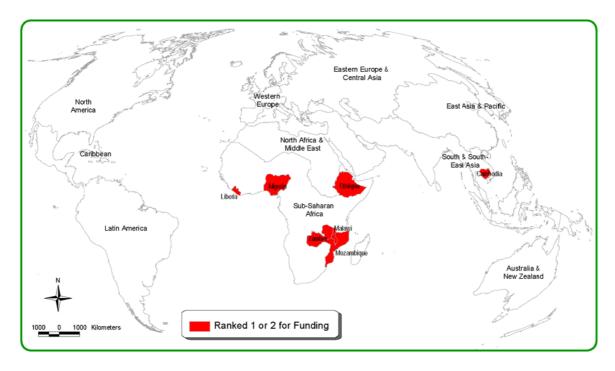


Figure 4-7. Combined ranking of the importance of funding HIV/AIDS Mainstreaming

Six of the seven countries that rated HIV/AIDS mainstreaming as the first or second funding priority were located in

Sub-Saharan Africa. The remaining one was Cambodia, in South East Asia.

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Map 4-3. Distribution of countries ranking HIV/AIDS Mainstreaming as Priority 1 or 2 for Funding

Ranking the importance of technical assistance for HIV/AIDS Mainstreaming

Ministries were also asked to prioritise the importance of technical assistance for HIV/AIDS Mainstreaming, where 1 was most important and 9 least important. The median for this ranking was 5 for both medium and high prevalence countries. Again, in both of the prevalence

categories, there were some Ministries that identified technical assistance to support HIV/AIDS Mainstreaming as most important (category 1). One medium prevalence country rated it their least important priority for technical assistance (category 9).

	Ranking the importance of technical assistance for HIV/AIDS Mainstreaming									
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)	
Medium prevalence	13%	13%	7%	13%	13%	7%	7%	20%	7%	
High prevalence	11%	21%	5%	0%	16%	11%	26%	11%	0%	
TOTAL	12% (4)	18% (6)	6% (2)	6% (2)	15% (5)	9% (3)	18% (6)	15% (5)	3% (1)	

Table 4-6. Priority ranking of the importance of technical assistance for HIV/AIDS Mainstreaming

There is no clear distribution pattern of the need for technical assistance amongst countries. Even though only one country rated it as least important, eleven considered it to be of low priority, rating it

7 and 8. At the other end of the scale 10 countries made it their top priority with a ranking of 1 or 2.

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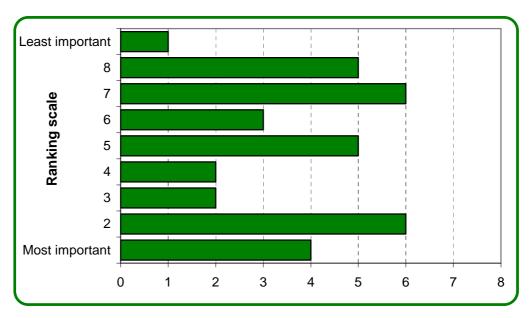


Figure 4-8. Combined ranking of the importance of technical assistance for HIV/AIDS Mainstreaming

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Human Resources adaptation to the impacts of HIV/AIDS

Section Overview

ducation sector human resources are central to the delivery of sustained and sustainable quality learning and teaching. In their analysis of ministry of education organisation, Sacks and Saïdi noted in 1997 that 'staff are the most precious resource of a Ministry of Education; it is they who, in the last analysis, determine the organisation's effectiveness and efficiency'¹. Given this analysis, Prof Michael Kelly notes eight-years later that 'HIV/AIDS makes it more difficult for an education system to ensure that there is a teacher in every class because teachers and other educators are dying in increasing numbers and at comparatively young ages; teachers who are ill are often unavoidably absent; rural posting of teachers is becoming more difficult because teachers who know they are HIV positive want to be near (urban) health facilities; and teachers leave teaching to take up employment in other areas where AIDS has created vacancies'².

The recruitment, pre- and in-service training, deployment and retention of professional human resources have *always* constituted a delicate balance of demand, supply and budget provision for Ministries of Education. In the AIDS era, this balance is often badly dislocated by impact at a number of levels, as demand and supply becomes increasingly unpredictable in what is, with few exceptions, the largest public sector workforce in any country. Teachers may be perceived to be in the front line, but managers, administrators, support and non-teaching staff are equally vulnerable. The challenge for Ministries of Education is to fully understand the nature and extent of HIV/AIDS impact as a long-term and arguably 'routine' problem, and begin to plan for its dynamic affects in an appropriate and creative way. In short, to throw the rule book out of the window and accept that it is no longer 'business as usual' in the planning, management and support of the sector's most valuable and expensive resource.

This section of the survey investigates key human resource issues in education. It aimed to acquire information relating to the adaptation of human resource procedures and functions in response to the impact of HIV/AIDS. Ministries were asked whether human resource policies had been amended to address issues of vulnerability. They were also asked whether studies

of the impact of HIV/AIDS had been undertaken and, if so, whether this had encouraged a re-think of human resource planning, such as increasing teacher training programmes. High prevalence countries were asked whether they were monitoring impact issues such as sick leave and pension costs and finally, the extent to which teacher guidelines for dealing with HIV/AIDS in schools had been developed and provided, was assessed. Three of the seven questions in this section only pertained to high prevalence countries and only two were asked of those with low HIV prevalence.

Human resource training and development

As part of the HIV and AIDS response, the Ministry of Education will be expected to liaise with other ministries and organisations in HR planning across the sector to sustain education delivery.

Each education sub-sector will ensure adequate monitoring and planning so that there is an adequate and efficient supply of appropriately skilled teachers and lecturers to meet the needs of education. This should consider attrition due to HIV and AIDS and other factors, and expected numbers of learners.

Kenya Ministry of Education, Science and Technology Education Sector Policy on HIV and AIDS 2004

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Human Resource Policies

Many countries are in the process of grappling with the complex human

resource issues that arise as a result of HIV/AIDS impact. Some are just starting to recognise the long-term impacts, whilst others have formalised their response through policy amendments and planning initiatives.

High and medium prevalence countries were asked to indicate whether human

resource policies had been amended to minimise vulnerability and susceptibility to HIV/AIDS. An example was cited of policies relating to deployment of teachers away from their families.

Two thirds of high and medium prevalence countries have not amended their human resource policies to reduce vulnerability to HIV/AIDS.

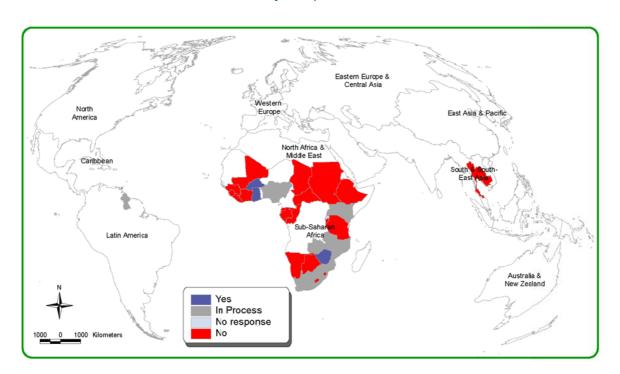
In nine countries, amendments were in process.

Nearly two thirds of responding countries indicated that no amendments to human resource policies or legislation had taken place. On a more encouraging note, one-quarter of respondent countries (9) indicated that amendments were in process, of which 6 were high prevalence. Only three countries stated that they

had reviewed and changed policies to factor HIV/AIDS, two of which were high prevalence and one medium.

	Yes	No	In
			Process
Medium	1	11	3
prevalence	(7%)	(73%)	(20%)
High prevalence	2	11	6
	(11%)	(58%)	(32%)

Table 5-1. Countries in which Human Resource Policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS



Map 5-1. Distribution of high and medium prevalence countries which have amended human resource policies to minimise vulnerability and susceptibility to HIV/AIDS

Demand and Supply of Human Resources

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'HIV/AIDS does not incapacitate or remove individuals all at once. Instead it whittles away steadily at the human resource base. Because of this, the need for management adjustment to many of the potential impacts of HIV/AIDS is not always immediately apparent. Education authorities in low or medium-prevalence countries may not see that their systems are at risk, whereas all the time, because of its insidious nature, the disease is relentlessly eroding overall systemic capacity'.

Michael J Kelly and Brendan Bain, Education and HIV/AIDS in the Caribbean, IIEP/UNESCO 2003

The supply of human resources to education should under normal circumstances be informed by policy and estimation of demand, but delivery may be constrained by budgetary, political or other In the classroom, demand for pressures. teachers based on policy goals or target pupil/teacher ratios may fall short of these targets for any number of reasons. other words, there has almost always been some measure of disconnection between supply targets and ground-level reality, even in the best ordered of systems.

In the AIDS era, this disconnection may widen quite dramatically – particularly in poorly resourced systems in high prevalence settings. Planning, theoretically based on sophisticated projections of enrolment, retention and transition, has been rendered meaningless in such circumstances and may even be suspect in much lower prevalence settings

Thus human resource demand and supply planners in education are having to come to terms with a set of entirely new challenges: HIV/AIDS impact must now

be seen and factored as a systemic problem at every stage of the recruitment, training, retention and retirement process. Compounding their affect on demand and supply are financial and budgetary implications that may demand a complete revision of, for example, the length of preservice training that can be made available to student teachers.

These are profoundly important issues with potentially massive direct and indirect budget consequences, even in medium and low prevalence settings. When Education Ministries in high prevalence countries were asked whether they had conducted an analysis of the impact of HIV/AIDS on the demand and supply of human resources, a relatively high number (over 50%, or 10 countries) indicated that they had. These included Central African Republic, Cote d'Ivoire, Ethiopia, Lesotho, Malawi, Mozambique, Namibia; South Africa, Zambia and Zimbabwe.

The remaining nine high prevalence country Ministries that responded stated that no analysis had yet taken place. One country did not respond.

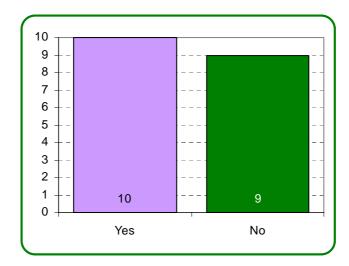


Figure 5-1. Countries that have done an analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector

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One of every four high

prevalence countries have

conducted an impact study

on demand and supply of

human resources and

changed human resource

planning as a result

A follow-up question for countries where a human resource impact study had been

conducted, asked whether tangible action had been taken as a result of the study. This could include, for example, changes in human resource planning such as efforts to increase the throughput of teachers by reducing the length of training.

Of the 10 countries that had conducted an impact assessment, in only two cases, (Namibia and Zambia), had there been

any change in human resources planning. This suggests that even though there is an

awareness of the human implications resource of HIV/AIDS, there has been a failure to respond by initiating necessary changes the human resource practices and planning. Alternatively, it is possible but by no means certain that the studies concerned may have concluded

that the human resource implications of such impact were not serious enough to warrant attention.

*

Succession planning of teachers

"While many countries lack reliable data on AIDS-related deaths and HIV prevalence among teachers, evidence points to an increased teacher mortality rate in the presence of HIV/AIDS"

Most high and medium

prevalence countries

have no plans at present

to train more teachers

A window of hope: education and the global epidemic of HIV/AIDS

World Bank (2002)

Countries experiencing severe HIV/AIDS epidemics have identified increasing attrition rates amongst their teaching force as a cause for grave concern. This

increase in attrition may be due to death or illness but also factors such issues as teachers leaving the teaching profession to care for their families or being attracted into other sectors of the economy as demand for scarce

management skills increases – a knock-on affect of HIV/AIDS impact in other sectors.

Most national teacher training programmes are geared to meet the needs of 'natural' attrition, through replacing teachers leaving the profession for the private sector, retiring or dying. HIV and AIDS increase this rate of attrition as a result of increased mortality, illness and trauma, and compound the problem of

loss on an accelerating basis. One of the more obvious ways in which countries can respond is through increasing the annual quota of teacher trainees admitted to

training institutions, and training increased numbers of specialist teachers.

High and medium prevalence countries were asked whether they had undertaken such

response initiatives and had plans to train more teachers, as a result of increased teacher attrition due to AIDS.

Remarkably, only 75% of respondents (26 countries) indicated that they had no plans to train more teachers at present. Only 8 countries were either planning or in the process of training more teachers, three of which were medium prevalence.

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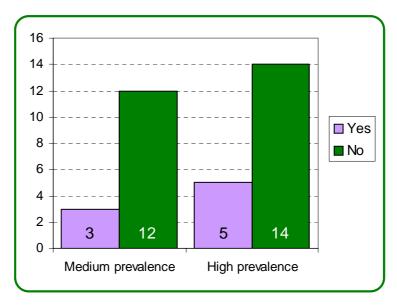


Figure 5-2. Countries that have plans to train more teachers as a result of increased attrition due to AIDS

Monitoring human resource impacts

If human resource planning and availability ranks as the key issue in the provision of education - with or without HIV/AIDS - it would be reasonable to assume that serious attention would be paid to monitorina anv impact on However, it is common cause that many Ministries are uncertain as to the extent of HIV/AIDS (and other impacts) precisely because such data and monitoring systems, even where they are fully operational, are largely insensitive to HIV/AIDS. Reform of education management information systems (EMIS) to deal with this is one of the most serious challenges facing Education Ministries, as the lack of up-to-date and detailed information on the routine functioning of the system simply masks HIV/AIDS impact and reinforces scepticism that it is a problem.

Moreover, in every affected country, some districts will be more badly affected than others. This confirms the need for entirely new, district-level information systems capable of empowering management at

these levels with 'early warning' data on a monthly basis – along the lines of the DEMMIS³ system now being introduced in southern and East Africa. Such systems should help identify (for example) rates of teacher and pupil absenteeism and attrition in a specific district, and facilitate a targeted response.

In order to assess the availability of detailed information for response, high prevalence countries were asked whether human resource HIV/AIDS impacts were being monitored and reported. Specific examples of impact were cited, such as sick leave, compassionate leave, teacher attrition and pension costs.

The response suggests that at this stage, very little formal monitoring is in place: Only four out of nineteen countries indicated that they have monitoring systems in place, namely Cote d'Ivoire, Kenya, South Africa and Zimbabwe. The remaining fifteen respondents indicated that nothing is in place as yet.

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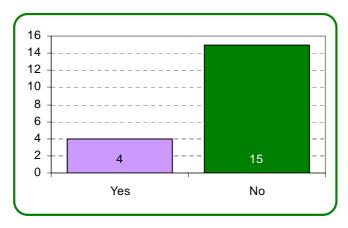


Figure 5-3. High prevalence countries in which human resource issues such as sick leave and attrition are being monitored and reported on

Development and distribution of teacher guidelines

As the HIV/AIDS epidemic took hold and spread during the 1980s, education systems in developed countries quickly took steps to incorporate HIV prevention education into their curricula. response in developing countries was slower, but by the late 1990s several Education Ministries had initiated HIV prevention programmes. Investigations in 2001 showed that most interventions focussed on learners only, with few programmes to equip teachers to deliver the new curricula that embodied HIV/AIDS education (Akoulouze, Rugalema and Khanye, 2001). The investigations also showed lack of analysis of the systemic implications of the epidemic and its relevance for educational planning⁴.

The challenges that were identified in 2001 still persist: HIV/AIDS, sexuality and lifeskills education are being introduced quite rapidly into school systems, but teacher preparation and development programmes are not keeping pace with these advances. As a result, schools are endeavouring infuse to HIV/AIDS, sexuality and lifeskills into their programmes before anything similar has been undertaken in teacher training institutions or, in many cases, in university faculties of education. In several countries, attempts are made through inservice training (INSET) to redress this situation, for the part INSET greater programmes have not offered the fullness of knowledge the depth or

comprehension needed to bring serving teachers to the level of competence required for teaching in this area. Such programmes as are offered tend to be unsystematic, ad hoc, and poorly followed through.

This points to the need to take decisive steps to elevate HIV/AIDS, sexuality and lifeskills education into an academic discipline in its own right. Such a discipline should form an integral part of all teacher preparation programmes in countries where the HIV prevalence is high, while core aspects of it should be integrated into teacher preparation programmes in low prevalence countries⁵.

When asked whether guidelines for teachers on dealing with HIV/AIDS in schools had been developed, one third of Ministries in all prevalence categories indicated that they had, and a further half stated that this work was in process.

The high level of 'in process' responses suggests that the development of teacher guidelines for HIV/AIDS is topical and very much a work-in-progress for many countries. Surprisingly, one quarter of high prevalence countries indicated that they had not yet developed guidelines. Amongst medium prevalence, the figure was 14%.

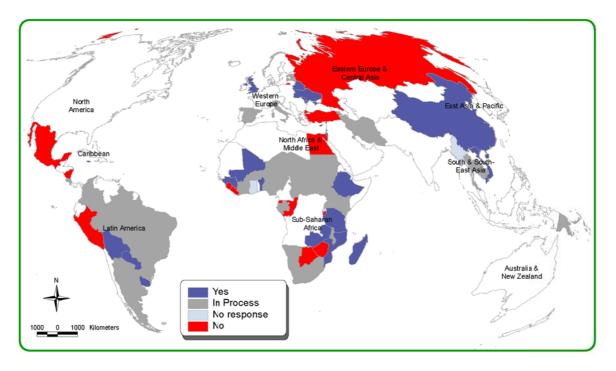
An encouraging proportion of low prevalence countries had, or was

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developing teacher guidelines - this is perhaps again a reflection of greater management capacity in more developed economies and systems.

	Yes	No	In process
Low provolonco	13	8	14
Low prevalence	(37%)	(23%)	(40%)
Modium provolonco	4	2	8
Medium prevalence	(29%)	(14%)	(57%)
High provolence	4	5	10
High prevalence	(21%)	(26%)	(53%)

Table 5-2. Countries in which teacher guidelines for dealing with HIV/AIDS in schools have been developed



Map 5-2. Distribution of countries that have developed guidelines for teachers on dealing with HIV/AIDS in schools

A subsequent question in the survey for those Ministries that had developed guidelines, required them to indicate whether these had been distributed with or This is a critical process without training. question, evidenced by the fact that many countries confirmed that that these auidelines had consigned into untrained and unprepared teaching force. It may suggest that many Ministries see this as a centralised design and delivery function, to be signed off as soon as possible by the responsible officials; or, as is much more likely, that training capacity, infrastructure and budgets are limited or The latter possibility is do not exist. supported by field observation and confirms that irrespective of how much

technical assistance or aid is delivered, it will have little affect unless sustainable infrastructural capacity is strengthened

In the event, six countries indicated that *no* training had accompanied distribution of the guidelines, while 13 stated that it had.

The lack of training in the use of such guidelines was worst in high prevalence countries: Three out of four respondents in high prevalence settings that had distributed guidelines, did so without training. By contrast all four medium prevalence respondents had provided training.

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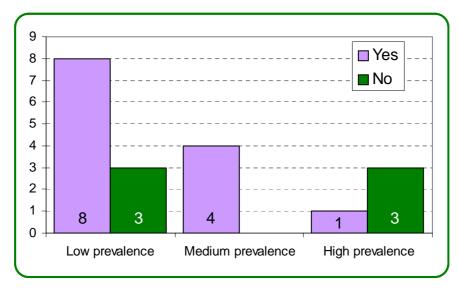


Figure 5-4. Countries with guidelines for teachers on dealing with HIV/AIDS in schools that have been distributed with training

Self-assessment and prioritisation

Rating the state of human resource planning readiness

Ministries of Education were asked to rate themselves according to a five-point scale, where 1 was low and 5 was high. In terms of readiness for human resource adaptation to the impacts of HIV/AIDS, it is interesting to note that *not one* Ministry rated itself as high, which suggests that there is significant dissatisfaction at the

level of progress that is being made in this area. Nearly one-third of responding Ministries rated themselves poorly (1 or 2) and another 30% gave themselves an average assessment for their performance in this area.

	Self assessment ranking					
	1 2 3 4 5 (high					
Low prevalence	6	9	13	7	0	
Medium prevalence	8	3	2	2	0	
High prevalence	5	6	5	4	0	
TOTAL	19 (13%)	18 (16%)	20 (30%)	13 (29%)	0 (0%)	

Table 5-3. Distribution of countries according to Human Resource planning self-assessment ranking

Low prevalence countries gave themselves an average assessment, with none awarding themselves with the highest rating. Medium prevalence countries took a far dimmer view of their performance in this area, with over 50% rating themselves with the lowest ranking. High prevalence countries were less severe, although the self-assessment still tended to poor or below average.

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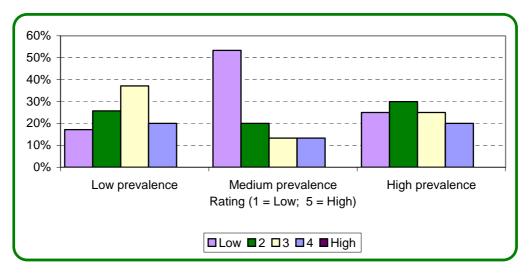


Figure 5-5. Countries self-assessment ranking for human resource planning to the impact of HIV/AIDS

Ranking the importance of funding Human Resources adaptation to the impacts of HIV/AIDS

Ministries were asked to rank the importance of funding for human resource adaptation; in which 1 was most important and 9 was the least important. The median for this ranking was four for low prevalence countries, four for medium prevalence countries and six for high prevalence countries, indicating — curiously — that higher prevalence countries consider funding for human resource adaptation to be less important than low prevalence countries. In each of

the prevalence categories, there were Ministries that identified funding to support human resource adaptation as their most important priority (by selecting category 1).

Amongst the high prevalence countries there was a spread of priority rankings, with one quarter of countries assigning a priority value of 4 and a two-fifths either 7 or 8.

	Ranking the importance of funding Human Resource adaptation								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	13%	16%	13%	16%	9%	19%	9%	3%	3%
Medium prevalence	13%	0%	27%	13%	13%	13%	7%	7%	7%
High prevalence	16%	0%	0%	26%	0%	11%	21%	21%	5%
TOTAL	14% (9)	8% (5)	12% (8)	18% (12)	8% (5)	15% (10)	12% (8)	9% (6)	5% (3)

Table 5-4. Ranking of the importance of funding for the area of Human Resource planning

The most common rank amongst all countries for human resource adaptation, regardless of prevalence, was 4, which suggests an overall high priority for

funding in this area. 14 Ministries of Education indicated that it was either their top or second most important priority for funding.

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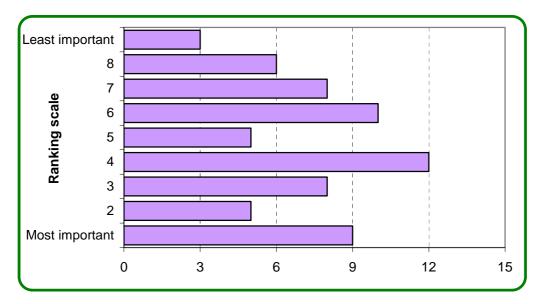


Figure 5-6. Combined ranking of the importance of funding Human Resource planning

* Ranking the importance of technical assistance for Human Resource adaptation

Ministries were then asked to rank the importance of technical assistance to assist in human resource adaptation to the impacts of HIV/AIDS. The median for this ranking was 4 for low prevalence countries, 3 for medium and 5 for high prevalence countries. This again curiously attests to the fact that higher prevalence countries consider technical assistance for human resource adaptation to be less

important than low and medium prevalence countries. Six low, three medium and one high prevalence country identified technical support to support human resource adaptation to be most important (by selecting category 1). One high prevalence and one medium prevalence country considered it to be of least importance by assigning it a category 9 rating.

	Ranking importance for technical support for human resource adaptation								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	18%	15%	12%	18%	9%	15%	6%	6%	0%
Medium prevalence	20%	0%	40%	20%	7%	0%	0%	7%	7%
High prevalence	5%	16%	0%	26%	11%	16%	11%	11%	5%
TOTAL	15% (10)	12% (8)	15% (10)	21% (14)	9% (6)	12% (8)	6% (4)	7% (5)	3% (2)

Table 5-5. Ranking of the importance of technical support for Human Resource planning

As with the prioritisation of funding, the importance of technical assistance for human resource adaptation was rated fairly highly. Eighteen Ministries indicated

that it was either their top or second most important priority for funding. Twenty-four more rated it as either priority 3 or 4.

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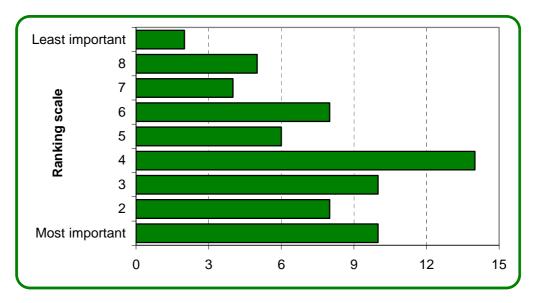
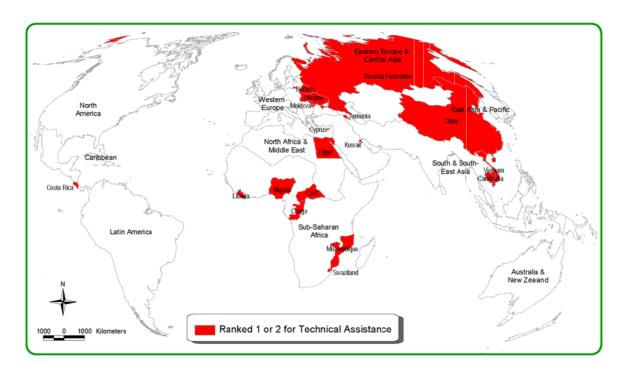


Figure 5-7. Combined ranking of the importance of technical assistance for Human Resource adaptation

Several countries in Eastern Europe, East Asia and South East Asia were amongst those rating technical assistance for this priority area very highly. An additional nine were located in Sub-Saharan and North Africa.



Map 5-3. Distribution of countries ranking Human Resource adaptation as priority 1 or 2 for technical assistance

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6

Workplace HIV/AIDS Programmes

Section Overview

Cucation Ministry Headquarters, District or Provincial offices are not the only workplaces within the education sector. Every school, tertiary and higher education learning institution is a workplace, and as such should consider the development of an appropriate HIV/AIDS workplace programme. Workplace or internal HIV/AIDS programmes may be wide ranging and could include some or all of the following elements: HIV/AIDS prevention activities, peer education programmes, condom promotion and distribution, voluntary

counselling and testing, care and support, STI management, infection control and wellness programmes. The programme should be instrumental in helping to prevent the spread of the epidemic, mitigate its impact on workers and provide social protection to help cope with the disease.

HIV/AIDS is a workplace issue, and should be treated like any other serious illness/condition in the workplace. This is necessary not only because it affects the workforce, but also the workplace, being part of the local community, has a role to play in the wider struggle to limit the spread and effects of the epidemic.

ILO Code of Practice, 2001

While preparing for the Global Readiness Survey, the ILO was consulted to assist in defining which areas should be addressed in this section. This section of the Global Readiness Survey aimed to assess the degree to which a response to HIV/AIDS and those infected and affected had been mounted in the workplace. Several critical issues relating to awareness, prevention, non-discrimination, counselling and testing, referral and treatment are tackled, both in the sense of whether appropriate workplace policies exist, and whether they have been implemented at a local level. The section also assessed whether information on employees' HIV/AIDS status was confidential and if outlet points existed within the workplace for the purchase or free distribution of condoms. The majority of the questions were asked of all countries, but low prevalence countries were exempt from answering three questions, as noted below.

HIV/AIDS awareness programmes at national, district and school level

Whilst general awareness of HIV/AIDS is widespread, perhaps even universal, amongst teachers and other education officials, informed and accurate understanding of the epidemic and related issues is certainly not as evident. awareness to translate into behaviour modification. risk reduction and prevention, as must be the case with HIV/AIDS, guite extensive, detailed and motivational information is required. This implies the existence and advocacy of such information, and its availability at every level of the system.

Many national Ministries of Education insist that these needs have been met, but in reality these materials may only exist at a central level or be in limited distribution below that level. The gap between policy and implementation may be considerable in poorly resourced systems; the problem may also be exacerbated by the level of priority accorded to HIV/AIDS, relative to other perceived needs. In practice, implementation of policy and promise down to the school level, supported by appropriate material distribution and training, is difficult to achieve.

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Motivating behaviour change is difficult at the best of times, the more so in the complex field of socio-sexual behaviour and in societies where the status of women is perceived to be low. The chance of success *must* therefore be enhanced by the provision of appropriate materials, training and support at every level, and the assurance that this will be sustained.

Countries were asked whether their Education Ministries had an HIV/AIDS awareness programme which was sensitive to issues such as language, culture, age and gender, for all their employees. This question, which was designed to interrogate issues of implementation, had three components, requiring Ministries to indicate whether the programme existed at national and district

level as well as for staff at education institutions.

Nearly 40% of all responding countries indicated that they did not yet have an HIV/AIDS awareness programme at the national level. Admittedly, those countries without a programme tended to be concentrated in the low prevalence grouping.

Only 10% of high prevalence countries stated that they did *not* have a programme, with a further 20% indicating one was in process. Amongst medium prevalence countries, one half had an awareness programme and the remainder were split between those that did not and cases where a programme was in process.

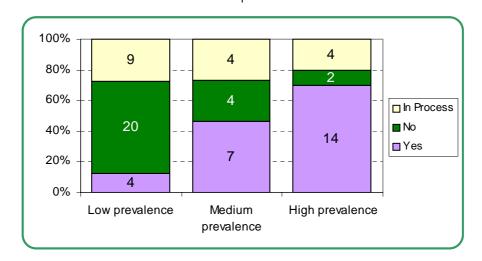
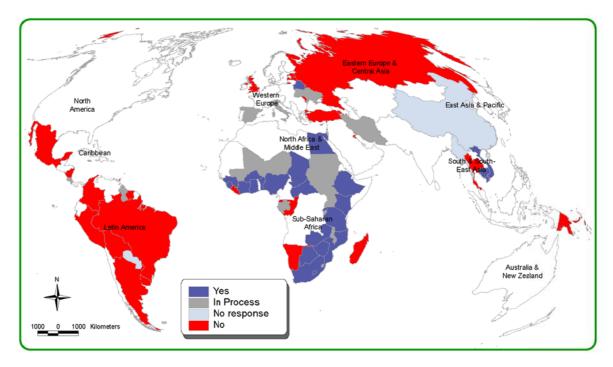


Figure 6-1. Ministries which have an HIV/AIDS awareness programme for all employees at the *national* level

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Map 6-1. Distribution of Education Ministries that have HIV/AIDS awareness programmes for all employees at the *national* level

When asked whether the awareness programme functioned at *district* level, a higher proportion (44%) of Ministries indicated that they did not. As with the national response, those without a district programme were concentrated amongst

the low prevalence countries. There were also fewer countries that stated that they had plans to develop a programme (13 as opposed to 17), so the level of implementation of awareness programmes at district level was significantly lower.

	Yes	No	In
			process
Low prevalence	6	22	5
	(18%)	(67%)	(15%)
Medium	5	6	3
prevalence	(36%)	(43%)	(21%)
High prevalence	13	2	5
	(65%)	(10%)	(25%)

Figure 6-2. Countries where HIV/AIDS awareness programmes are available for employees at the *district* level

There was evidence of more

HIV/AIDS awareness programmes

for staff at education institutions

than for education ministry

employees at national or district

level

The final component of this question

asked whether awareness programme existed for staff at education institutions. This would imply that teachers had been part of a programme at school level and that a significant effort information at dissemination has taken place amongst the teaching force. The response was more encouraging with

fewer countries (30%) indicating that awareness programmes for teachers at schools did *not* exist. A further 20 countries said that programmes were in progress.

Amongst the high prevalence group, three countries stated that they did not have programmes at this

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level, but another 5 indicated that they were in process.

	Yes	No	In
			process
Low prevalence	10	14	10
	(29%)	(41%)	(29%)
Medium	6	4	5
prevalence	(40%)	(27%)	(33%)
High prevalence	12	3	5
	(60%)	(15%)	(25%)

Table 6-1. Countries where HIV/AIDS awareness programmes are available for staff at *education* institutions

Prevention Programmes

Even in situations where HIV prevalence is high, the majority of employees are still uninfected, and prevention efforts should always remain an important component of workplace responses to HIV/AIDS. Behaviour change communication is a multi-level tool for promoting and sustaining risk reducing behaviour change in individuals and communities by meals of tailored messages and using a variety of communication channels

Rose Smart Mobile Task Team on the Impact of HIV/AIDS on Education (MTT), 2004

Education Ministries have a responsibility to both raise awareness amongst staff and initiate HIV prevention programmes. This is a driving moral responsibility but equally is good management practice, since prevention also serves to protect the system's most valuable asset - its human resources. Such prevention programmes could include peer education, (male and female) condom distribution and HIV/AIDS advocacy and awareness sessions designed to motivate behaviour change and create and maintain a safe working environment.

When high and medium prevalence countries were asked whether prevention

programmes existed, over 70% indicated that they did. The 30% that did not (10 countries) were distributed mainly amongst the medium prevalence group, with the exception of Tanzania and Rwanda, both high prevalence countries.

As with awareness, the availability of prevention programmes is strongly correlated with prevalence levels: the majority of medium prevalence countries do not yet have programmes in place, compared to high prevalence countries who do.

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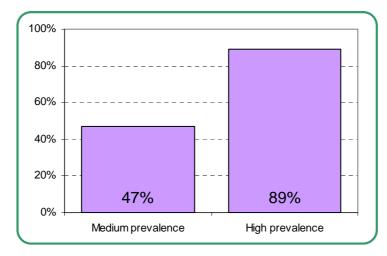


Figure 6-3. Proportion of countries with programmes aimed at preventing HIV infections among staff

Countries with programmes for preventing HIV infections among staff were asked to indicate whether they were gender sensitive.

Examples of gender sensitivity that were given included programmes which helped women to understand their rights, both within and outside the workplace, and which empowered them to protect themselves. These programmes may also

include strategies to promote men's acceptance of their responsibilities regarding HIV/AIDS prevention.

All medium prevalence countries that had prevention programmes indicated that they were gender sensitive, whereas five high prevalence countries stated that theirs were not. These countries were Congo Brazzaville, Kenya, Lesotho, Namibia and Swaziland.

	Yes	No
Medium prevalence	7 (100%)	0 (0%)
	(100%)	(0 /0)
High provolonce	12	5
High prevalence	(71%)	(19%)

Table 6-2. Countries with programmes aimed at preventing HIV infections which are gender sensitive

52% of the respondents

do as yet not have

guidelines for implementing universal

precautions

Universal Precautions

Universal precautions include the development and dissemination of infection control guidelines covering issues

such as first aid. basic prevention practices and infection control. It might be assumed that whatever other materials exist. that these foundation materials would be in place at every level and in every This assumption is institution.

not unreasonable given that these noncontroversial information materials, regarding universal precautions, have been available for 20 years and more internationally.

Countries in all prevalence categories were asked whether guidelines for implementing universal precautions had been developed for use by all staff.

In the event, a total of sixty-six countries responded to this question, over half of which said

they had not been developed. Of concern is the fact that many of these were high and medium prevalence countries. In fact,

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only 3 high prevalence countries indicated that guidelines existed, namely Burkina Faso, Ethiopia and Lesotho.

Eighteen countries said that that they were in process of developing guidelines. It is

clear that steps are being taken in this direction but work is needed to finalise the guidelines and ensure they are disseminated.

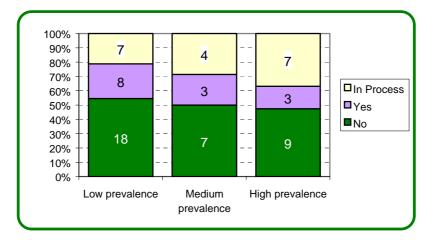


Figure 6-4. Countries which have guidelines for implementing universal precautions developed for use by all staff

Voluntary counselling, testing and referral

Research and data indicates that the majority of at risk persons have not tested for HIV antibodies and a large population of individuals with HIV infection are unaware of their status. Failed early detection of HIV infection prevents the possible early educational interventions or behaviour modification and precludes pre-AIDS treatment. Aggressive antiretroviral treatment can significantly improve clinical and health status and reduce the viral load, which may diminish patient infectivity and potentially interrupt any future transmission. Continued high-risk behaviour among persons with unrecognised and untreated HIV infections promotes transmission of the virus

HIV/AIDS Guide for the Mining Sector International Finance Corporation, 2004

Voluntary counselling and testing facilities (VCT) are important to further HIV/AIDS prevention strategies and provide an entry point to care and support services. VCT refers to the confidential testing of individual to establish his or her HIV status, and who, after having undergone pre-test counselling, voluntarily consents to the test. VCT also implies that post-test counselling will be provided when the results of the test are received.

VCT clinics should also provide relevant and comprehensive information to empower informed choices, back up psychosocial support, counselling, networking and individual risk assessment and referral services. Access to such facilities and services are vital if those affected and infected in the education sector are to establish their status and act accordingly and responsibly.

However the existence of VCT clinics does not mean they are widely used: Levels of stigma and ostracisation in and around communities and within the education sector remains a problem, and may deter many in need from accessing these facilities. The problem of access is compounded by the distribution of VCT clinics and particularly their limited availability in rural areas.

VCT facilities are however claimed to be almost universally in existence in high, medium and low prevalence countries, insofar as respondent Ministries say they exist. Only three countries indicated that they did not exist namely Bolivia, Equatorial Guinea and Rwanda, the last of which a high prevalence country.

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This nature of this question unfortunately does not capture the *accessibility* of VCT clinics or the extent to which they are actually used by teachers. This remains a process concern and suggests that while improved marketing of VCT services is critical, so too is the provision of an accessible network of both stand alone and integrated VCT facilities. This implies

raising awareness of the multiple benefits of VCT, promoting the services provided with appropriate messages for teachers, managers and others in the education sector and ensuring that partnerships with the Health sector facilitate the development of the necessary infrastructure and personnel.

	Yes	No
Low prevalence	33	1
Low prevalence	(97%)	(3%)
Modium provolonco	14	1
Medium prevalence	(93%)	(7%)
High provolence	19	1
High prevalence	(95%)	(5%)

Table 6-3. Countries with voluntary counselling and testing facilities in existence

Most countries (86%) with voluntary counselling and testing facilities indicated that Education Ministry employees could be referred to them. In nine countries this was not the case, although some

respondents pointed out that the Ministry of Education does not itself refer employees: This is an individual's choice and will be dealt with by the Ministry of Health.

	Yes	No
Low prevalence	30	3
Low prevalence	(91%)	(9%)
Medium prevalence	10	4
Medium prevalence	(71%)	(29%)
High prevalence	17	2
Trigit prevalence	(89%)	(11%)

Table 6-4. Countries where Ministry employees can be referred to voluntary counselling and testing facilities

As a further assessment of the extent to which Ministries had operationalized their response, high and medium prevalence countries were asked whether a referral system for access to HIV/AIDS treatment had been established.

Just over half the respondents (18 countries) said that a treatment referral

system existed. Surprisingly, referral systems were proportionately more common in medium than in high prevalence countries, an issue that may be more a reflection of differential access to resources for treatment than managerial efficiency. A total of ten high prevalence countries did not have a referral system for access to HIV/AIDS treatment.

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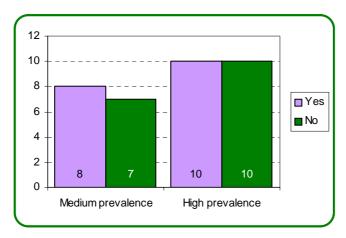


Figure 6-5. Countries where a referral system for access to HIV/AIDS treatment has been established

Personnel Policies and confidentiality of information

Every person has the right to personal privacy and dignity and the right to decide what aspects of his or her life can be shared or made public. Unfortunately this right is often abused when it concerns the HIV status of an individual. A key workplace concern is the stigmatisation of HIV/AIDS and subsequent discrimination against teachers who are infected. This affects individuals and families who could otherwise, with the right treatment, care, and support be productive members of society.

It is incumbent on Ministries to protect their employees and ensure that personnel affected by HIV/AIDS are not unfairly discriminated against or their confidentiality compromised, and sector policies should be developed and implemented for that purpose.

Given that the survey attempts to measure readiness rather than action, this question assessed the *existence* of a policy rather than whether it was actively implemented via appropriate regulation. In the survey, it was decided that examining the level of action (e.g. Do you pursue a policy...?) - while more useful - was far more difficult and likely to lead to subjective responses.

When Ministries were asked whether they had non-discriminatory policy in place for personnel affected by HIV/AIDS, 64% (44 countries) stated that they did. A total of 23 countries did not have such a policy, of which 4 were high prevalence and located in Sub-Saharan Africa; these included the Congo Brazzaville, Ethiopia, Rwanda and Tanzania.

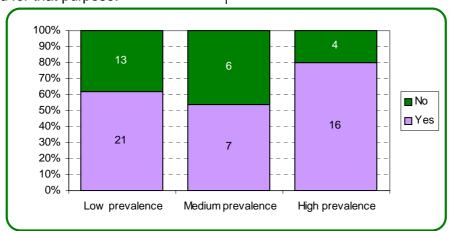
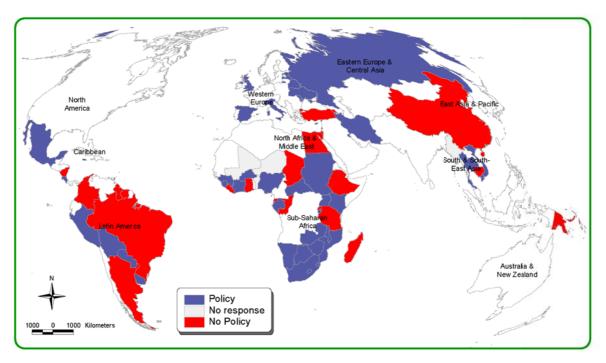


Figure 6-6. Countries in which the Ministry has a policy of non-discrimination for recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS

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Map 6-2. Distribution of countries with a policy of non-discrimination for recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS

A follow-up question asked Ministries to indicate whether they enforced confidentiality of information about those employees affected by HIV/AIDS. Thirteen countries did not enforce such confidentiality.

Three indicated that the Ministry had neither a policy of non-discrimination nor

enforced confidentiality of information about employees affected by HIV/AIDS. These were Congo Brazzaville, Ethiopia and Rwanda.

Two countries had non-discriminatory policies but did not enforce confidentiality, namely Burkina Faso and Swaziland.

	Yes	No
Low provalance	29	5
Low prevalence	(85%)	(15%)
Modium provolongo	10	3
Medium prevalence	(77%)	(23%)
High provalence	15	5
High prevalence	(75%)	(25%)

Table 6-5. Countries in which Ministries enforce confidentiality of information about employees affected by HIV/AIDS

Accommodation for staff

Countries indicating that accommodation provided for staff was appropriate for the needs of those affected with HIV/AIDS were very few in number. They included only Barbados, Botswana, Equatorial Guinea and Malawi amongst the high and

medium countries. The largest number (5) of countries that did provide appropriate accommodation came from the low prevalence grouping, again possibly reflecting the higher levels of resourcing available in many of those countries.

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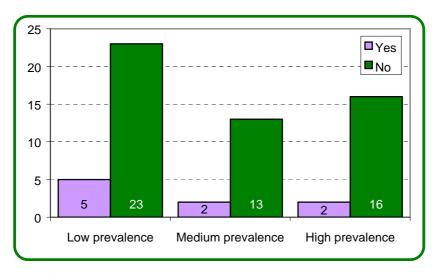


Figure 6-7. Number of countries in which accommodation provided by the Ministry is appropriate for the needs of Ministry employees affected by HIV/AIDS

Distribution of Condoms

When incorporated into a comprehensive set of prevention messages – including reducing the number of sexual partners, practising mutual monogamy, delaying the onset and reducing frequency of penetrative sex and getting treatment for STIs – condom use has resulted in decreases of HIV incidence. And, in various settings, promotion of 100% condom use has contributed to marked reduction in STI rates.

HIV/AIDS Guide for the Mining Sector International Finance Corporation, 2004

The final question in this section on workplace **HIV/AIDS** programmes considered the issue of whether accessible outlets points existed within or in the vicinity of the workplace for the purchase or free distribution of condoms. Condom distribution should always be accompanied by condom promotion, which aims at encouraging safer sexual practices through raising awareness and opening the debate about safer sex and condom use and then only ensuring that supplies of condoms are readily accessible, when and where they are needed. The issue of condom promotion and distribution at school level is often contested by interest groups or individuals within the wider

community. Some countries have developed policies or passed bills to guide condom promotion and distribution.

In both the low and high prevalence groups, the majority of respondents said confirmed they had such outlets in place. Amongst the medium group more countries indicated that condoms were not freely available, than those who said they were.

Six high prevalence countries did not have accessible outlet points, namely Central African Republic, Congo Brazzaville, Cote d'Ivoire, Malawi, Rwanda and Tanzania.

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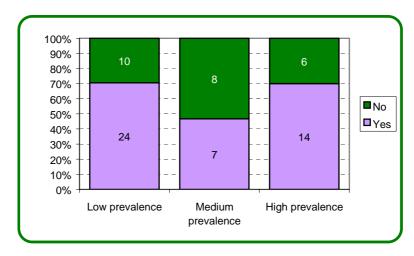


Figure 6-8. Countries in which accessible outlet points exist within the workplace for the purchase of or free distribution of condoms

Self-assessment and prioritisation

Rating the state of readiness in terms of HIV/AIDS workplace programmes

Ministries of Education were asked to rate themselves according to a five-point scale in terms of their response to the priority area of workplace HIV/AIDS programmes. The median for low and medium prevalence groups was two, while the median for the high prevalence group was 2.5. Zambia was the only country that rated itself high (5) in terms of workplace HIV/AIDS programmes.

	Workplace Programme self assessment ranking						
	1 (low) 2 3 4 5 (high)						
Low prevalence	15	8	8	4	0		
Medium prevalence	7	4	1	3	0		
High prevalence	3	7	2	7	1		
TOTAL	25 (36%)	19 (27%)	11 (16%)	14 (20%)	1 (1%)		

Table 6-6. Distribution of countries according to self assessment ranking of workplace programmes

Low and medium prevalence countries felt that their performance in this area was generally quite poor, with many countries assigning themselves the lowest rating of 1. High prevalence countries were slightly more upbeat in their self assessment, but half of them (10) still rated themselves as either 1 or 2 (poor).

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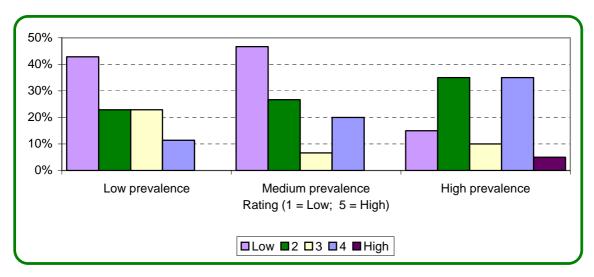


Figure 6-9. Countries self assessment ranking for workplace HIV/AIDS programmes

* Ranking the importance of funding Workplace HIV/AIDS programmes

Ministries were asked to rank the importance of *funding* for workplace HIV/AIDS programmes, where 1 was most important and 9 least important. The median for this ranking was six for low prevalence countries, four for medium and three for high prevalence countries. This suggests that high prevalence countries consider funding for this area to be more important than low or medium prevalence

countries. Amongst medium and high prevalence countries, there were four Ministries that identified funding to support workplace HIV/AIDS programmes as their most important priority (by selecting category 1).

Low prevalence countries tended to view this as a less important priority, with over half assigning a rank 6, 7 or 8.

	Ranking the importance of funding Workplace HIV/AIDS programmes								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	0%	13%	3%	16%	16%	9%	19%	25%	0%
Medium prevalence	13%	13%	20%	7%	20%	7%	7%	7%	7%
High prevalence	11%	32%	16%	11%	5%	5%	11%	5%	5%
TOTAL	4 (6%)	12 (18%)	7 (11%)	8 (12%)	9 (14%)	5 (8%)	9 (14%)	10 (15%)	2 (3%)

Table 6-7. Ranking of the importance of funding the area of workplace HIV/AIDS programmes

Although there was a fairly even spread of ranks, nearly a quarter of countries (16) assigned a rank of either 1 or 2, indicating that workplace HIV/AIDS programmes were near, or at the top of their priority list.

At the other end of the scale, twenty-one countries signified that in relative terms it was low on their current list of priorities, assigning a rank of between 7 and 9.

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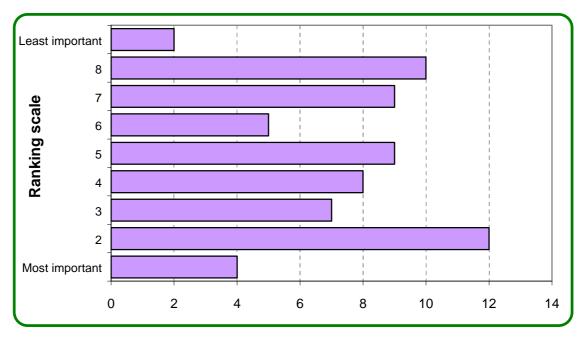
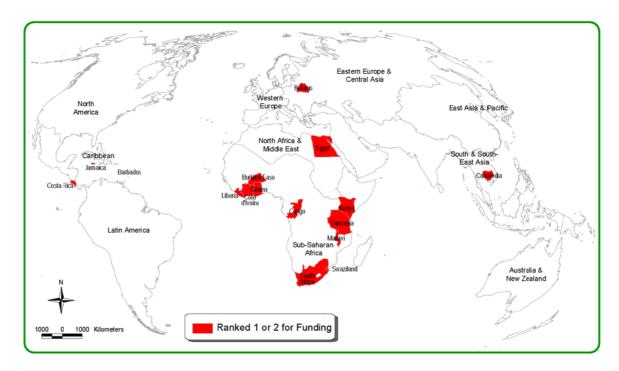


Figure 6-10. Combined ranking of the priority for workplace HIV/AIDS programmes

Of the sixteen countries ranking workplace HIV/AIDS Programmes as a very high priority for technical assistance, ten were located in Sub-Saharan Africa. Three were

in the Caribbean/Central America and one each in Eastern Europe, North Africa and South East Asia.



Map 6-3. Distribution of countries ranking workplace HIV/AIDS programmes as Priority 1 or 2 for technical assistance

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* Ranking the importance of funding for technical assistance workplace HIV/AIDS programmes

Ministries were then asked to rank the importance of technical assistance to assist in workplace HIV/AIDS programmes. The median for this ranking was six for low prevalence countries and four for medium and high. This reinforces the fact that high and medium prevalence countries generally considered technical assistance for

workplace HIV/AIDS programmes to be more important than low prevalence countries. Seven countries identified technical support workplace HIV/AIDS programmes to be most important (by selecting Category 1), while only one high prevalence country (Rwanda) denoted that it was their least important priority for technical assistance.

	Ranking for technical assistance for Workplace HIV/AIDS programmes								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	6%	3%	9%	15%	6%	18%	21%	21%	0%
Medium prevalence	7%	13%	27%	7%	20%	13%	7%	7%	0%
High prevalence	21%	21%	5%	37%	5%	5%	0%	0%	5%
TOTAL	7 (10%)	7 (10%)	8 (12%)	13 (19%)	6 (9%)	9 (13%)	8 (12%)	8 (12%)	1 (1%)

Table 6-8. Ranking of the priority for funding technical assistance for workplace HIV/AIDS programmes

One fifth of countries identified workplace HIV/AIDS programmes as their top or second most important priority for funding – this group was dominated by high prevalence countries.

Low prevalence countries tended to give this issue a lower score, with 40% assigning it 7 or 8 on their priority list for technical assistance.

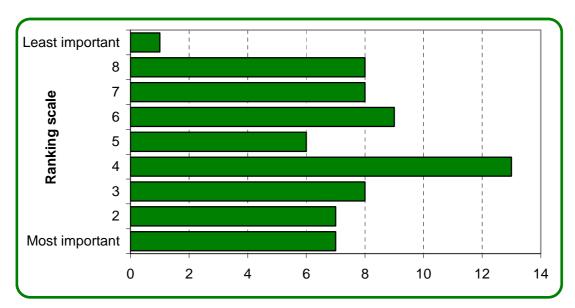


Figure 6-11. Combined ranking of the importance of technical assistance for workplace HIV/AIDS programmes

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7 HIV/AIDS and the Curriculum

Section Overview

Education is key to an effective response to HIV/AIDS. But while retention within the education system will equip learners with a growing body of knowledge, more importantly it also provides the cognitive skills to *use* that knowledge. Information about HIV/AIDS, and its prevention, can only have real value if those receiving it have the capability to process it. Growing evidence of behaviour change in young people is clearly linked to increasing education access and quality, improved cognitive and reasoning skills and the exercise of informed choice. This slow but arguably steady empowerment process has been underpinned by incremental improvements in curriculum structure and quality, and an expanding level of professional understanding of the field. The mandate of these education systems is therefore to move beyond the transfer of knowledge: "They should challenge gender stereotypes and misinformation, train girls [youth] in skills that can provide economic opportunities, reinforce girls' participation and empowerment and promote knowledge of sexual and reproductive health, including ways to prevent unwanted pregnancy, STIs and HIV/AIDS. This transformation of education system required changes to the existing curriculum, specialised training for teachers and outreach to communities."

To support this, Ministries of Education and their development partners will have to accelerate the effective introduction of HIV/AIDS, sexuality and lifeskills education into the curriculum, in an environment where the media have opened the public discourse to the extent where awareness is no longer an issue. The challenge of education revision in the AIDS era is profound, but the nature of the HIV/AIDS crisis is perhaps also an opportunity to consider wider and often overdue curriculum reforms. However, an additional and perhaps more daunting challenge lies in preparing and equipping teachers to manage and deliver this The fact is that teacher training and development has lagged behind new curriculum. curriculum change, compounding the problem that many teachers are simply overwhelmed by subject matter that might have been, until recently, taboo in their classrooms and If education systems are to rise to these multiple challenges, they must communities. accept that their mandate now includes educating young people about HIV/AIDS, and teaching negotiation, conflict resolution, critical thinking, decision-making and communication They have no choice but to integrate these and other critical life skills into the curriculum and co-curricula activities, in order to bolster the self-confidence of their learners and ensure they have the ability to make informed – indeed, potentially life-saving – choices.

This section of the Global Readiness Survey aims to assess the degree to which curricula within the various educational institutions have been adapted in response to the impact of the HIV/AIDS epidemic. Ministries of Education were asked to report on their life skills programmes and how HIV/AIDS has been addressed in the curriculum across different levels of education within the sector. Teacher preparation, the involvement of parents and religious leaders, as well as the development of support materials are all areas that are investigated. These questions were asked of all countries, except for the question of the adaptation of tertiary institution curricula, which was not asked of low prevalence countries.

"Global success in combating HIV/AIDS must be measured by its impact on our children and young people. Are they getting the information they need to protect themselves from HIV? Are girls being empowered to take charge of their sexuality? Are infants safe from the disease, and are the children orphaned by AIDS being raised in loving, supportive environments? These are hard questions we need to be asking. These are the yardsticks for measuring our leaders. We cannot let another generation be devastated by AIDS"

Carol Bellamy, Executive Director, UNICEF

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The Zambian Ministry of Education

in their policy for HIV/AIDS define

life skills as "practical skills and

values taught as part of the

curriculum to prepare pupils for real

living and to be more self-assured and

self-reliant." Curriculum also often

includes aspects of teaching children

how to protect themselves from harm,

including HIV infection.

HIV/AIDS curriculum and life skills programmes

For the purpose of the Global Readiness

Survey, a Life Skills or Life Orientation programme was considered to cover issues such health as promotion, family planning, health and family education, personal and social development, religious education, physical education and, in some countries, HIV/AIDS awareness. On average 84% of the countries

indicated they have life skills programmes established in their education systems at primary level, while 83% had achieved this at secondary level. Interestingly, perhaps

reflective of better resourced low systems, prevalence countries have introduced life skills programmes into a higher proportion of their schools than high prevalence This countries. is particularly noticeable at secondary level, where schools in 89% (31) of the prevalence countries have life skills programmes,

versus secondary schools in 75% (15) of high prevalence countries.

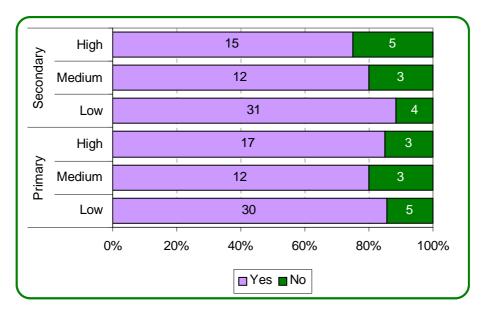
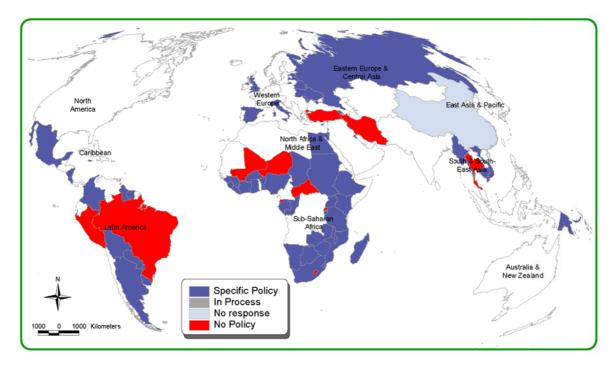


Figure 7-1. Ministries that have life skills programmes established in their education systems

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Map 7-1. Distribution of ministries with life skills programmes established at primary schools

When asked if the life skills programmes considered issues relating to gender, 93% of the countries, across all the prevalence categories indicated that their programmes were gender sensitive. Only four countries reported that theirs were not. The examples of issues relating to gender

provided in the guidelines included helping young women to understand their rights to protect themselves, as well as strategies to promote acceptance by young men of their responsibilities regarding HIV/AIDS prevention.

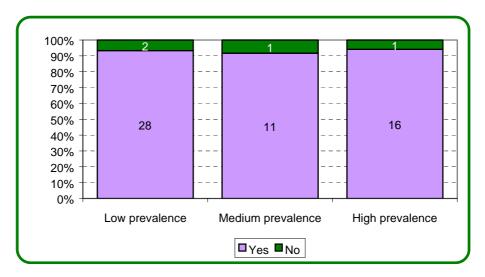


Figure 7-2. Countries with Life skills programmes which consider issues relating to gender

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When asked whether HIV/AIDS is addressed in the curriculum, Ministries

curriculum; at the secondary level this

reported а greater difference between, a) primary and secondary levels and, b) between low and high prevalence countries at primary level. 79% of the respondent countries indicated that at primary level **HIV/AIDS** is addressed in the

"Educational programmes for in-school and out-of-school young people were seen as providing readily available channels for consciously influencing students through the curriculum and the values that curriculum

seeks to embody"

Prof Michael J Kelly
Planning for Education in the context of HIV/AIDS,
UNESCO 2000

figure rose to 89%. At the primary level, 66% (23) of the low prevalence countries

indicated that they had addressed HIV/AIDS in curriculum. while the 95% (19)of high prevalence countries indicated the same. This gap narrowed to only 1% at secondary level, at 89% for low prevalence countries and 90% for high

prevalence countries.

	Prim	ary	Secondary		
	Yes	Yes No Yes			
Low prevalence	23 (66%)	12 (34%)	31 (89%)	4 (11%)	
Medium prevalence	13 (87%)	2 (13%)	13 (87%)	2 (13%)	
High prevalence	19 (95%)	1 (5%)	18 (90%)	2 (10%)	

Table 7-1. Countries in which the Ministry has addressed HIV/AIDS in the curriculum

Those Ministries that have addressed HIV/AIDS in the curriculum were requested to estimate the proportion of schools that have this curriculum in place. At the primary level, 53% of countries indicated that the curriculum is in place in all of their schools, while 21% indicated that less than 20% of their schools have introduced the curriculum. Two countries

at primary level indicated that none of the schools have yet introduced the curriculum. At secondary level, 58% of these countries indicated that the curriculum is in place at all of their schools, while 10% indicated that less than 20% of their schools have introduced the curriculum.



Figure 7-3. Countries in which HIV/AIDS is addressed in the curriculum by level

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Support materials and orientation programmes

social Apart from the and cultural constraints that exist in teaching HIV/AIDS, there are several additional obstacles faced by teachers, often indicative of other challenges and crisis within education. Efforts in presenting the curriculum are hindered by class size, lack of training opportunities and support materials to assist in delivery, especially of curricula new teaching new or methodologies. Within the Global Readiness Survey, Ministries were asked to indicate whether support materials have been developed which address life skills and HIV/AIDS issues. Countries had to reflect on whether teaching materials had been reviewed and amended for different within the education (primary and secondary) and for local use.

71% of countries at primary level, and 69% at secondary level, indicated that support materials that address life skills and HIV/AIDS issues have been developed. Higher proportions of low and high prevalence countries have developed suitable support materials than medium prevalence countries, where less than 50% of countries indicated that material has been developed for primary levels. For the secondary level, low prevalence countries reported the highest proportion of achievement, with 82% of countries developed suitable having support materials to address life skills and HIV/AIDS issues.

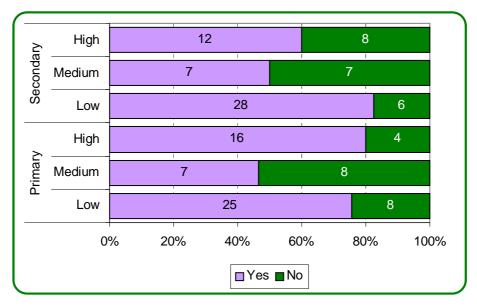


Figure 7-4. Countries in which support materials have been developed which address life skills and HIV/AIDS issues

Curriculum reforms and changes require that orientation and training programmes be provided for teachers. The Global Readiness Survey required countries to indicate whether orientation programmes have been undertaken for teachers. The majority of the low and high prevalence countries indicated that orientation

programmes had been undertaken, while for many of the medium prevalence countries the programmes were still "in process". Across all the prevalence categories, 13% of countries had not yet implemented orientation programmes for teachers.

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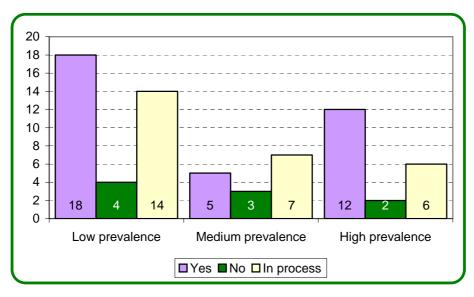


Figure 7-5. Countries where orientation programmes in life skills and HIV/AIDS have been undertaken for teachers

Many adults fear that informing

young adolescents about sex

and teaching them how to

protect themselves will make

them sexually active

Research unsurprisingly confirms that a

wide number of social factors influence young people's perceptions about HIV/AIDS, including religious influence. the media, family and peers. **Parents** often feel uncomfortable illor equipped to talk about

sensitive issues with their children and the school is often viewed by the community as an appropriate or at least acceptable place for young people to learn about sexuality, reproductive health and

HIV/AIDS. The role of teachers in this process is centrally important, particularly as there may be some measure of concern or even resistance in the community to young people being taught about such

sensitive subjects - and may lead to

criticism from such parents and consequent teacher anxiety². It is important that teachers can rely on the support of parents and the broader community in teaching about HIV/AIDS, and the Global Readiness Survey sought to confirm which countries have undertaken an orientation

process for parents. Such a process might for example involve introducing or demonstrating school life skills programmes at parent or community meetings.

"Parents, extended families, communities, schools and peers are critical in guiding and supporting young people to make safe choices about their health and well-being. Studies have shown that consistent, positive, emotional connections with a caring adult help young people feel safe and secure, allowing them to develop the resiliency needed to manage the challenges in their lives."

Young people and HIV/AIDS – Opportunity in crisis, UNICEF, UNAIDS and WHO 2002

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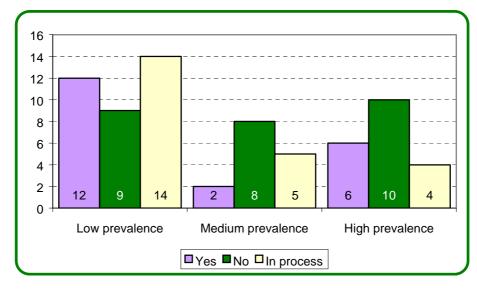


Figure 7-6. Countries in which an orientation process for life skills programmes has been undertaken for parents

One of every four medium

prevalence countries has

made an effort to ensure the

support of religious leaders

in school-based life skills

programmes.

39% of countries indicated that, as yet, there had been no orientation process for

parents regarding life skills programmes schools. in Ironically, the highest proportion parental of orientation programmes have been undertaken, or are in process, in low prevalence countries, with 72% of these countries confirming such programme introduction.

The Survey also considered whether efforts had been made to ensure that

religious leaders supported the prevention HIV approach adopted by the education sector, the messages communicated and materials 64% of used. countries. regardless of prevalence level, indicated they have made efforts to ensure the support of

religious leaders.

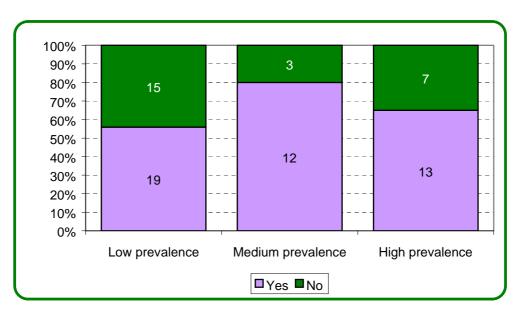


Figure 7-7. Countries in which efforts had been made to ensure the support of religious leaders in introducing life skills programmes

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The tertiary sector

The tertiary sector has a particularly critical role to play in HIV prevention. Not only are the recipients of tertiary education amongst the group considered to be most vulnerable to new HIV infections but the tertiary sector also has the important function of preparing teachers to take on their professional role, which includes competently presenting all components of

the curriculum. When asked to consider whether HIV/AIDS materials were available to all students within the tertiary sector, 48% of the countries responded in the negative. Within the medium prevalence grouping, 2 out every 3 countries indicated that there were no HIV/AIDS materials available to tertiary level students.

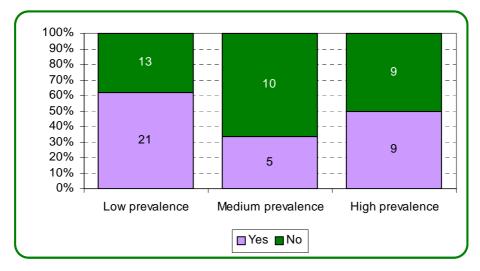


Figure 7-8. Countries where HIV/AIDS materials were available to all students within the tertiary sector

Curriculum for school based

HIV/AIDS education tends to either

have a technical emphasis or focus on

life skills. The life skills approach

depends on a different pedagogy to

traditional learning methodologies.

Teachers need to be prepared for this.

The pre-service training of teachers should prepare teachers to deal with curriculum

issues and also equip them with the necessary and professional classroom skills. Clearly, pre-service teacher education and training programmes should be adapted or reformed to include all aspects of HIV/AIDS and related education. Not only

should this training prepare teachers to present these aspects of the school curriculum, but it should also prepare teachers to protect *themselves* from HIV infection, and act responsibly towards their

peers and students. When asked whether HIV/AIDS and life skills are considered to be integral components in the curriculum for the professional preparation of all new teachers, 63% of the countries responded in the affirmative. 78% of high and 62% of low prevalence

countries indicated that HIV/AIDS and life skills are in fact essential components of their teacher-training programme.

	Yes	No
Low prevalence	21 (62%)	13 (38%)
Medium prevalence	7 (47%)	8 (53%)
High prevalence	14 (78%)	4 (22%)

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Table 7-2. Countries in which HIV/AIDS and life skills are integral components in the curriculum for the professional preparation of all new teachers

Map 7-2. Distribution of countries in which HIV/AIDS and life skills are integral components in the curriculum for the professional preparation of all new teachers

Yes No response

41% of countries indicated that the curricula at their universities and other tertiary institutions have been adapted to include subject-specific HIV/AIDS issues. While this question was not asked of low

prevalence countries, the majority of the high (53%) and medium (67%) prevalence countries indicated that higher education curricula *still* needed to be adapted.

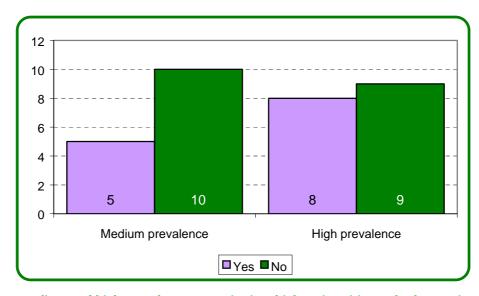


Figure 7-9. Medium and high prevalence countries in which Universities and other tertiary intuitions have adapted their curricula to include subject specific HIV/AIDS issues

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Behaviour is not changed by knowledge

alone. Young people need skills to put what

they learn into practice. Life skills are vital

for young people and can be taught in many

creative and innovative ways, both in and

out of school

Monitoring the success of prevention messages

It is difficult in the extreme to link behaviour change to any single influence or source, particularly in respect of sexuality and HIV/AIDS. While it would gratifying to ascribe growing evidence of change to HIV/AIDS education per se, these trends may be as much a result of the learning skills provided by the process of education, as the message itself.

The importance of links between HIV/AIDS education and behaviour change cannot be underestimated: Not only do such interventions seem intuitively right, they are central to our belief in the 'window of

hope' offered by young people making better informed decisions about the avoidance of risk³. Whether or not Ministries of Education are able to confirm these changes through effective or supportable monitoring – or even whether indicators of such change can be easily agreed is another matter however.

In the event, Ministries were asked to indicate whether systems to monitor the success of HIV/AIDS prevention

messages throughout the education system have been established. One of every five countries responding indicated they in fact had monitoring systems that pointed to the success of prevention messages.

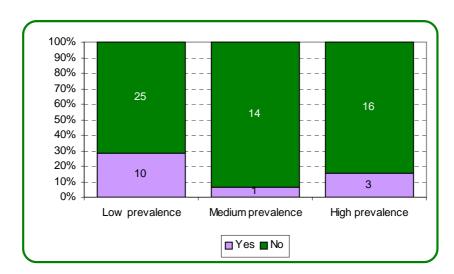
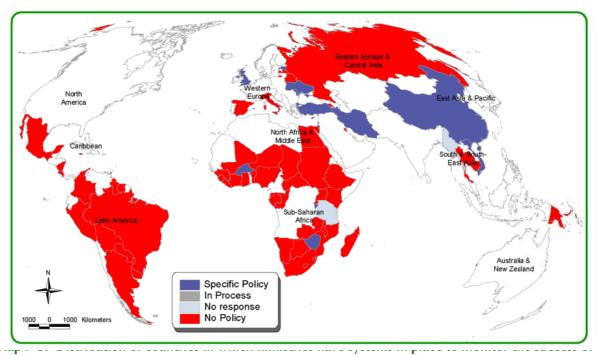


Figure 7-10. Countries in which systems to monitor the success of HIV/AIDS prevention messages are established

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HIV/AIDS prevention messages in the education system

Out of School Youth

"Both children and adolescents should be involved in planning and carrying out efforts to mitigate the impact of HIV/AIDS in their communities. They can be a vital part of the solution by providing psychosocial support to peers and younger boys and girls. They can participate in dramas, musical activities, youth newspapers and peer counselling to influence behaviour change within the community. Children and adolescents should be seen as important contributors and agents of change, not simply as audiences for HIV/AIDS messages and beneficiaries of HIV/AIDS programming

Hopelessness and a sense of powerlessness are two of the biggest obstacles to HIV prevention. By actively involving children and adolescents, programmes provide them with important information and help them to develop essential self-esteem. Efforts to help young people gain control over their destiny and develop hope for the future increase the likelihood they will choose behaviours that will help them avoid HIV infection."

Children on the Brink 2004, UNAIDS, UNICEF and USAID

Out-of-school youth is an exceptionally vulnerable group, desperately in need of support and assistance, yet extremely and persistently difficult to target. The Global Readiness Survey sought to determine whether efforts have been made to include

out-of-school youths in life skills and HIV/AIDS awareness efforts. 75% of countries indicated that they *have* included out of school youth, with high rates of participation claimed across all three categories of prevalence.

	Yes	No
Low provalance	27	8
Low prevalence	(77%)	(23%)
Medium prevalence	13	2
Medium prevalence	(87%)	(13%)
High provalence	12	7
High prevalence	(63%)	(37%)

Table 7-3. Countries where efforts have been made to include out of school youth in life skills and HIV/AIDS awareness efforts

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Self-assessment and prioritisation

* Rating the state of readiness in terms of the HIV/AIDS and the Curriculum

Ministries were asked to rate themselves according to a five-point scale on their readiness to engage in partnerships. One country elected not to complete this section. The median for medium prevalence countries was 3, and was slightly higher for the low and high prevalence groups — a median of 4. No

high prevalence country gave itself a low rating (by scoring a 1). The spread of scores amongst these countries tended upward towards rankings of 3 and 4, reflecting their view that their HIV/AIDS and curriculum efforts are average or slightly better than average.

	Self assessment ranking of HIV/AIDS and the curriculum					
	1 (low)	2	3	4	5 (high)	
Low prevalence	2	3	10	13	7	
Medium prevalence	2	1	5	3	4	
High prevalence	0	1	3	12	4	
TOTAL	4 (6%)	5 (7%)	18 (26%)	28 (40%)	15 (21%)	

Table 7-4. Distribution of countries according to self-assessment ranking for HIV/AIDS and the curriculum

Most of the low and high prevalence countries awarded themselves an average score of 4, while the medium prevalence countries awarded themselves scores of 3 to 5. 80% of the high prevalence countries indicated a score of 4 or 5.

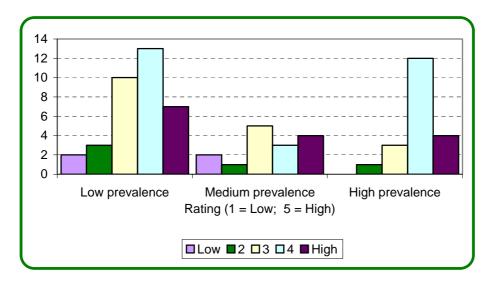


Figure 7-11. Countries self assessment ranking for HIV/AIDS and the curriculum

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Ranking importance of funding support for HIV/AIDS Curriculum issues

Ministries were asked to rank the importance of funding for HIV/AIDS in the Curriculum, where 1 was considered to be most important and 9 least important. The median for this ranking was 2.5 for low prevalence countries, 2 for medium prevalence countries and 4 for high prevalence countries, suggesting that across all the prevalence categories

countries consider this area to be important for funding. No country considered this area to be least important and *no* Ministries in high and medium prevalence countries ranked HIV/AIDS and the curriculum in the least important band of 8 and 9.

	Ranking the importance of funding for HIV/AIDS Curriculum issues								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	38%	13%	25%	9%	9%	0%	0%	6%	0%
Medium prevalence	40%	20%	13%	7%	7%	7%	7%	0%	0%
High prevalence	26%	16%	5%	21%	11%	16%	5%	0%	0%
TOTAL	35% (23)	15% (10)	17% (11)	12% (8)	9% (6)	6% (4)	3% (2)	3% (2)	0% (0)

Table 7-5. Ranking of the importance of funding HIV/AIDS and the curriculum

67% of the countries ranked this issue as important with scores between 1 and 3, and only 6% gave this a low priority, between 7 and 9. When considering the ranking of funding for this area, regardless of prevalence segmentation, ranking tends

toward 'most important'. 33 countries assigned this area a category 1 and 2, while only 8 countries ranked this below the average of 5, by assigning scores of 6 to 9.

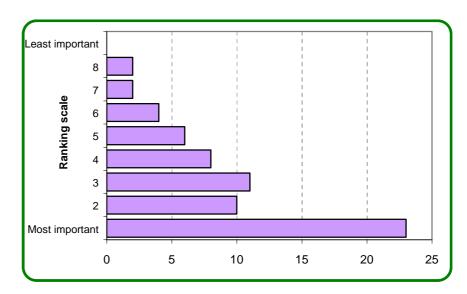
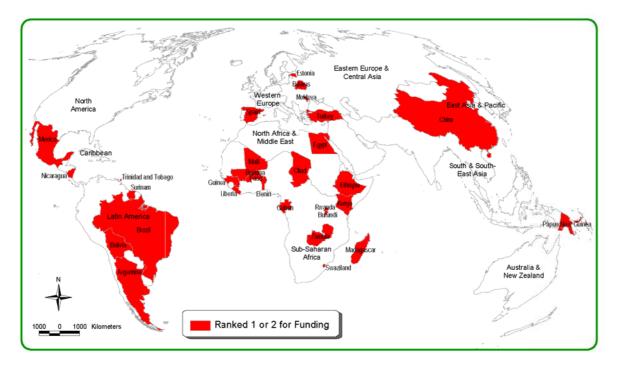


Figure 7-12. Combined ranking of the importance of funding HIV/AIDS and the curriculum

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Twenty-three countries ranked HIV/AIDS and the curriculum as their most important priority for Funding. The map shows that

they were distributed throughout the world but in particular Sub-Saharan Africa, Latin America, Western and Eastern Europe.



Map 7-4. Distribution of countries ranking HIV/AIDS and the curriculum as Priority 1 or 2 for Funding

Ranking for technical assistance for 'HIV/AIDS and the Curriculum'

Ministries were asked to rank the importance of technical assistance for HIV/AIDS and curriculum issues. The median for this ranking was 3 for all prevalence groupings. This again points to the fact that regardless of prevalence categorisation, countries consider technical assistance for HIV/AIDS and

curriculum issues to be very important. Only one medium prevalence country considered this area to be 'least important' by assigning it a category 9 ranking. 39 countries (43%) assigned a ranking of 1 or 2, highlighting how important they consider technical assistance for this area to be.

	Ranking technical assistance for HIV/AIDS and the Curriculum								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	33%	12%	15%	12%	21%	6%	0%	0%	0%
Medium prevalence	33%	13%	7%	13%	13%	0%	7%	7%	7%
High prevalence	16%	21%	16%	16%	5%	5%	11%	11%	0%
TOTAL	28% (19)	15% (10)	13% (9)	13% (9)	15% (10)	4% (3)	4% (3)	4% (3)	1% (1)

Table 7-6. Ranking of the importance of technical assistance in the area of HIV/AIDS and the curriculum

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In general, technical assistance for HIV/AIDS and curriculum issues was rated as most important, clustered around categories 1 and 2. Only 9% of countries indicated that technical assistance for HIV/AIDS and curriculum issues was

relatively less important, with rankings between 7 and 9. Just under one third of the countries considered it to be of average importance by assigning rankings within the band of 4 to 7.

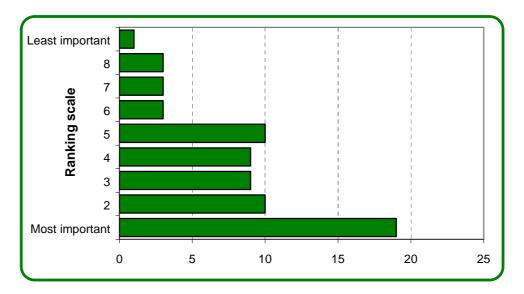


Figure 7-13. Combined ranking of the importance of technical assistance for HIV/AIDS and the curriculum

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References:

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UNAIDS, UNFPA and UNIFEM: Women and HIV/AIDS: Confronting the Crisis, 2004

ActionAid Alliance: The sound of silence – difficulties in communicating on HIV/AIDS in school, 2003

Badcock-Walters, PJ; Kelly, MJ & Görgens, M: Does Knowledge Equal Behaviour Change?, UNESCO, 2004

8

Responses aimed at the Infected and Affected

Section Overview

Ministries of Education face an increasing challenge as the number of those infected and affected by HIV/AIDS grows. Ministries have a duty and responsibility towards members of staff, including teachers and support staff, as well as learners who are infected and affected. Learners, stressed by many HIV/AIDS-related pressures in the home, community and classroom, will be a particular and growing challenge for the education sector. This section of the Global Readiness Survey was designed to assess how prepared Ministries are to respond to the HIV/AIDS-related challenges faced by learners.

While the scope of services that provide care, support and treatment to those infected and affected, is extremely wide, the range of questions within this section was limited. Ministries of Education were asked about support offered to orphans and other vulnerable children and specifically the availability of school feeding schemes. Ministries were also asked to indicate if teachers received training in caring for infected pupils and also what counselling services

were available.

Operational experience in many countries confirms that Ministries of Education recognise that care and support for those infected and affected is a severely neglected issue. Several countries have identified this as a priority area that urgently needs to be addressed.

In 2002, Family Health International undertook research in Zambia aimed at identifying the psychosocial and emotional needs of orphaned children and to determine ways of giving support. For many of the children in this study, their comments reveal a simple reality – only children with living parents receive the benefits of education. If your parents have passed away, then you will not attend school. For children not in school, descriptions of their situation included words such as neglect, difficulty and envy for others. Children out of school did not feel happy with their lives.

Voices from the communities, Family Health International, 2002

Programmes of support for learners

Ministries were asked to indicate if they had programmes to address the needs of

orphaned vulnerable and children (OVC) in the system. Consideration had to be given to whether there was a system for identifying and supporting orphans and vulnerable children. Some of alternatives provided, to guide Ministry responses, included provision supervised

medication, home learning, and shorter hours for children caring for parents and/or siblings.

"Staying in school offers orphaned children the best chance of escaping extreme poverty and its associated risks. Thus, everything possible needs

Prof Michael J Kelly

to be done to keep them in

school.'

Over half of the countries responding indicated that they already had

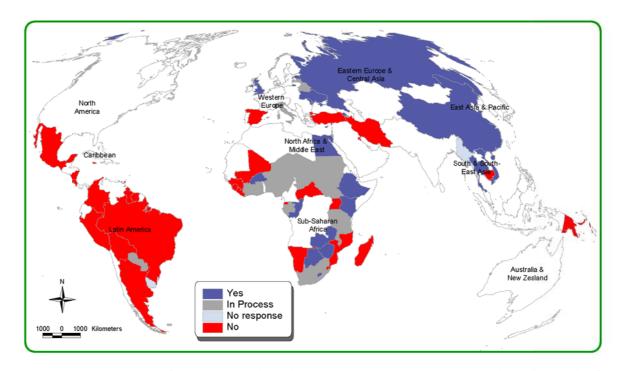
programmes in place, while another 18 countries stated that they were in the process of implementing or developing these. One third of the high prevalence countries indicated that, as yet, they do not have programmes to address the needs of orphaned and

vulnerable children.

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	Yes	No	In	
	165	140	process	
Low prevalence	11	17	6	
	(32%)	(50%)	(18%)	
Modium provolonco	2	7	6	
Medium prevalence	(13%)	(47%)	(40%)	
High provalence	8	6	6	
High prevalence	(40%)	(30%)	(30%)	

Table 8-1. Countries in which the Education Ministry has a programme to address the needs of OVC



Map 8-1. Distribution of countries in which the Ministry has a programme to address the needs of Orphaned and Vulnerable Children

School Health and Nutrition programmes are viewed as one of the more effective means for the education sector to provide support for those in need. Feeding programmes are often introduced into schools as a tangible means of supporting poverty-stricken families and encouraging children to stay in or return to school. When asked if there was currently a school feeding scheme in place, 73% (51 countries) said Yes. Some countries

qualified this, stating that the feeding scheme only covers certain grades. The illustrative example provided in the Survey Guidelines, described a feeding scheme as the delivery of one meal per day to all pupils at primary school level. School feeding programmes are in evidence over all three prevalence categories. Only one country elected not to respond to this question.

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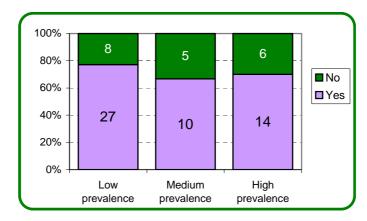


Figure 8-1. Countries in which the Education Ministry currently has a school feeding scheme in place

Teacher training and counselling services to support pupils

In any circumstances, the loss of a loved one or colleague will be a traumatic and

experience. testing In societies where HIV/AIDS has an impact, individuals, families, communities and institutional staff may be dealing with multiple incidences, collapse of conventional support systems the stress of being affected or even infected. In these circumstances, children in particular may fall through the net and not receive the traditional support that families and communities have to offer.

They may be left to the care of grandparents, or even have to take charge of siblings in an environment without a breadwinner.

Care and support in the educational setting involves establishing mechanisms to address the psychosocial, physical, emotional, educational and spiritual needs of affected and infected individuals, especially orphans, vulnerable children

(OVC) and learners with special needs. Educators, managers, employers,

employees, learners, parents stakeholders have particular duty to ensure that the rights and dignity of all affected or infected persons are respected. This implies that Ministries have an added responsibility to prepare teachers for the new role they are required to undertake and in turn the ministry also has offer members of staff supportive environment required for them to continue

working productively. In assessing how ready Ministries are to take on these new challenges, the Global Readiness Survey asked high prevalence countries to indicate whether they provided training to teachers in caring for affected and infected learners. 75% of the 20 countries responding indicated that teachers have received training in caring for affected and infected learners.

"Ensuring access to
education is critical in
responding to the orphan
crisis. Orphans often fall
behind or drop out of school,
compromising their
psychosocial development
and future prospects. This
also affects a country's long
term recovery from the
epidemic."
2004 UNAIDS global report

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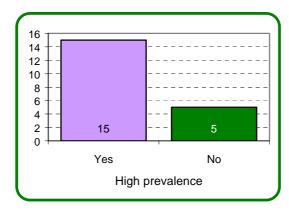


Figure 8-2. High prevalence countries providing training to teachers in caring for affected and infected pupils

"Children need continuous

support to cope with long

term issues related to the loss

of a parent.'

Secondary school learners have better access to counselling services provided by

trained counsellors: Ministries reported that 44% of their secondary schools and 38% of primary schools have access to counselling services. For the purposes of the Global Readiness Survey, counselling

services referred to psychological support services, as opposed to services such as career counselling. Interestingly, proportionately more schools in low prevalence countries have access

to counselling services, possibly reflecting more developed economies and capacity in these countries. 54% of the schools in low prevalence countries, 27% of schools in medium prevalence countries

and 30% of high prevalence countries have access to psychological support services.

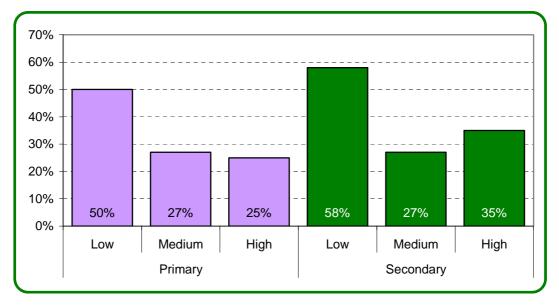
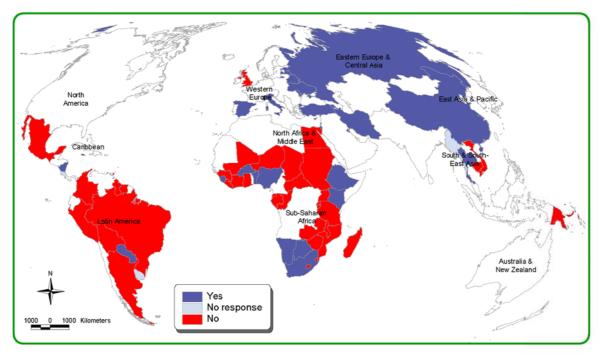


Figure 8-3. Proportion of schools that have access to counselling services provided by trained counsellors

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Map 8-2. Distribution of countries in which counselling services, by trained counsellors, are available at most or all secondary schools

Self-assessment and prioritisation

Rating the state of readiness in terms of responses aimed at the infected and affected

As with the other sections contained with the Global Readiness Survey, Ministries were asked to rate themselves according to a five-point scale. The intention was to gain an understanding of how Ministry officials rate their state of readiness in relation to key areas of response. One country elected not to complete this section. The median for each of the

prevalence groups was low; for medium prevalence countries one, low prevalence countries one and high prevalence and average score of three. 39% or 27 countries ranked themselves in the lowest category of 1 and not a single middle prevalence country awarded itself the highest ranking of five.

	Self assessment ranking						
	1 2 3 4 5 (high						
	(low)						
Low prevalence	11	7	13	3	1		
Medium prevalence	10	1	2	2	0		
High prevalence	6	3	8	1	2		
TOTAL	27 (39%)	11 (16%)	23 (33%)	6 (9%)	3 (4%)		

Table 8-2. Distribution of countries according to self-assessment ranking for responses aimed at the infected and affected

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The majority of the medium prevalence countries (67%) awarded themselves the lowest score while many of the high (55%) and low (57%) prevalence countries rated themselves average or just below average with a ranking of 2 or 3. It is noticeable

that very few countries, 9 in total, ranked themselves at the upper level of the scale, in the band of 4 and 5 – of those that did, 4 were low prevalence countries, 2 were medium and 3 were high prevalence.

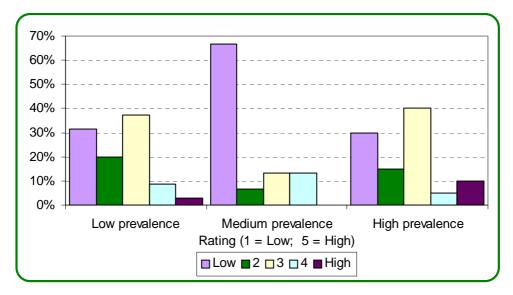


Figure 8-4. Self-assessment rating of countries for the component of responses aimed at the infected and affected

Ranking importance of funding support for responses aimed at the infected and affected

Ministries were asked to rank the importance of funding support for the infected and affected, where 1 was considered to be most important and 9 the least important. The median for this ranking was 3 for high prevalence countries, 4 for medium prevalence countries and 7 for low prevalence

countries. Across each of the prevalence categories, there were 9 Ministries that identified funding to support the infected and affected as most important, by selecting category 1, while in medium prevalence countries there were two Ministries that indicated it was least important to them (category 9).

	Ranking of the funding for the infected and affected								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	6%	9%	9%	6%	3%	9%	31%	25%	0%
Medium prevalence	13%	13%	7%	27%	0%	13%	13%	0%	13%
High prevalence	26%	21%	16%	0%	26%	5%	0%	5%	0%
TOTAL	14% (9)	14% (9)	11% (7)	9% (6)	9% (6)	9% (6)	18% (12)	14% (9)	3% (2)

Table 8-3. Ranking of the importance of funding initiatives to support responses aimed at the infected and affected

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Low prevalence countries considered this area to be of low importance, with 18 countries (56%) indicating a score between 7 and 8. By contrast, high prevalence countries attached a much greater priority to the need for funding for this area, with 63% indicating a score of between 1 and 3.

Overall ranking, across the prevalence bands, was divided: One-third of countries considered funding to support the infected and affected of lower importance, by allocating a score of 7 to 9. 39% considered it most important with a score of 1 to 3. The remaining 27% clustered in the middle, between 5 and 7.

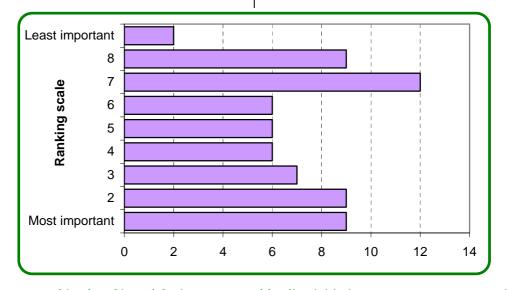
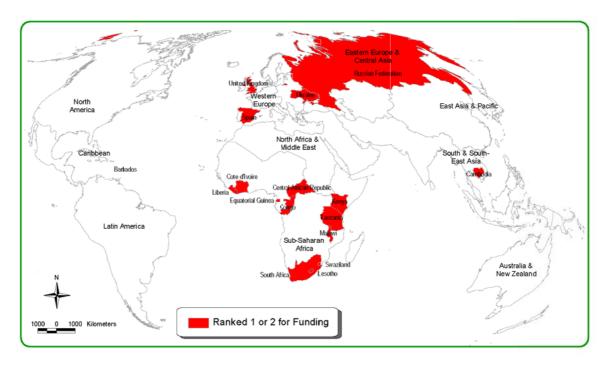


Figure 8-5. Combined ranking of the importance of funding initiatives to support responses aimed at the infected and affected

A total of 18 countries ranked Ministry of Education HIV/AIDS management support for infected and affected pupils as their first or second priority for funding. Two of were in Western Europe and two each in Eastern Europe and Central Asia. The bulk of the remainder were distributed throughout Sub-Saharan Africa.



Map 8-3. Distribution of countries ranking responses aimed at the infected and affected as Priority 1 or 2 for funding

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Ranking importance of funding support for technical assistance

Ministries were asked to rank the importance of the need for technical assistance, where 1 was most important and 9 least important. The median for this ranking across the prevalence segmentation was 4 for medium, 5 for high and 6 for low prevalence countries. There

were five Ministries that identified technical assistance to support the infected and affected as their most important priority, category 1, while in low prevalence countries not a single country indicated that it was least important (category 9).

	Ranking for technical assistance for infected and affected								
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	9%	15%	6%	3%	15%	18%	21%	12%	0%
Medium prevalence	7%	27%	12%	7%	0%	7%	20%	7%	13%
High prevalence	5%	11%	16%	5%	16%	21%	11%	11%	5%
TOTAL	7% (5)	16% (11)	10% (7)	4% (3)	12% (8)	16% (11)	18% (12)	10% (7)	4% (3)

Table 8-4. Ranking of the importance of technical assistance for initiatives to support responses aimed at the infected and affected

There is no clear distribution pattern of the perceived need for technical assistance amongst countries. Countries were evenly divided in the priority ranking for technical assistance to support the infected and affected: One-third ranked this within the

band of 1 to 3, while another third indicated it to be least important by ranking it between 7 and 9. The remaining third ranked it within the band of 4 to 6.

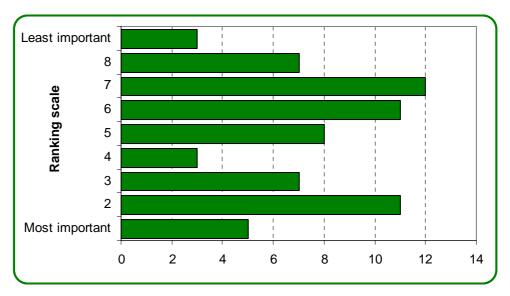


Figure 8-6. Combined ranking of the importance of technical assistance for initiatives to support responses aimed at the infected and affected

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Partnership development in response to HIV/AIDS

Section Overview

In the AIDS era, no single Ministry of Education can hope to manage and mitigate the impact of HIV/AIDS without assistance: While every Ministry has a mandate and responsibility to ensure the provision of quality education, it cannot single-handedly stem the erosive affects of the pandemic on this mandate. Although the concept of shared decision-making and responsibility with related Ministries, NGOs and other civil society structures may once have been viewed with suspicion by some Education officials, the history of such partnerships is overwhelmingly positive. Most Ministries would now concede that delivery and specialist support services might often depend on non-government, community or faith-based development partners. Partnerships with national government structures such as the national AIDS co-ordinating councils and the ministry of Health HIV/AIDS management structures are also needed.

This is particularly true of HIV/AIDS intervention and response: Many Ministries of Education simply do not have the human resources, logistics and experience or specialist skills to deal with sector advocacy, training, support services, materials development or technical assistance needs. In short, response to the complex impacts of HIV/AIDS exceeds the capability of any one sector. Thus Education Ministries have had to redefine themselves as an integral part of the wider education sector, with the responsibility of leading and coordinating a set of multi-faceted and cross-sectoral partnerships. In the face of HIV/AIDS impact, many Ministries are now making deliberate and systematic efforts to develop, manage and sustain such partnerships for the benefit of the education sector. The questions in this section of the Global Readiness Survey are intended to provide a better understanding of steps that Ministries of Education have taken to form such partnerships.

In the Global Readiness Survey, Ministries of Education were asked to indicate if efforts have been made to identify partners; who the Ministries involve; and whether the sector has a shared strategy for the fight against HIV/AIDS.

Working in partnerships to respond to AIDS

National AIDS authorities are increasingly turning to formal partnership forums to stimulate non-governmental participation, broaden national ownership of the response and increase transparency. This approach was first developed in Africa, under the International partnership against AIDS in Africa. The concept is now more widespread, but its best examples are still in sub-Saharan Africa. For example, the Uganda AAIDS partnership is a national coordinating mechanism of nine constituencies working on AIDS that represent all stakeholders at all levels. They share information and jointly plan and coordinate activities.

In neighbouring Kenya, an annual Joint AIDS Programme Review by all stakeholders supports the country's multisectoral response. The review was first conducted in May 2002 by the National AIDS Control Council, civil society groups, donors and other stakeholders. Among other advantages, the review provides the government with a way of linking its strategic plan and other important policy making processes.

2004 Report of the Global AIDS epidemic, UNAIDS

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Identification of possible partners

Partnerships are critical to widening and

reinforcing the response of the Education sector to HIV/AIDS, and to providing support to the Ministry of Education as the sector focal-point. In the survey, all Ministries were asked to indicate if an effort had been made to identify

"Building partnerships is about working with others to achieve what we cannot achieve on our own" International HIV/AIDS Alliance

band, considered it important to identify possible partners. Over 90% of the countries indicated that they hade made an effort. It is encouraging to note the high proportion of low prevalence countries, 91% or 32 countries, that have already

possible partners in the fight against ta

taken the important step of identifying partners.

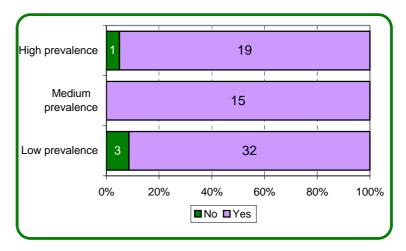
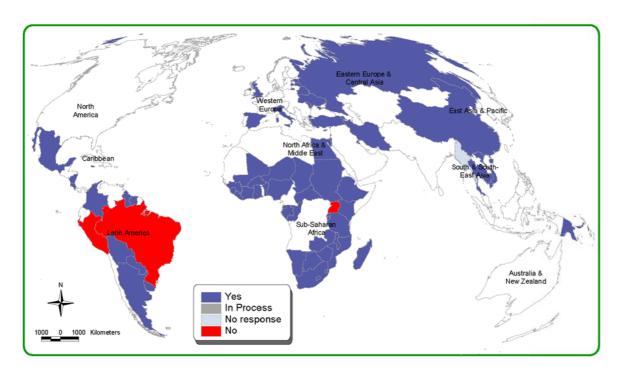


Figure 9-1. Countries in which ministries have made an effort to identify possible partners, by prevalence



Map 9-1. Distribution of countries which have made an effort to identify possible partners in the fight against HIV/AIDS within the Education Sector

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Possible partners include nongovernmental organisations (NGOs), other Ministries or departments, faith-based organisations (FBOs), private sector organisations etc. Only one country within the high and medium prevalence countries indicated they have as yet not made an effort to identify partners. One country elected not to respond to this specific question.

	Yes	No	
Low provalance	32	3	
Low prevalence	(91%)	(9%)	
Modium provolonco	15	0	
Medium prevalence	(100%)	(0%)	
High providence	19	1	
High prevalence	(95%)	(5%)	

Table 9-1. Countries where the Ministry has made an effort to identify possible partners

Involvement of partners in the fight against AIDS

The MOEST shall make a deliberate and systematic effort to form, manage and sustain partnerships for the benefit of the education and training sector from within and outside the sector, and develop a management information system to monitor and coordinate partnership agreements and activity.

MOEST will strive towards creating an environment and working practices that are transparent, accountable and efficient in the handling of partnership agreements. Partnership resources will need to be carefully managed to ensure that the sector is adequately covered and that the most vulnerable groups are targeted.

Extract from the Kenyan Ministry of Education, Science and Technology (MOEST)
HIV/AIDS Education Sector Policy, 2004

When high and medium prevalence countries were asked if the Education sector has a shared strategy for the fight against HIV/AIDS, 94% of the countries in this group were able to indicate Yes. Only 2 (15%) of the low prevalence countries indicated they did not as yet have a shared strategy.

Ministries of Education were also asked to indicate which of the following groups they involved in their fight against AIDS: other government agencies or ministries, private sector, non-governmental organisations and faith based organisations or religious

groupings. Low prevalence countries were not asked to indicate progress in forging partnerships with the private sector.

The majority of the countries indicated they have already forged relationships with the different groupings and high prevalence countries have generally covered more ground in this area. All Ministries of Education recognise the excellent contributions made by non-governmental organisations in the fight against AIDS and have engaged this critical sector.

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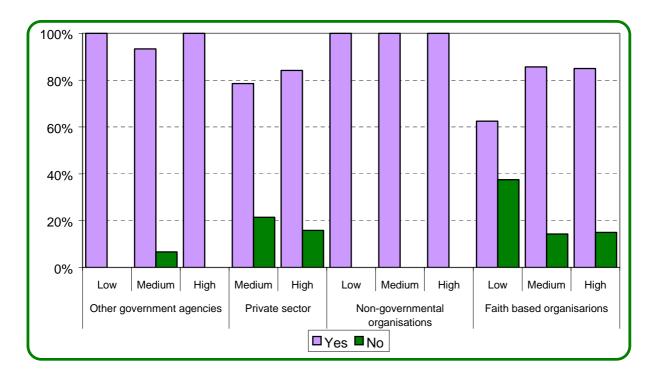


Figure 9-2. Partner types/categories involved by Education Ministries, by HIV/AIDS prevalence segmentation

Self-assessment and prioritisation

Rating the state of readiness with regard to Partnership Development

Ministries were asked to rate themselves according to a five-point scale on their readiness to engage in partnerships. One country elected not to complete this section. The median for low prevalence countries was 3, and was slightly higher for the high and medium prevalence groups — a median of 4. No medium and

high prevalence countries gave themselves a low rating (by scoring a 1). All high prevalence countries are located between the scores of 3 to 5. The spread of the scores amongst all countries tended more towards 4 and 5, reflecting that countries feel they have done quite well with developing and forging partnerships.

	Self assessment ranking						
	1	1 2 3 4 5 (hi					
	(low)						
Low prevalence	2	4	14	8	6		
Medium prevalence	0	2	5	6	2		
High prevalence	0	0	4	12	4		
TOTAL	2 (3%)	6 (9%)	23 (33%)	26 (38%)	12 (17%)		

Table 9-2. Distribution of countries according to self-assessment ranking for partnership development

Most of the low prevalence countries awarded themselves an average score of 3, while many of the medium and high prevalence countries rated themselves above average, by allocating a score of 4

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or 5. 60% of the high prevalence countries indicated a score of 4.

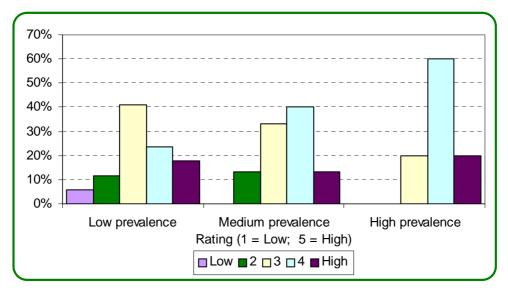


Figure 9-3. Country self assessment ranking for partnership development

Ranking importance of funding support Partnership Development

Ministries were asked to rank the importance of funding for Partnerships, where 1 was considered to be most important and 9 least important. The median for this ranking was 4.5 for low prevalence countries, 6 for medium prevalence countries and 7 for high prevalence countries, suggesting that higher prevalence countries generally consider funding to create and support

partnerships to be less important than low prevalence countries. In both low and high prevalence categories, there were some Ministries that identified funding to support partnership initiatives to be most important, (by selecting category 1), while it was only amongst the medium and high prevalence countries that some considered it to be of least importance by assigning it rating of 9.

	R	Ranking for the funding for partnership development							
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	9%	19%	9%	13%	13%	25%	6%	6%	0%
Medium prevalence	0%	13%	20%	7%	7%	7%	27%	7%	13%
High prevalence	5%	11%	11%	5%	5%	11%	16%	16%	21%
TOTAL	6% (4)	15% (10)	12% (8)	9% (6)	9% (6)	17% (11)	14% (9)	9% (6)	9% (6)

Table 9-3. Ranking of the importance of funding partnership development

Nearly half the medium prevalence countries and 53% of high prevalence countries gave this a low priority of between 7 to 9 while 50% of the low prevalence countries assigned an average rating of between 4 and 6. Considering all countries, regardless of prevalence

segmentation, there is no clear distribution pattern over the different categories. Eleven countries selected category 6, which is below average, while ten countries selected category 2, which is only a notch away from being most important.

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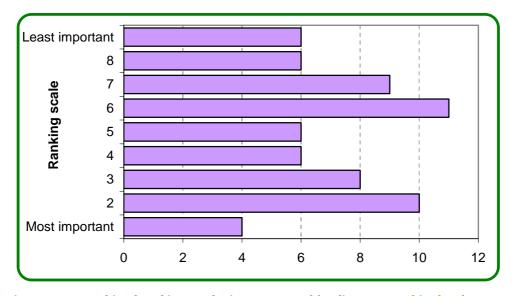


Figure 9-4. Combined ranking on the importance of funding partnership development

Ranking of technical assistance for 'Partnership development'

Ministries were asked to rank the importance of funding for technical assistance in developing and supporting Partnerships. The median for this ranking was 6 for low and medium prevalence countries and two categories higher for high prevalence countries. This again points to the fact that higher prevalence countries consider technical assistance for

partnerships to be less important than low and medium prevalence countries. One low prevalence and one high prevalence country identified technical support for partnerships to be most important, (by selecting category 1) while seven high prevalence countries and two medium prevalence country considered it to be of least importance by giving it a rank of 9.

	Ran	Ranking for technical assistance for partnership development							
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	3%	15%	9%	6%	12%	24%	15%	15%	0%
Medium prevalence	0%	1%	1%	2%	1%	3%	2%	3%	2%
High prevalence	1%	1%	2%	2%	25	0%	1%	3%	7%
TOTAL	3% (2)	10% (7)	9% (6)	9% (6)	10% (7)	16% (11)	12% (8)	16% (11)	13% (9)

Table 9-4. Ranking of the priority for technical assistance the area of partnership development

42% of countries indicated technical assistance for creating and maintaining an enabling environment to be relatively less important, categorising this with a rank of between 7 and 9, while 22% considered it to be most important, ranking it between category 1 and 3. One third of the countries considered it to be of average importance by assigning their ranking within the band of 4 to 7. In general,

technical assistance for partnerships was rated as less important, dominating categories 7, 8 and 9.

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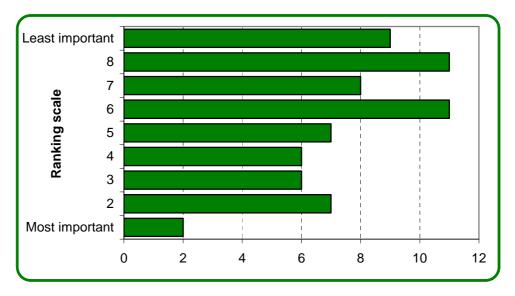
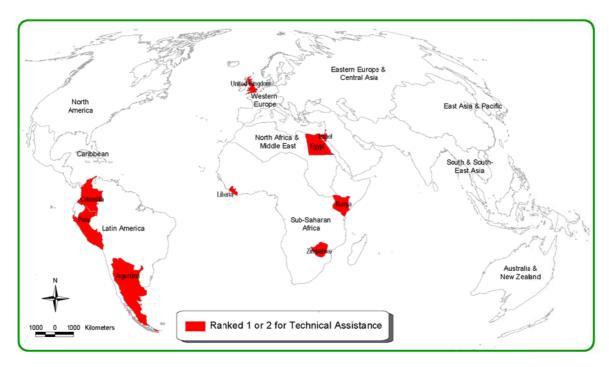


Figure 9-5. Combined ranking of the importance of technical assistance for partnership development

Only nine countries ranked Partnerships as their first or second priority for technical assistance. Three of these are located in South America and the remainder are in Sub-Saharan Africa, Western Europe, North Africa and the Middle East.



Map 9-2. Distribution of countries ranking partnership development as Priority 1 or 2 for Technical Assistance

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Research guiding the Response to HIV/AIDS

Section Overview

In a field as comparatively new, dynamic and challenging as HIV/AIDS impact on Education, it would be reasonable to assume that research would be a high priority global More particularly, in those countries experiencing (or suspecting) the impact of the pandemic on their Education systems, attention to data collection, management information systems and prioritised research agendas could be expected to dominate Ministry of Education concerns. In the face of growing awareness of its impact on demand, supply, function, output and quality, some Ministries have indeed seen the need to strengthen their management and mitigation response through the development of an integrated, focused and systemic research agenda. Such a research agenda is based on the understanding that special attention should be given to research on levels of HIV prevalence in the workforce, access, enrolment and retention, levels of orphanhood and vulnerability, quality, prevention programme effectiveness and differential impacts on gender, for example. Apart from informing response and the wider field of enquiry, such research should also identify and highlight examples of good practice, for replication within the education sector. particular concern is the need for prioritised national and international research agendas to rationalise the immense and often-uncoordinated energy and expenditure currently committed to education research, and increase attention to the issue of HIV/AIDS impact.

Although some Ministries have embraced an integrated research agenda, this has not uniform ally been applied. The often-neglected area of research was covered in the Global Readiness Survey and attempted to identify whether or not Education-related HIV/AIDS research programmes have been initiated. Ministries of Education were asked two questions; one related to whether a research agenda has been defined, while the other questioned if any research had been commissioned. Both questions were asked of all countries.

A Research Agenda is a framework of priorities for a fixed period of time that functions to guide, focus and co-ordinate research so that the problem or need is addressed systematically in terms of the most pressing issues and what will yield the most gains, within given fiscal constraints and capacity. A research agenda is best developed though a process of analysing the problem or need and building consensus among the relevant role players and stakeholders.

Mobile Task Team on the Impact of HIV/AIDS on Education (MTT), August 2004 $\,$

Defining a research agenda

Countries were asked to indicate whether a research agenda had been defined that prioritised gaps in knowledge relating to the impacts of, and response to, HIV/AIDS within the education sector. Two countries elected not to provide a response. Of the

69 countries that responded 62% indicated that as yet they do not have a research agenda. Surprisingly, a higher percentage of low prevalence countries (35%) than medium prevalence countries (27%) have defined a research agenda.

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	Yes	No
Low prevalence	12	22
Low prevalence	(35%)	(65%)
Medium prevalence	4	11
riedium prevalence	(27%)	(73%)
High prevalence	10	10
Tilgii prevalence	(50%)	(50%)

Table 10-1. Countries in which the Ministry has an HIV/AIDS research agenda

7 out of every 10 countries

in the high prevalence

grouping have

commissioned research to

inform the education sector

response to HIV/AIDS

Commissioning research

The Education sector is in the very fortunate position of having direct access to tertiary institutions and other leading specialists in the area of research. Where possible, universities and other institutions of higher learning should be encouraged to undertake basic, preventive

and curative research or take a lead in developing partnerships for this purpose. When asked if any research has been commissioned to inform the education sector response to HIV/AIDS, 46% of the

69 countries responding responded in the affirmative.

High prevalence countries appear to be leading the way in terms of commissioning research, since 70% of the countries in this grouping, indicated that they have in fact

commissioned research, while only 40% of medium prevalence and 35% of low prevalence countries reported the same.

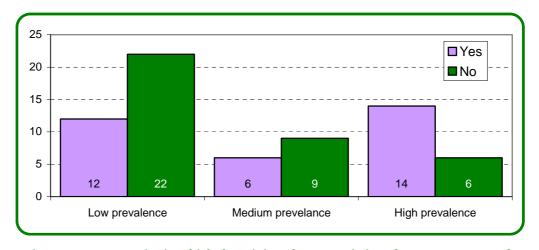
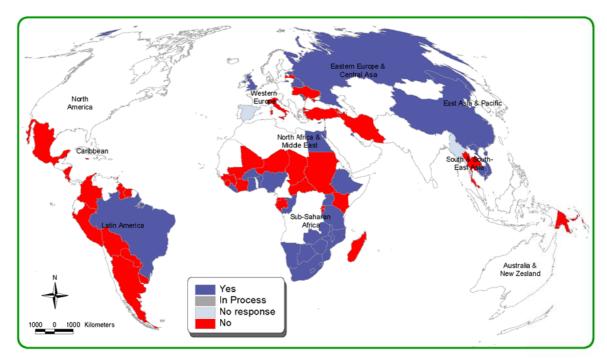


Figure 10-1. Countries in which the Ministry has commissioned HIV/AIDS research

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Map 10-1. Distribution of countries in which any research been commissioned to inform the education sector response to HIV/AIDS

Self-assessment and prioritisation

Rating the state of readiness in terms of HIV/AIDS research

Ministries of Education were asked to rate themselves on their readiness to identify, the need for, undertake or commission research, according to a five-point scale. One country elected not to complete this section. Rating themselves on this question, the median for low and high

prevalence groups was 2, while the median was lower for the medium prevalence group at 1. Ten medium prevalence countries, assigned themselves the lowest ranking, category 1, indicating that they rated their response to research needs as being poor.

	Self assessment ranking of research						
	1	2	3	4	5 (high)		
	(low)						
Low prevalence	14	7	7	4	2		
Medium prevalence	10	1	2	1	1		
High prevalence	4	7	5	2	2		
TOTAL	28 (41%)	15 (22%)	14 (20%)	7 (10%)	5 (7%)		

Table 10-2. Distribution of countries according to self-assessment ranking on research

For all three prevalence groupings the majority of the countries awarded themselves below average scores, particularly the low and medium

prevalence countries. The high prevalence countries rated themselves slightly better with a rating of 2 being selected by 35% of the countries.

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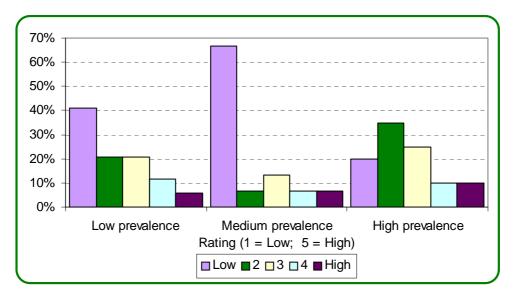


Figure 10-2. Countries self assessment ranking for HIV/AIDS research

Ranking the importance of funding HIV/AIDS research

Ministries were asked to rank the importance of funding HIV/AIDS research, in which 1 was most important and 9 least important. The median for all prevalence groupings was five. While most of the high prevalence countries (12), assigned themselves a ranking of 1 to 4, seven countries within this prevalence band

considered funding support for research to be least important, at category 9, leaving no countries in the 6 to 8 band. Some Ministries within low and medium prevalence countries also indicated that funding for research was least important (by selecting category 9).

		Ranking the funding for HIV/AIDS Research							
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	13%	13%	13%	3%	25%	6%	9%	19%	0%
Medium prevalence	20%	20%	7%	0%	20%	7%	20%	7%	0%
High prevalence	5%	21%	5%	16%	16%	0%	0%	0%	37%
TOTAL	12% (8)	17% (11)	9% (6)	6% (4)	21% (14)	5% (3)	9% (6)	11% (7)	11% (7)

Table 10-3. Ranking of the importance of funding for HIV/AIDS research

Most medium and low prevalence countries considered funding for research to be a fairly important priority, since 47% and 38% respectively allocated a score of between 1 and 3. Interestingly, 37% of the

high prevalence countries assigned scores at the other end of the scale (category 9), indicating that the *funding* of research is the least important issue.

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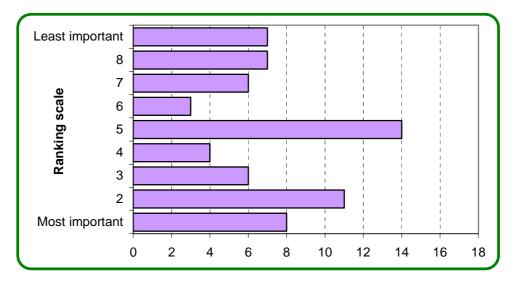
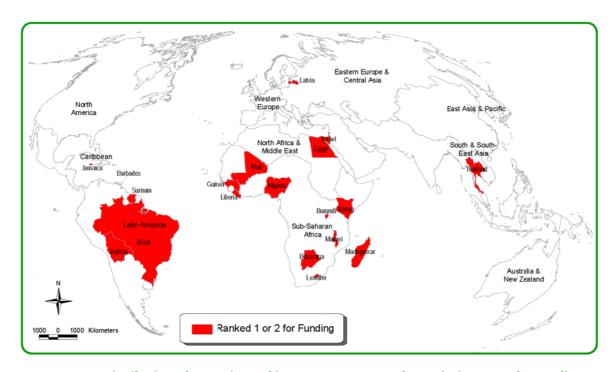


Figure 10-3. Combined ranking of the priority for funding HIV/AIDS research

A total of 19 countries ranked support for Research Programmes as their first or second priority for funding. These countries were distributed throughout all UN Regions, with a high number in South America and the Caribbean, relative to the few countries sampled from there.



Map 10-2. Distribution of countries ranking HIV/AIDS research as Priority 1 or 2 for Funding

Ranking the priority for technical assistance for HIV/AIDS research

Ministries were then asked to rank the importance of technical assistance to assist the Ministry in research. The median for this ranking, across all prevalence groupings, was below average at three. This may point to the fact that

countries consider technical assistance for research to be more important than other areas. Across all prevalence bands there were countries that assigned research the highest importance, by ranking this as category 1, while for both medium and low

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prevalence countries, no respondents selected the least important end of the

scale, at category 9.

		Ranking for technical assistance for research							
	1 (Most important)	2	3	4	5	6	7	8	9 (Least important)
Low prevalence	21%	24%	9%	6%	6%	9%	0%	24%	0%
Medium prevalence	27%	20%	13%	7%	7%	7%	20%	0%	0%
High prevalence	11%	25%	32%	16%	0%	0%	5%	5%	5%
TOTAL	19% (13)	24% (16)	16% (11)	9% (6)	4% (3)	6% (4)	6% (4)	13% (9)	1% (1)

Table 10-4. Ranking of the importance of technical assistance for HIV/AIDS research by prevalence category

43% of the countries ranked technical assistance for research to be most important, in the band 1 to 2, while 14% considered it to be least important, in the band 8 and 9.

The distribution of the majority of the schools is at the lower end of the scale since band 1 to 4 accounts for 46 countries (69%). This indicated that the majority of the countries consider technical assistance for research to be important.

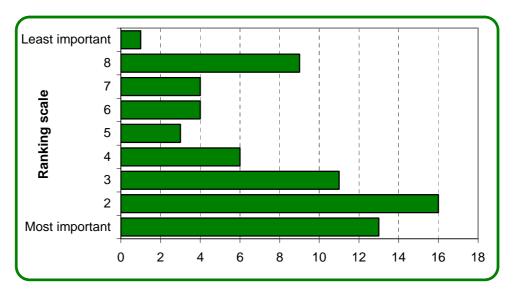
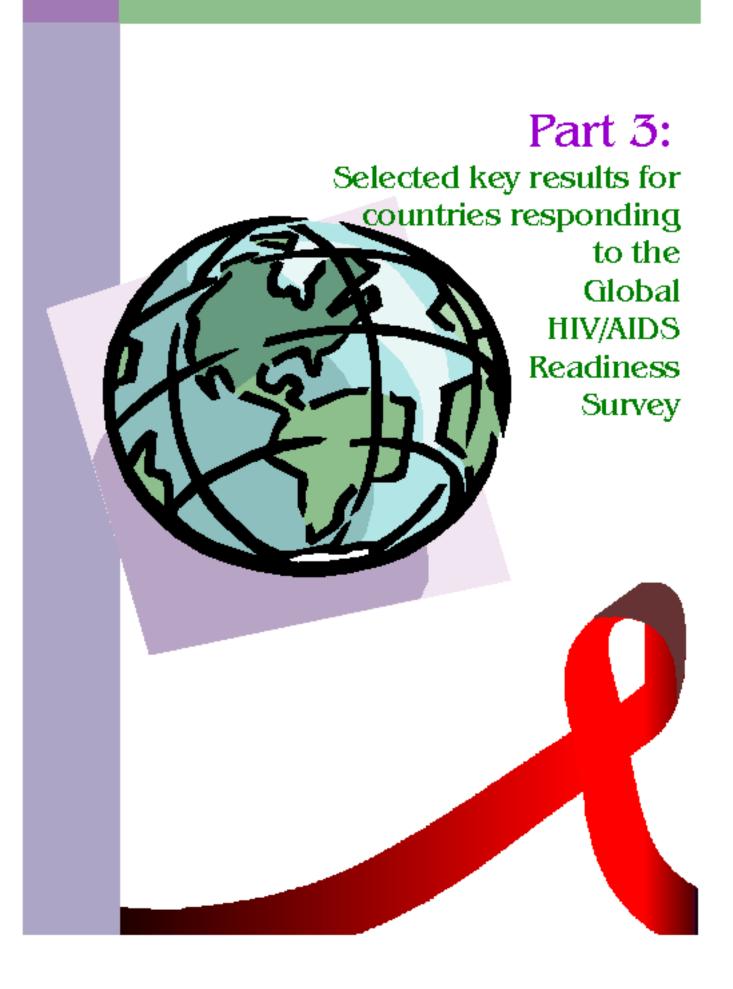


Figure 10-4. Combined ranking of the importance of technical assistance for HIV/AIDS research

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Selected Key Results for:	Argentina		
UN Region: Latin America	Prevalence: Low	Date Completed:	15 Sep 04
1. Education System	. /		
 Is there a single education Ministry in your countr Education)? 		ation and Ministry of Higher	
Is total enrolment in your schools growing, shrinki	•		
 Ministry of Education HIV/AIDS structur At the national level, do you have a dedicated cor 		esnonsible for co ordinating	
the response to the HIV/AIDS epidemic?	minutee of management unit that is re	esponsible for co-ordinating	No
 Are there staff at the national Ministry level who o 			Yes
Do you have regional structures responsible for ir		IDS epidemic?	n/a
 Senabling Environment for an effective research You have regulations for schools and other educations 		ons and fees	False
The Ministry of Education has a specific HIV/AIDS		ons and ices	In Process
The Ministry of Education has a workplace policy			False
 Other rules and regulations within the Ministry has HIV/AIDS 	ve been reviewed in light of the impa	cts and implications of	False
4. HIV/AIDS Mainstreaming			
 Is there an education sector HIV/AIDS strategic p 			n/a
Is HIV/AIDS considered when making district level	•		n/a
 Human Resources adaptation to the imp Human resource policies have been amended to 		lity to HIV/AIDS (A a	
deployment of teachers away from their families)	minimise valiterability and susceptibil	illy to HIV/AIDS (e.g.	n/a
 An analysis of the impact of HIV/AIDS on demand 	d and supply of human resources in t	he education sector has been	n/a
conductedGuidelines for teachers on dealing with HIV/AIDS	in schools have been developed		In Process
6. Workplace HIV/AIDS programmes	ili schools have been developed		IIII Tocess
 Does the Ministry/Department have an HIV/AIDS 	awareness programme for all its emp	oloyees:	
At the national level?			No
At the district level? For staff at education institutions?			No Yes
 Have guidelines for implementing universal preca 			No
Does the Ministry have a policy of non-discrimina		ncement, continued	No
 employment and benefits for personnel affected b Do you enforce confidentiality of information about 		V/AIDS?	No
7. HIV/AIDS and the Curriculum	at will list y employees directed by this	MIDS:	No
 Is there a life skills programme established in you 	r education system at the following le	evels:	
Primary?			Yes
Secondary? Does the life skills programme consider issu	ues relating to gender?		Yes Yes
 Have orientation programmes been undertaken for 	or teachers in school life skills and HI		In Process
Has there been an orientation process for parents Are LIV/AIDS meterials available to all students were all the second and the second are second as a seco		schools?	In Process
 Are HIV/AIDS materials available to all students v Are HIV/AIDS and life skills integral components i 		preparation of all new	Yes
teachers?	·	•	Yes
Have efforts been made to include out of school y		reness efforts?	Yes
 Responses aimes at the Infected and Af Does the Ministry have a programme to address to 		e children in the education	
system?	·	C Grindroff in the Cuucation	No
Is there currently a school feeding scheme in place		Callandar I.	No
 Are counseling services, by trained counsellors, a At the Primary level 	available at most or all schools at the	rollowing levels:	No
At the Secondary level			No
9. Partnership development in response to			
Has an effort been made to identify possible partr Describe adjusting agets have a characteristic process.		thin the education sector?	Yes
 Does the education sector have a shared strategy 10. Research guiding the response to HIV/A 	, , , , , , , , , , , , , , , , , , , ,		n/a
 Has a research agenda been defined that prioritis 		impacts of and response to	
HIV/AIDS within the education sector?			No
 Has any research been commissioned to inform t 	he education sector response to HIV	/AIDS?	No

Please note that this is an <u>extract</u> of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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S	elected Key Results for: Armenia	
U	N Region: Eastern Europe & Central Asia Prevalence: Low Date Completed:	19 May 04
	Education System	
•	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
2.	Is total enrolment in your schools growing, shrinking or remaining stable? Ministry of Education HIV/AIDS structures	Shrinking
•	At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
	Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	No n/a
3.	Enabling Environment for an effective response to HIV/AIDS You have regulations for schools and other educational institutions in terms of admissions and fees	True
	The Ministry of Education has a specific HIV/AIDS policy	True
•	The Ministry of Education has a workplace policy relating to HIV/AIDS	False
•	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	False
	HIV/AIDS Mainstreaming	
	Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans?	n/a n/a
	Human Resources adaptation to the impacts of HIV/AIDS	II/a
	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	n/a
٠	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	n/a
•	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? At the district level?	No No
	For staff at education institutions? Have guidelines for implementing universal precautions been developed for use by all staff?	No No
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	No
•	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels: Primary?	Yes
	Secondary? Does the life skills programme consider issues relating to gender?	Yes Yes
١.	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
	Has there been an orientation process for parents regarding life skills programmes in schools?	Yes
	Are HIV/AIDS materials available to all students within the tertiary sector?	Yes
	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes
8 .	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? Responses aimes at the Infected and Affected	Yes
٠	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	Yes
	Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels:	No
•	At the Primary level At the Secondary level	Yes Yes
	Partnership development in response to HIV/AIDS	
•	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Does the education sector have a shared strategy for the fight against AIDS?	Yes n/a
10.	Research guiding the response to HIV/AIDS	
	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?	No
•	Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

Selected Key Results for:	Barbados		
UN Region: Caribbean	Prevalence: Medium	Date Completed:	30 Apr 04
1. Education System			
 Is there a single education Ministry in your countr Education)? 		on and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrink Ministry of Education HIV/AIDS structur 	res		Shrinking
 At the national level, do you have a dedicated con the response to the HIV/AIDS epidemic? 	mmittee or management unit that is resp	oonsible for co-ordinating	Yes
 Are there staff at the national Ministry level who <u>c</u> Do you have regional structures responsible for ir 		S epidemic?	No
 3. Enabling Environment for an effective re You have regulations for schools and other educations 		s and fees	
 The Ministry of Education has a specific HIV/AIDS The Ministry of Education has a workplace policy 			True True
 Other rules and regulations within the Ministry ha HIV/AIDS 	ve been reviewed in light of the impacts	and implications of	True
4. HIV/AIDS Mainstreaming			
 Is there an education sector HIV/AIDS strategic p Is HIV/AIDS considered when making district lever 	el plans?		Yes Yes
 Human Resources adaptation to the important of the important		to HIV/AIDS (e.g.	False
An analysis of the impact of HIV/AIDS on demand conducted	d and supply of human resources in the	education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDS	in schools have been developed		True
6. Workplace HIV/AIDS programmes	·		
 Does the Ministry/Department have an HIV/AIDS At the national level? At the district level? 	awareness programme for all its employ	yees:	Yes Yes
For staff at education institutions?			
Have guidelines for implementing universal preca Does the Ministry have a policy of non-discrimina male ymaet and benefits for personnel effected by	tion with regard to recruitment, advance		Yes Yes
 employment and benefits for personnel affected b Do you enforce confidentiality of information about 		IDS?	Yes
 7. HIV/AIDS and the Curriculum Is there a life skills programme established in you 	ur adjugation system at the following lave	do.	
Primary? Secondary?	ir education system at the rollowing leve	:IS.	Yes Yes
Does the life skills programme consider issu	ues relating to gender?		Yes
 Have orientation programmes been undertaken for 	or teachers in school life skills and HIV/A		Yes
 Has there been an orientation process for parents Are HIV/AIDS materials available to all students were approximately approximately and approximately approxim		iools?	Yes Yes
Are HIV/AIDS materials available to all students with the Are HIV/AIDS and life skills integral components teachers?		eparation of all new	Yes
 Have efforts been made to include out of school y Responses aimes at the Infected and Af 		ness efforts?	Yes
Does the Ministry have a programme to address system?	the needs of orphaned and vulnerable c	hildren in the education	Yes
 Is there currently a school feeding scheme in place Are counseling services, by trained counsellors, a 		lowing levels:	Yes
At the Primary levelAt the Secondary level		3	Yes Yes
 9. Partnership development in response to Has an effort been made to identify possible parti 		n the education sector?	Yes
 Does the education sector have a shared strategy 10. Research guiding the response to HIV/A 	y for the fight against AIDS?		Yes
Has a research agenda been defined that prioritis HIV/AIDS within the education sector?		pacts of and response to	Yes
Has any research been commissioned to inform to	the education sector response to HIV/AII	DS?	Yes

S	elected Key Results for: Belarus	
U	N Region: Eastern Europe & Central Asia Prevalence: Low Date Completed:	9 Sep 04
	Education System	
•	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
• 2.	Is total enrolment in your schools growing, shrinking or remaining stable? Ministry of Education HIV/AIDS structures	Shrinking
	At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
	Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	No
3.	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? Enabling Environment for an effective response to HIV/AIDS	n/a
	You have regulations for schools and other educational institutions in terms of admissions and fees	True
	The Ministry of Education has a specific HIV/AIDS policy The Ministry of Education has a workplace policy relating to HIV/AIDS	True In Process
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of	
	HIV/AIDS	False
	HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	n/a
	Is HIV/AIDS considered when making district level plans?	n/a
	Human Resources adaptation to the impacts of HIV/AIDS	
•	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	n/a
•	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	n/a
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	True
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level?	Yes
	At the district level?	Yes
	For staff at education institutions?	Yes
	Have guidelines for implementing universal precautions been developed for use by all staff?	No
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum Is there a life skills programme established in your education system at the following levels:	
•	Primary?	Yes
	Secondary?	Yes
	Does the life skills programme consider issues relating to gender?	Yes
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
	Has there been an orientation process for parents regarding life skills programmes in schools? And HIV/AIDS materials available to all students within the tertiany sector?	Yes Yes
	Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new	
	teachers?	Yes
•	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8.	Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education	In Process
	system?	
	Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels:	Yes
	At the Primary level	Yes
	At the Secondary level	Yes
	Partnership development in response to HIV/AIDS	
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS? Research guiding the response to HIV/AIDS	n/a
	Research guiding the response to HIV/AIDS Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?	Yes
	Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes
-	rias any research been commissioned to inform the education sector response to miviAiDS:	163

Please note that this is an <u>extract</u> of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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Selected Key Results for:	Benin		
UN Region: Sub-Saharan Africa	Prevalence: Medium	Date Completed:	
 1. Education System Is there a single education Ministry in your countr Education)? Is total enrolment in your schools growing, shrink 		on and Ministry of Higher	Three Growing
Ministry of Education HIV/AIDS structur At the national level, do you have a dedicated co	res	oonsible for co-ordinating	
the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who or	only deal with HIV/AIDS issues?	Ü	Yes No
Do you have regional structures responsible for in3. Enabling Environment for an effective r	esponse to HIV/AIDS	•	Yes
You have regulations for schools and other education has a specific HIV/AID The Ministry of Education has a specific HIV/AID The Ministry of Education has a specific HIV/AID.	S policy	s and fees	True In Process
 The Ministry of Education has a workplace policy Other rules and regulations within the Ministry ha HIV/AIDS 		and implications of	In Process False
 HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic p Is HIV/AIDS considered when making district level 			Yes No
 Human Resources adaptation to the important of the important of teachers away from their families) 		to HIV/AIDS (e.g.	In Process
An analysis of the impact of HIV/AIDS on demanded conducted	d and supply of human resources in the	education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDS6. Workplace HIV/AIDS programmes	6 in schools have been developed		True
Does the Ministry/Department have an HIV/AIDS At the national level? At the district level? For staff at education institutions?			Yes Yes Yes
 Have guidelines for implementing universal preca Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected l 	ition with regard to recruitment, advance by HIV/AIDS	ment, continued	In Process No response
Do you enforce confidentiality of information about HIV/AIDS and the Curriculum			
 Is there a life skills programme established in you Primary? Secondary? 	ur education system at the following leve	IS:	Yes Yes
Does the life skills programme consider iss Have orientation programmes been undertaken for		AIDS?	Yes In Process
 Has there been an orientation process for parent Are HIV/AIDS materials available to all students to 	s regarding life skills programmes in sch		No No
 Are HIV/AIDS and life skills integral components teachers? 		eparation of all new	No
 Have efforts been made to include out of school y Responses aimes at the Infected and A 		ness efforts?	Yes
• Does the Ministry have a programme to address system?		hildren in the education	In Process
 Is there currently a school feeding scheme in place Are counseling services, by trained counsellors, a At the Primary level At the Secondary level 		lowing levels:	Yes Yes Yes
 9. Partnership development in response to Has an effort been made to identify possible part Does the education sector have a shared strateg 	ners for the fight against HIV/AIDS withir y for the fight against AIDS?	n the education sector?	Yes
 10. Research guiding the response to HIV/A Has a research agenda been defined that prioritis 		pacts of and response to	Yes
HIV/AIDS within the education sector?Has any research been commissioned to inform to	the education sector response to HIV/AII	DS?	Yes

Selected Key Results for:	Bolivia		
UN Region: Latin America	Prevalence: Low	Date Completed:	19 May 04
1. Education System			
 Is there a single education Ministry in your cour Education)? 		ion and Ministry of Higher	Single
 Is total enrolment in your schools growing, shring 			Stable
 Ministry of Education HIV/AIDS structu At the national level, do you have a dedicated of the response to the HIV/AIDS epidemic? 		sponsible for co-ordinating	No
 Are there staff at the national Ministry level who 	only deal with HIV/AIDS issues?		No
 Do you have regional structures responsible for 		OS epidemic?	n/a
3. Enabling Environment for an effective			
You have regulations for schools and other edu The Missister of Education because if a LIV (ALIV). The Missister of Education because if a LIV (ALIV).		ns and fees	True
 The Ministry of Education has a specific HIV/All The Ministry of Education has a workplace polic 			In Process False
Other rules and regulations within the Ministry h		s and implications of	
HIV/AIDS	are been remember in light of the impact	o ana impilibations of	True
4. HIV/AIDS Mainstreaming			
Is there an education sector HIV/AIDS strategic			n/a
Is HIV/AIDS considered when making district le	•		n/a
 Human Resources adaptation to the in Human resource policies have been amended t deployment of teachers away from their families 	o minimise vulnerability and susceptibility	y to HIV/AIDS (e.g.	n/a
An analysis of the impact of HIV/AIDS on dema conducted		e education sector has been	n/a
 Guidelines for teachers on dealing with HIV/AID 	OS in schools have been developed		True
6. Workplace HIV/AIDS programmes			
 Does the Ministry/Department have an HIV/AID 	S awareness programme for all its emplo	oyees:	
At the national level?			No
At the district level? For staff at education institutions?			No Yes
Have guidelines for implementing universal pred	cautions been developed for use by all st	taff?	In Process
 Does the Ministry have a policy of non-discrimir employment and benefits for personnel affected 	nation with regard to recruitment, advance		Yes
 Do you enforce confidentiality of information about 	out Ministry employees affected by HIV/A	AIDS?	Yes
7. HIV/AIDS and the Curriculum			
Is there a life skills programme established in your primary?	our education system at the following levi	els:	Voc
Primary? Secondary?			Yes Yes
Does the life skills programme consider is	sues relating to gender?		Yes
Have orientation programmes been undertaken		/AIDS?	In Process
Has there been an orientation process for parer		hools?	In Process
Are HIV/AIDS materials available to all students Are HIV/AIDS and life skills integral components.		congration of all nave	Yes
 Are HIV/AIDS and life skills integral components teachers? 	·	•	Yes
Have efforts been made to include out of school	-	eness efforts?	Yes
8. Responses aimes at the Infected and A		obildron in the calus - !!	
 Does the Ministry have a programme to address system? 		children in the education	No
 Is there currently a school feeding scheme in pl Are counseling services, by trained counsellors, 		allowing levels:	Yes
 At the Primary level At the Secondary level 	, available at Hiost of all schools at the 10	mowing ievels.	No No
9. Partnership development in response	to HIV/AIDS		140
Has an effort been made to identify possible particular to the particular to th		in the education sector?	Yes
Does the education sector have a shared strate			n/a
10. Research guiding the response to HIV	/AIDS		
Has a research agenda been defined that priori	tises gaps in knowledge relating to the in	npacts of and response to	No
HIV/AIDS within the education sector?	a the advantion costs recovers to LIV//A	IDC3	
 Has any research been commissioned to inform 	n the education sector response to HIV/A	לאווא?	No

S	elected Key Results for: Botswana	
U	N Region: Sub-Saharan Africa Prevalence: High Date Completed:	11 Aug 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
	Is total enrolment in your schools growing, shrinking or remaining stable?	
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	No
•	Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues?	Yes
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS	T
•	You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy	True True
	The Ministry of Education has a workplace policy relating to HIV/AIDS	False
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	ruise
4.	HIV/AIDS Mainstreaming	
	Is there an education sector HIV/AIDS strategic plan?	Yes
	Is HIV/AIDS considered when making district level plans?	Yes
	Human Resources adaptation to the impacts of HIV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	False
•	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	False
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	False
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees:	Voc
	At the national level? At the district level?	Yes Yes
	For staff at education institutions?	Yes
•	Have guidelines for implementing universal precautions been developed for use by all staff?	
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum Is there a life skills programme established in your education system at the following levels:	
·	Primary?	Yes
	Secondary?	Yes
	Does the life skills programme consider issues relating to gender?	Yes
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
	Has there been an orientation process for parents regarding life skills programmes in schools?	Yes
	Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes Yes
•	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8.	Responses aimes at the Infected and Affected	
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	Yes
	Is there currently a school feeding scheme in place?	Yes
•	Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level	Yes
•	At the Secondary level	Yes
	Partnership development in response to HIV/AIDS	
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	Yes
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to	No
	HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

Selected Key Results	for: Brazil		
UN Region: Latin America	Prevalence: Low	Date Completed: 9	Jul 04
1. Education System			
Education)?	our country, or two (e.g. Ministry of Basic Educat	ion and Ministry of Higher	Single
 Is total enrolment in your schools growing 			Stable
 Ministry of Education HIV/AIDS At the national level, do you have a decthe response to the HIV/AIDS epidemic 	dicated committee or management unit that is res	sponsible for co-ordinating	No
Are there staff at the national Ministry let			No
 Do you have regional structures respor 	nsible for implementing a response to the HIV/AID	OS epidemic?	n/a
3. Enabling Environment for an ef		16	_
T	other educational institutions in terms of admission	ns and fees	True In Process
 The Ministry of Education has a specific The Ministry of Education has a workpline 			False
	Ministry have been reviewed in light of the impact	s and implications of	
HIV/AIDS	,	·	False
4. HIV/AIDS Mainstreaming	starts who where?		
 Is there an education sector HIV/AIDS Is HIV/AIDS considered when making of 			n/a n/a
5. Human Resources adaptation to	•		II/a
	nended to minimise vulnerability and susceptibilit	y to HIV/AIDS (e.g.	n/a
 An analysis of the impact of HIV/AIDS of conducted 	on demand and supply of human resources in the	e education sector has been	n/a
	HIV/AIDS in schools have been developed		In Process
6. Workplace HIV/AIDS programm			
	HIV/AIDS awareness programme for all its employers	oyees:	No
At the national level? At the district level?			No No
For staff at education institutions?	?		No
 Have guidelines for implementing university 	ersal precautions been developed for use by all s		No
employment and benefits for personnel			No
	ation about Ministry employees affected by HIV/	AIDS?	No
7. HIV/AIDS and the Curriculum	hed in your education system at the following lev	role:	
Primary?	ned in your education system at the following lev	CIS.	No
Secondary?			No
Does the life skills programme co			No
	dertaken for teachers in school life skills and HIV		In Process
 Has there been an orientation process Are HIV/AIDS materials available to all 	for parents regarding life skills programmes in sc	:noois?	In Process No
	nponents in the curriculum for the professional p	reparation of all new	
teachers?	· · · · · ·	•	No
	of school youths in life skills and HIV/AIDS aware	eness efforts?	No
8. Responses aimes at the Infecte	d and Affected address the needs of orphaned and vulnerable	children in the education	
system?		children in the education	No
 Is there currently a school feeding sche Are counseling services, by trained counseling services. 	eme in piace? insellors, available at most or all schools at the fo	ollowing levels.	Yes
At the Primary levelAt the Secondary level	missions, available at most or all schools at the It	moving torols.	No No
9. Partnership development in res	ponse to HIV/AIDS		NO
	ssible partners for the fight against HIV/AIDS with	nin the education sector?	No
Does the education sector have a share			n/a
10. Research guiding the response			
	hat prioritises gaps in knowledge relating to the ir	mpacts of and response to	No
 HIV/AIDS within the education sector? Has any research been commissioned 	to inform the education sector response to HIV/A	AIDS?	Yes

Selected Key Results for	r: Burkina Faso		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed:	
1. Education SystemIs there a single education Ministry in your co Education)?		ation and Ministry of Higher	Two
 Is total enrolment in your schools growing, sh Ministry of Education HIV/AIDS structure 	<u> </u>		Growing
 At the national level, do you have a dedicated the response to the HIV/AIDS epidemic? 	d committee or management unit that is re	esponsible for co-ordinating	Yes
 Are there staff at the national Ministry level w Do you have regional structures responsible f 		IDS epidemic?	Yes Yes
3. Enabling Environment for an effective			_
 You have regulations for schools and other entering The Ministry of Education has a specific HIV/A 		ons and fees	True True
The Ministry of Education has a specific Fire Ministry of Education has a workplace po			True
Other rules and regulations within the Ministry HIV/AIDS		cts and implications of	True
4. HIV/AIDS Mainstreaming	ole when 2		V
 Is there an education sector HIV/AIDS strateg Is HIV/AIDS considered when making district 			Yes Yes
5. Human Resources adaptation to the			
Human resource policies have been amended deployment of teachers away from their familians and the properties of the impact of LINVAIDS on does.	ies)		True
An analysis of the impact of HIV/AIDS on der conducted		ne education sector has been	False
Guidelines for teachers on dealing with HIV/A Washing as HIV/AIDS are green, and are g	AIDS in schools have been developed		In Process
 Workplace HIV/AIDS programmes Does the Ministry/Department have an HIV/A 	IDS awareness programme for all its emr	nlovees.	
At the national level?	awareness programme for all its emp	noyees.	Yes
At the district level?			Yes
For staff at education institutions?			Yes
 Have guidelines for implementing universal p Does the Ministry have a policy of non-discrinemployment and benefits for personnel affect 	nination with regard to recruitment, advan		Yes Yes
 Do you enforce confidentiality of information a HIV/AIDS and the Curriculum 		/AIDS?	No
Is there a life skills programme established in	vour education system at the following le	vels:	
Primary?	, ,		Yes
Secondary?			Yes
Does the life skills programme consider		MAIDCO	Yes
Have orientation programmes been undertakeHas there been an orientation process for particular than the proce			Yes Yes
Are HIV/AIDS materials available to all stude.		onous;	Yes
 Are HIV/AIDS and life skills integral compone teachers? 		preparation of all new	Yes
Have efforts been made to include out of sche		reness efforts?	Yes
Responses aimes at the Infected and Does the Ministry have a programme to address.		e children in the education	Yes
system?Is there currently a school feeding scheme in	place?		No
 Are counseling services, by trained counsello 		following levels:	NO
At the Primary level At the Secondary level	,	J	Yes Yes
9. Partnership development in respons	e to HIV/AIDS		103
 Has an effort been made to identify possible Does the education sector have a shared stra 	partners for the fight against HIV/AIDS wi	thin the education sector?	Yes Yes
10. Research guiding the response to H			
 Has a research agenda been defined that prid HIV/AIDS within the education sector? 		impacts of and response to	Yes
 Has any research been commissioned to info 	rm the education sector response to HIV/	AIDS?	Yes

Selected Key Results for:	Burundi		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed:	4 Jun 04
 1. Education System Is there a single education Ministry in your count Education)? Is total enrolment in your schools growing, shrink 		ation and Ministry of Higher	Single Growing
2. Ministry of Education HIV/AIDS structu	res		Growing
 At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic? 	_	esponsible for co-ordinating	Yes
 Are there staff at the national Ministry level who Do you have regional structures responsible for in 		AIDS epidemic?	Yes Yes
3. Enabling Environment for an effective r		lana and face	Tours
 You have regulations for schools and other educ The Ministry of Education has a specific HIV/AID 		ions and fees	True True
The Ministry of Education has a specific Fit ViAID The Ministry of Education has a workplace policy			False
 Other rules and regulations within the Ministry has HIV/AIDS 		cts and implications of	False
4. HIV/AIDS Mainstreaming	-12		V
 Is there an education sector HIV/AIDS strategic Is HIV/AIDS considered when making district lev 	el plans?		Yes Yes
5. Human Resources adaptation to the im		Hitu to LIIV/AIDC (o. a	
Human resource policies have been amended to deployment of teachers away from their families) An applying of the impact of LIV/ALDS and dependent			False
An analysis of the impact of HIV/AIDS on deman conducted		ne education sector has been	False
Guidelines for teachers on dealing with HIV/AIDS Workplace HIV/AIDS programmes	S in schools have been developed		False
 Workplace HIV/AIDS programmes Does the Ministry/Department have an HIV/AIDS 	S awareness programme for all its em	nlovees.	
At the national level? At the district level? For staff at education institutions?			In Process In Process In Process
 Have guidelines for implementing universal precase. Does the Ministry have a policy of non-discriminal employment and benefits for personnel affected. 	ation with regard to recruitment, advar		No Yes
 Do you enforce confidentiality of information abo HIV/AIDS and the Curriculum 		//AIDS?	Yes
Is there a life skills programme established in your	ur education system at the following le	evels:	
Primary?			Yes
Secondary? Does the life skills programme consider iss	succeplating to gondor?		Yes Yes
Have orientation programmes been undertaken f		IV/AIDS?	In Process
 Has there been an orientation process for parent 	ts regarding life skills programmes in :		In Process
 Are HIV/AIDS materials available to all students 	within the tertiary sector?		No
 Are HIV/AIDS and life skills integral components teachers? 	·		No
Have efforts been made to include out of school	•	areness efforts?	No
 Responses aimes at the Infected and A Does the Ministry have a programme to address system? 		e children in the education	In Process
 Is there currently a school feeding scheme in pla 	ce?		No
 Are counseling services, by trained counsellors, At the Primary level At the Secondary level 		following levels:	No No
9. Partnership development in response t	o HIV/AIDS		
 Has an effort been made to identify possible part Does the education sector have a shared strateg 	tners for the fight against HIV/AIDS w	ithin the education sector?	Yes Yes
10. Research guiding the response to HIV/	.,		
 Has a research agenda been defined that prioriti HIV/AIDS within the education sector? 		impacts of and response to	No
 Has any research been commissioned to inform 	the education sector response to HIV	/AIDS?	No

S	elected Key Results for: Cambodia	
ι	N Region: South & South East Asia Prevalence: Medium Date Completed:	2 May 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
	Is total enrolment in your schools growing, shrinking or remaining stable?	Growing
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
	Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	Yes
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS You have regulations for schools and other educational institutions in terms of admissions and fees	True
•	TI AND CELL III III III III III III III III III	In Process
	The Ministry of Education has a workplace policy relating to HIV/AIDS	False
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	False
4.	HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	Yes
	Is HIV/AIDS considered when making district level plans?	No
	Human Resources adaptation to the impacts of HIV/AIDS	
	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	False
•	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	n/a
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
	Workplace HIV/AIDS programmes	
٠	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level?	Yes
	At the district level?	No
	For staff at education institutions?	No
	Have guidelines for implementing universal precautions been developed for use by all staff?	No
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	No
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	No
	HIV/AIDS and the Curriculum Is there a life skills programme established in your education system at the following levels:	
	Primary?	Yes
	Secondary?	Yes
	Does the life skills programme consider issues relating to gender?	No
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
	Has there been an orientation process for parents regarding life skills programmes in schools? Are HIV/AIDS materials available to all students within the tertiary sector?	No No
	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes
•	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8.	Responses aimes at the Infected and Affected	
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	No
	Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels:	Yes
•	At the Primary level At the Secondary level	No No
9.	Partnership development in response to HIV/AIDS	
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
•	Does the education sector have a shared strategy for the fight against AIDS?	Yes
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?	Yes
	Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

S	elected Key Results for: Central African Republic	
ι	N Region: Sub-Saharan Africa Prevalence: High Date Completed:	28 Oct 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
	Is total enrolment in your schools growing, shrinking or remaining stable?	Growing
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
•	Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues?	Yes
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS	Truc
•	You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy	True In Process
	The Ministry of Education has a workplace policy relating to HIV/AIDS	In Process
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	True
4.	HIV/AIDS Mainstreaming	No
	Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans?	No No
	Human Resources adaptation to the impacts of HIV/AIDS	140
•	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	False
•	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	True
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level?	Yes
	At the district level?	Yes
	For staff at education institutions?	Yes
	Have guidelines for implementing universal precautions been developed for use by all staff? Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and hopefits for personnel effected by JUV/ALPS.	No Yes
	employment and benefits for personnel affected by HIV/AIDS Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels: Primary?	No
	Secondary?	No
	Does the life skills programme consider issues relating to gender?	No
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	No
	Has there been an orientation process for parents regarding life skills programmes in schools? Are HIV/AIDS materials available to all students within the tertiary sector?	No No
	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	No response
	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8.	Responses aimes at the Infected and Affected	
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	No
	Is there currently a school feeding scheme in place?	Yes
•	Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level At the Secondary level	No No
9.	Partnership development in response to HIV/AIDS	NU
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	Yes
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to	No
	HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

S	elected Key Results for: Chad	
U	N Region: Sub-Saharan Africa Prevalence: Medium Date Completed:	6 May 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Two
	Is total enrolment in your schools growing, shrinking or remaining stable?	Growing
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating	Yes
	the response to the HIV/AIDS epidemic? Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	No
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS	
	You have regulations for schools and other educational institutions in terms of admissions and fees	True
•	The Ministry of Education has a specific HIV/AIDS policy The Ministry of Education has a workplace policy relating to HIV/AIDS	In Process False
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of	
	HIV/AIDS	False
4.	HIV/AIDS Mainstreaming	
	Is there an education sector HIV/AIDS strategic plan?	Yes
	Is HIV/AIDS considered when making district level plans?	Yes
	Human Resources adaptation to the impacts of HIV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g.	
	deployment of teachers away from their families) An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been	False
•	conducted	n/a
•	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees:	
	At the national level?	Yes
	At the district level? For staff at education institutions?	Yes Yes
•	Have guidelines for implementing universal precautions been developed for use by all staff?	Yes
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	No
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels: Primary?	Yes
	Secondary?	Yes
	Does the life skills programme consider issues relating to gender?	Yes
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
	Has there been an orientation process for parents regarding life skills programmes in schools?	No
	Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new	No
•	teachers?	No
•	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8.	Responses aimes at the Infected and Affected	
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	In Process
	Is there currently a school feeding scheme in place?	Yes
•	Are counseling services, by trained counsellors, available at most or all schools at the following levels:	No
•	At the Primary level At the Secondary level	No No
	Partnership development in response to HIV/AIDS	110
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	Yes
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to	No
-	HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

UN Region: East Asia & Pacific Prevalence: Low Date Completed: 9	9 Apr 04
. Education System	
• Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
 Is total enrolment in your schools growing, shrinking or remaining stable? Ministry of Education HIV/AIDS structures 	Shrinking
 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic? 	Yes
 Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? 	No
Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? - The structures responsible for implementing a response to the HIV/AIDS epidemic?	n/a
 Enabling Environment for an effective response to HIV/AIDS You have regulations for schools and other educational institutions in terms of admissions and fees 	True
 The Ministry of Education has a specific HIV/AIDS policy 	True
The Ministry of Education has a workplace policy relating to HIV/AIDS	False
 Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS 	True
. HIV/AIDS Mainstreaming	
Is there an education sector HIV/AIDS strategic plan?	n/a
Is HIV/AIDS considered when making district level plans?	n/a
. Human Resources adaptation to the impacts of HIV/AIDS	
Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families) A policy of the investment of th	n/a
 An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted 	n/a
Guidelines for teachers on dealing with HIV/AIDS in schools have been developed Waster Land HIV/AIDS and All MAIDS and All	True
 Workplace HIV/AIDS programmes Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: 	
At the district level?	No response
For staff at education institutions?	No response
 Have guidelines for implementing universal precautions been developed for use by all staff? Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued 	No
 employment and benefits for personnel affected by HIV/AIDS Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? 	Yes
. HIV/AIDS and the Curriculum	162
Is there a life skills programme established in your education system at the following levels:	
Primary? Secondary?	No response Yes
Does the life skills programme consider issues relating to gender?	Yes
 Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS? 	Yes
Has there been an orientation process for parents regarding life skills programmes in schools? As I III (AIDS materials and light to be light to	No
 Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new 	Yes
• Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all flew teachers?	No response
 Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? 	Yes
 Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education 	
system?	Yes
Is there currently a school feeding scheme in place?	Yes
Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Driver of the Police o	V
At the Primary levelAt the Secondary level	Yes Yes
Partnership development in response to HIV/AIDS	103
 Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Does the education sector have a shared strategy for the fight against AIDS? 	Yes n/a
Does the education sector have a shared	II/d
 Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector? 	Yes
Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

Please note that this is an <u>extract</u> of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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Selected Key Results for:	Colombia		
UN Region: Latin America	Prevalence: Low	Date Completed:	22 Jul 04
Education System Is there a single education Ministry in your country Education)? Is total excellent in your schools growing shriple.		cation and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrink Ministry of Education HIV/AIDS structure 	<u> </u>		Growing
 At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic? 	_	esponsible for co-ordinating	Yes
 Are there staff at the national Ministry level who one Do you have regional structures responsible for in 		AIDS epidemic?	No n/a
3. Enabling Environment for an effective r		ions and foos	Truo
 You have regulations for schools and other educ The Ministry of Education has a specific HIV/AID 		ions and rees	True In Process
 The Ministry of Education has a workplace policy 	relating to HIV/AIDS		False
 Other rules and regulations within the Ministry had HIV/AIDS 	ave been reviewed in light of the impa	icts and implications of	False
HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic p	nlan?		n/a
 Is HIV/AIDS considered when making district level 	el plans?		n/a
5. Human Resources adaptation to the imHuman resource policies have been amended to		ility to HIV/AIDS (o.a.	
deployment of teachers away from their families)			n/a
An analysis of the impact of HIV/AIDS on deman conducted		the education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDS Workplace HIV/AIDS programmes	S in schools have been developed		In Process
 Workplace HIV/AIDS programmes Does the Ministry/Department have an HIV/AIDS 	S awareness programme for all its em	plovees:	
At the national level?		p,	No
At the district level? For staff at education institutions?			No In Process
Have guidelines for implementing universal precautions:	autions been developed for use by all	I staff?	No
 Does the Ministry have a policy of non-discriminal employment and benefits for personnel affected 	ation with regard to recruitment, advance by HIV/AIDS	ncement, continued	No
Do you enforce confidentiality of information about	ut Ministry employees affected by HIV	V/AIDS?	Yes
7. HIV/AIDS and the CurriculumIs there a life skills programme established in you	ur education system at the following le	evels:	
Primary?	, ,		Yes
Secondary?	Orabana da mandaro		Yes
Does the life skills programme consider iss Have orientation programmes been undertaken f		IV/AIDS?	Yes In Process
Has there been an orientation process for parent			In Process
Are HIV/AIDS materials available to all students			No
 Are HIV/AIDS and life skills integral components teachers? 	·		No
Have efforts been made to include out of school		areness efforts?	Yes
 Responses aimes at the Infected and A Does the Ministry have a programme to address 		le children in the education	No
system?Is there currently a school feeding scheme in pla	ce?		Yes
Are counseling services, by trained counsellors,At the Primary level		following levels:	No
At the Secondary level Bartnership development in response to	o HIV/AIDS		No
Partnership development in response to Has an effort been made to identify possible part Does the education sector have a shared strategy.	ners for the fight against HIV/AIDS w	ithin the education sector?	Yes
 Does the education sector have a shared strateg 10. Research guiding the response to HIV/I 			n/a
Has a research agenda been defined that prioriting HIV/AIDS within the education sector?		impacts of and response to	Yes
Has any research been commissioned to inform	the education sector response to HIV	//AIDS?	No

Selected Key Results for: Congo **UN Region: Sub-Saharan Africa** Prevalence: High Date Completed: 7 May 04 1. Education System • Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)? • Is total enrolment in your schools growing, shrinking or remaining stable? Growing 2. Ministry of Education HIV/AIDS structures • At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating Yes the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who only deal with HIV/AIDS issues? Yes Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? Yes 3. Enabling Environment for an effective response to HIV/AIDS · You have regulations for schools and other educational institutions in terms of admissions and fees True • The Ministry of Education has a specific HIV/AIDS policy True The Ministry of Education has a workplace policy relating to HIV/AIDS **False** Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of **False** HIV/AIDS 4. HIV/AIDS Mainstreaming • Is there an education sector HIV/AIDS strategic plan? Yes • Is HIV/AIDS considered when making district level plans? Yes 5. Human Resources adaptation to the impacts of HIV/AIDS • Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. False deployment of teachers away from their families) • An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been **False** conducted • Guidelines for teachers on dealing with HIV/AIDS in schools have been developed **False** 6. Workplace HIV/AIDS programmes • Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? No At the district level? No For staff at education institutions? No • Have guidelines for implementing universal precautions been developed for use by all staff? No • Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued No employment and benefits for personnel affected by HIV/AIDS • Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? No 7. HIV/AIDS and the Curriculum • Is there a life skills programme established in your education system at the following levels: Primary? Yes Secondary? Yes Does the life skills programme consider issues relating to gender? Yes Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS? No Has there been an orientation process for parents regarding life skills programmes in schools? No • Are HIV/AIDS materials available to all students within the tertiary sector? No · Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new No teachers? • Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? No 8. Responses aimes at the Infected and Affected • Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education Yes • Is there currently a school feeding scheme in place? No • Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level No At the Secondary level No 9. Partnership development in response to HIV/AIDS • Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Yes • Does the education sector have a shared strategy for the fight against AIDS? Yes 10. Research guiding the response to HIV/AIDS

Please note that this is an extract of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

No

· Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to

Has any research been commissioned to inform the education sector response to HIV/AIDS?

HIV/AIDS within the education sector?

Selected Key Results for:	Costa Rica		
UN Region: Latin America	Prevalence: Low	Date Completed:	15 Oct 04
Education System Is there a single education Ministry in your count Education)?		cation and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrink Ministry of Education HIV/AIDS structu 	0		Growing
 At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic? 	ommittee or management unit that is r	responsible for co-ordinating	No
 Are there staff at the national Ministry level who Do you have regional structures responsible for 	implementing a response to the HIV/A	AIDS epidemic?	No n/a
 Enabling Environment for an effective in You have regulations for schools and other educe 		ions and foos	False
 The Ministry of Education has a specific HIV/AID 		ions and rees	False
The Ministry of Education has a workplace policy			False
Other rules and regulations within the Ministry has HIV/AIDS		acts and implications of	False
4. HIV/AIDS Mainstreaming	nlan?		n/a
 Is there an education sector HIV/AIDS strategic Is HIV/AIDS considered when making district lev 	rel plans?		n/a
5. Human Resources adaptation to the imHuman resource policies have been amended to		ility to HIV/AIDS (e.a.	
deployment of teachers away from their families) • An analysis of the impact of HIV/AIDS on deman			n/a
 conducted Guidelines for teachers on dealing with HIV/AIDS 		the education sector has been	n/a In Process
6. Workplace HIV/AIDS programmes	o in schools have been developed		1111100033
Does the Ministry/Department have an HIV/AIDS	S awareness programme for all its em	ployees:	
At the national level?	· -		In Process
At the district level?			In Process
For staff at education institutions?	autions been developed for use by al	Leteff?	In Process
 Have guidelines for implementing universal prec. Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected 	ation with regard to recruitment, adva		In Process Yes
 Do you enforce confidentiality of information abo HIV/AIDS and the Curriculum 		V/AIDS?	Yes
Is there a life skills programme established in your state of the skills programme. In the skills programme established in your state of the skills programme established in your state of the skills programme. In the skills programme established in your state of the skills programme established in your state of the skills programme. In the skills programme established in your state of the your state of the skills programme established in your state of the y	ur education system at the following I	evels:	
Primary?	-		Yes
Secondary?	1.11		Yes
Does the life skills programme consider iss Have orientation programmes been undertaken		IV//AIDC2	Yes In Process
Has there been an orientation process for parent			1111100633
Are HIV/AIDS materials available to all students			Yes
 Are HIV/AIDS and life skills integral components teachers? 	in the curriculum for the professional		No
Have efforts been made to include out of school		areness efforts?	Yes
 Responses aimes at the Infected and A Does the Ministry have a programme to address 		le children in the education	No
system?Is there currently a school feeding scheme in pla	ice?		Yes
 Are counseling services, by trained counsellors, 		following levels:	
At the Primary levelAt the Secondary level			Yes No response
9. Partnership development in response t			
 Has an effort been made to identify possible part Does the education sector have a shared strateg 	gy for the fight against AIDS?	ithin the education sector?	Yes n/a
10. Research guiding the response to HIV/			
 Has a research agenda been defined that prioriti HIV/AIDS within the education sector? 		·	No
 Has any research been commissioned to inform 	the education sector response to HIV	//AIDS?	No

S	elected Key Results for: Cote d'Ivoire	
U	N Region: Sub-Saharan Africa Prevalence: High Date Completed:	26 Apr 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Two
	Is total enrolment in your schools growing, shrinking or remaining stable?	Growing
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
•	Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	Yes
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS	Truc
•	You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy	True True
	The Ministry of Education has a workplace policy relating to HIV/AIDS	True
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	False
4.	HIV/AIDS Mainstreaming	
•	Is there an education sector HIV/AIDS strategic plan?	Yes
	Is HIV/AIDS considered when making district level plans?	No
	Human Resources adaptation to the impacts of HIV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	False
•	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	True
•	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees:	V
	At the national level? At the district level?	Yes Yes
	For staff at education institutions?	Yes
•	Have guidelines for implementing universal precautions been developed for use by all staff?	In Process
•	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels: Primary?	Yes
	Secondary?	Yes
	Does the life skills programme consider issues relating to gender?	No
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	In Process
	Has there been an orientation process for parents regarding life skills programmes in schools?	No
	Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new	No
٠	teachers?	No
•	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	No
8.	Responses aimes at the Infected and Affected	
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	In Process
	Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels:	Yes
•	Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level At the Secondary level	No No
	Partnership development in response to HIV/AIDS	INU
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	Yes
10.	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to	Yes
	HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

S	elected Key Results for: Cyprus	
ι	N Region: North Africa & Middle East Prevalence: Low Date Completed:	20 Jul 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
	Is total enrolment in your schools growing, shrinking or remaining stable?	Stable
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
	Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	Yes
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	n/a
	Enabling Environment for an effective response to HIV/AIDS	
•	You have regulations for schools and other educational institutions in terms of admissions and fees	False
٠	and the second of the second o	In Process
	The Ministry of Education has a workplace policy relating to HIV/AIDS	In Process
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	True
4.	HIV/AIDS Mainstreaming	m/a
	Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans?	n/a n/a
	Human Resources adaptation to the impacts of HIV/AIDS	TI/a
	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	n/a
•	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	n/a
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	True
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees:	
	At the national level?	In Process
	At the district level? For staff at education institutions?	Yes Yes
	Have guidelines for implementing universal precautions been developed for use by all staff?	In Process
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels:	Vee
	Primary? Secondary?	Yes Yes
	Does the life skills programme consider issues relating to gender?	Yes
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
•	Has there been an orientation process for parents regarding life skills programmes in schools?	No
	Are HIV/AIDS materials available to all students within the tertiary sector?	No
•	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes
•	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8.	Responses aimes at the Infected and Affected	
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	Yes
	Is there currently a school feeding scheme in place?	Yes
•	Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level	No
	At the Secondary level	Yes
9.	Partnership development in response to HIV/AIDS	103
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	n/a
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to	No
	HIV/AIDS within the education sector?	
•	Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

Selected Key Results for: Egypt			
u	N Region: North Africa & Middle East Prevalence: Low Date Completed:		
1.	Education System		
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Two	
	Is total enrolment in your schools growing, shrinking or remaining stable?	Growing	
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes	
	Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	Yes	
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	n/a	
	Enabling Environment for an effective response to HIV/AIDS		
	You have regulations for schools and other educational institutions in terms of admissions and fees	True	
•	· · · · · · · · · · · · · · · · · · ·	True True	
	The Ministry of Education has a workplace policy relating to HIV/AIDS Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of	True	
	HIV/AIDS	True	
	HIV/AIDS Mainstreaming	,	
	Is there an education sector HIV/AIDS strategic plan?	n/a	
	Is HIV/AIDS considered when making district level plans?	n/a	
	Human Resources adaptation to the impacts of HIV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	n/a	
•	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	n/a	
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	False	
	Workplace HIV/AIDS programmes		
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees:	.,	
	At the national level?	Yes	
	At the district level? For staff at education institutions?	No No	
	Have guidelines for implementing universal precautions been developed for use by all staff?	No	
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	No	
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	No	
	HIV/AIDS and the Curriculum Is there a life skills programme established in your education system at the following levels:		
•	Primary?	Yes	
	Secondary?	No	
	Does the life skills programme consider issues relating to gender?	No	
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	No	
	Has there been an orientation process for parents regarding life skills programmes in schools?	No	
	Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new	No	
Ľ	teachers?	No	
_	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	No	
8.	Responses aimes at the Infected and Affected		
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	Yes	
	Is there currently a school feeding scheme in place?	Yes	
•	Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level	Yes	
	At the Secondary level	ves No	
	Partnership development in response to HIV/AIDS		
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes	
	Does the education sector have a shared strategy for the fight against AIDS?	n/a	
	Research guiding the response to HIV/AIDS		
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to	Yes	
	HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes	

Selected Key Results for:	Equatorial Guine	a	
UN Region: Sub-Saharan Africa	Prevalence: Medium	Date Completed:	6 May 04
Education System Is there a single education Ministry in your count Education)?		on and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrinl Ministry of Education HIV/AIDS structu 	o o		Growing
 At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic? 	ommittee or management unit that is resp	oonsible for co-ordinating	Yes
 Are there staff at the national Ministry level who Do you have regional structures responsible for 	implementing a response to the HIV/AID	S epidemic?	No No
Enabling Environment for an effective of the value of Educations for schools and other educations for schools and other educations for schools and other educations. The Ministry of Education has a gracific LINVALE.	cational institutions in terms of admission	s and fees	True
 The Ministry of Education has a specific HIV/AIE The Ministry of Education has a workplace police Other rules and regulations within the Ministry has 	y relating to HIV/AIDS	and implications of	In Process False
HIV/AIDS Mainstreaming	ave been reviewed in light of the impacts	s and implications of	False
Is there an education sector HIV/AIDS strategic Is HIV/AIDS considered when making district lev			Yes No
5. Human Resources adaptation to the im	pacts of HIV/AIDS		
Human resource policies have been amended to deployment of teachers away from their families;)	, 0	False
An analysis of the impact of HIV/AIDS on demar conducted Childelines for teachers on decling with LIV/AIDS. Output The conduction of the conduction		education sector has been	n/a
 Guidelines for teachers on dealing with HIV/AID. Workplace HIV/AIDS programmes 	S in schools have been developed		False
Does the Ministry/Department have an HIV/AIDS	S awareness programme for all its emplo	yees:	
At the national level?	ı J	,	No
At the district level?			No
For staff at education institutions? • Have guidelines for implementing universal prec	autions been developed for use by all sta	aff?	No
 Does the Ministry have a policy of non-discrimin- employment and benefits for personnel affected 	ation with regard to recruitment, advance by HIV/AIDS	ement, continued	No
 Do you enforce confidentiality of information about 7. HIV/AIDS and the Curriculum 			Yes
Is there a life skills programme established in yo Drimon (2)	ur education system at the following leve	els:	No
Primary? Secondary?			No No
Does the life skills programme consider iss	sues relating to gender?		No
 Have orientation programmes been undertaken 	for teachers in school life skills and HIV/A		No
Has there been an orientation process for paren		nools?	No
 Are HIV/AIDS materials available to all students Are HIV/AIDS and life skills integral components teachers? 		eparation of all new	No No
 Have efforts been made to include out of school 	youths in life skills and HIV/AIDS awarer	ness efforts?	No
8. Responses aimes at the Infected and A	Affected		
 Does the Ministry have a programme to address system? 		children in the education	No
 Is there currently a school feeding scheme in pla Are counseling services, by trained counsellors, 		llowing levels:	No
Are counselling services, by trained counsellors,At the Primary levelAt the Secondary level	avaniable at 11105t of all SCHOOLS at tile 101	ilowiliy ievels.	No No
9. Partnership development in response t			
 Has an effort been made to identify possible par Does the education sector have a shared strate 	tners for the fight against HIV/AIDS withing for the fight against AIDS?	n the education sector?	Yes Yes
10. Research guiding the response to HIV/		uposto of and recovers	
Has a research agenda been defined that priorit HIV/AIDS within the education sector? Has any research been commissioned to inform			No
 Has any research been commissioned to inform 	the education sector response to HIV/AI	NO!	No

Selected Key Results for: Estonia			
UN Region: Eastern Europe & Central Asia Prevalence: Lov	Date Completed: 5 May 04		
1. Education System			
 Is there a single education Ministry in your country, or two (e.g. Ministry of Education)? 	Single		
 Is total enrolment in your schools growing, shrinking or remaining stable? 	Stable		
 Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management the response to the HIV/AIDS epidemic? 	unit that is responsible for co-ordinating No		
 Are there staff at the national Ministry level who only deal with HIV/AIDS is 	ssues? No		
 Do you have regional structures responsible for implementing a response 			
3. Enabling Environment for an effective response to HIV/AIDS			
You have regulations for schools and other educational institutions in term The Ministry of Education have a good for UNIVADE and the second of UNIVADE and UNIV			
 The Ministry of Education has a specific HIV/AIDS policy The Ministry of Education has a workplace policy relating to HIV/AIDS 	False False		
Other rules and regulations within the Ministry have been reviewed in light	of the impacts and implications of		
HIV/AIDS	True		
4. HIV/AIDS Mainstreaming			
 Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans? 	n/a n/a		
Human Resources adaptation to the impacts of HIV/AIDS	IVA		
Human resources adaptation to the impacts of myzibs Human resource policies have been amended to minimise vulnerability an deployment of teachers away from their families)	d susceptibility to HIV/AIDS (e.g.		
 An analysis of the impact of HIV/AIDS on demand and supply of human re conducted 	sources in the education sector has been n/a		
 Guidelines for teachers on dealing with HIV/AIDS in schools have been de 	eveloped In Process		
6. Workplace HIV/AIDS programmes			
 Does the Ministry/Department have an HIV/AIDS awareness programme f At the national level? 	or all its employees:		
At the district level?	No No		
For staff at education institutions?	No		
Have guidelines for implementing universal precautions been developed for			
 Does the Ministry have a policy of non-discrimination with regard to recruit employment and benefits for personnel affected by HIV/AIDS 	ment, advancement, continued Yes		
Do you enforce confidentiality of information about Ministry employees affer HIV/AIDS and the County of	ected by HIV/AIDS? Yes		
 HIV/AIDS and the Curriculum Is there a life skills programme established in your education system at the 	a following levels:		
Primary?	Yes		
Secondary?	Yes		
Does the life skills programme consider issues relating to gender?	Yes		
Have orientation programmes been undertaken for teachers in school life : Have the school life : The school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientation programmes been undertaken for teachers in school life : Have orientatio			
 Has there been an orientation process for parents regarding life skills prog Are HIV/AIDS materials available to all students within the tertiary sector? 	rammes in schools? In Process Yes		
Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the p	professional preparation of all new		
teachers?	tes		
Have efforts been made to include out of school youths in life skills and HI Response of the life standard and Affected.	V/AIDS awareness efforts? Yes		
 Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned ar 	nd vulnerable children in the education		
system?	tes		
Is there currently a school feeding scheme in place? Are courseling continue, but tained coursellers, qualible at most or all columns. Are courseling continues by trained coursellers, qualible at most or all columns.	Yes		
 Are counseling services, by trained counsellors, available at most or all sc At the Primary level 	hools at the following levels: Yes		
At the Secondary level	Yes		
9. Partnership development in response to HIV/AIDS			
 Has an effort been made to identify possible partners for the fight against I 			
 Does the education sector have a shared strategy for the fight against AID 	S? n/a		
10. Research guiding the response to HIV/AIDS			
 Has a research agenda been defined that prioritises gaps in knowledge re 	lating to the impacts of and response to Yes		
HIV/AIDS within the education sector?Has any research been commissioned to inform the education sector resp	onse to HIV/AIDS?		

S	elected Key Results for: Ethiopia	
ι	N Region: Sub-Saharan Africa Prevalence: High Date Completed:	14 Jun 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
	Is total enrolment in your schools growing, shrinking or remaining stable?	
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
	Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	No
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS	Truc
•	You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy	True False
	The Ministry of Education has a workplace policy relating to HIV/AIDS	In Process
•	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	False
4.	HIV/AIDS Mainstreaming	Vaa
	Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans?	Yes Yes
	Human Resources adaptation to the impacts of HIV/AIDS	103
•	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	False
	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	True
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	True
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level?	Yes
	At the district level?	Yes
	For staff at education institutions?	Yes
	Have guidelines for implementing universal precautions been developed for use by all staff? Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes No
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	No
	HIV/AIDS and the Curriculum Is there a life skills programme established in your education system at the following levels:	
	Primary?	Yes
	Secondary?	Yes
	Does the life skills programme consider issues relating to gender?	Yes
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
	Has there been an orientation process for parents regarding life skills programmes in schools? Are HIV/AIDS materials available to all students within the tertiary sector?	No Yes
	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes
•	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	No
8.	Responses aimes at the Infected and Affected	
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	Yes
	Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels:	Yes
•	At the Primary level At the Secondary level	No Yes
	Partnership development in response to HIV/AIDS	
•	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	Yes
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?	Yes
	Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

Selected Key Results for:	Gabon	
UN Region: Sub-Saharan Africa	Prevalence: Medium Date Complete	ed: 24 Jun 04
1. Education System		
	try, or two (e.g. Ministry of Basic Education and Ministry of Higher	Two
 Is total enrolment in your schools growing, shrink 	king or remaining stable?	Growing
	res ommittee or management unit that is responsible for co-ordinating	Yes
the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who		No
,	implementing a response to the HIV/AIDS epidemic?	No
 You have regulations for schools and other educed 		True
The Ministry of Education has a specific HIV/AID The Ministry of Education has a workplace policy The Ministry of Education has a workplace policy The Ministry of Education has a workplace policy The Ministry of Education has a specific HIV/AID The Ministry of		In Process
 The Ministry of Education has a workplace policy Other rules and regulations within the Ministry had HIV/AIDS 	ave been reviewed in light of the impacts and implications of	In Process
4. HIV/AIDS Mainstreaming		
Is there an education sector HIV/AIDS strategic		Yes
Is HIV/AIDS considered when making district lev	•	No
 Human Resources adaptation to the im Human resource policies have been amended to deployment of teachers away from their families' 	minimise vulnerability and susceptibility to HIV/AIDS (e.g.	False
	nd and supply of human resources in the education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDS	S in schools have been developed	In Process
6. Workplace HIV/AIDS programmes		
 Does the Ministry/Department have an HIV/AIDS 	S awareness programme for all its employees:	
At the national level?		In Process
At the district level? For staff at education institutions?		In Process In Process
Have guidelines for implementing universal prec	autions been developed for use by all staff?	No
	ation with regard to recruitment, advancement, continued	Yes
 Do you enforce confidentiality of information about 	out Ministry employees affected by HIV/AIDS?	Yes
7. HIV/AIDS and the Curriculum		
Is there a life skills programme established in yo Primary? Constant 2	ur education system at the following levels:	Yes
Secondary?	successions to gooder?	Yes Yes
Does the life skills programme consider iss Have orientation programmes been undertaken		In Process
Has there been an orientation process for parent		In Process
 Are HIV/AIDS materials available to all students 	within the tertiary sector?	No
teachers?	in the curriculum for the professional preparation of all new	No
	youths in life skills and HIV/AIDS awareness efforts?	Yes
8. Responses aimes at the Infected and A		
system?	the needs of orphaned and vulnerable children in the education	In Process
Is there currently a school feeding scheme in pla Are counseling services, by trained counsellors.	available at most or all schools at the following levels:	No
 Are counseling services, by trained counsellors, At the Primary level 	available at Hiost of all schools at the following levels.	No
At the Secondary level		No
9. Partnership development in response t	to HIV/AIDS	
 Has an effort been made to identify possible par 	tners for the fight against HIV/AIDS within the education sector?	Yes
 Does the education sector have a shared strateg 		Yes
10. Research guiding the response to HIV/		
	ises gaps in knowledge relating to the impacts of and response to	No
HIV/AIDS within the education sector?Has any research been commissioned to inform	the education sector response to HIV/AIDS?	No

Selected Key Results for: Ghana			
UN Region: Sub-Saharan Africa	Prevalence: Medium Date	e Completed: 11 May 04	
Education)?	y, or two (e.g. Ministry of Basic Education and Minist	Single	
 Is total enrolment in your schools growing, shrink Ministry of Education HIV/AIDS structur 	es	Growing	
the response to the HIV/AIDS epidemic?	nmittee or management unit that is responsible for c	res	
 Are there staff at the national Ministry level who <u>c</u> Do you have regional structures responsible for in 	nplementing a response to the HIV/AIDS epidemic?	Yes Yes	
 Senabling Environment for an effective repulations for schools and other educations. 	ational institutions in terms of admissions and fees	True	
 The Ministry of Education has a specific HIV/AID: The Ministry of Education has a workplace policy Other rules and regulations within the Ministry ha HIV/AIDS 		In Process True ions of	
 4. HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic p 	lan?	Yes	
 Is HIV/AIDS considered when making district level 	el plans?	Yes	
 Human Resources adaptation to the important of the important	pacts of HIV/AIDS adaptation to the impact minimise vulnerability and susceptibility to HIV/AIDS		
	d and supply of human resources in the education se		
conductedGuidelines for teachers on dealing with HIV/AIDS	in schools have been developed	No response	
6. Workplace HIV/AIDS programmes	avanaga maganaga far all the ample con		
Does the Ministry/Department have an HIV/AIDS At the national level? At the district level?	awareness programme for all its employees:	Yes Yes	
For staff at education institutions?		In Process	
 Have guidelines for implementing universal preca Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected benefits 	tion with regard to recruitment, advancement, continu	No ued No	
Do you enforce confidentiality of information about HIV/AIDS and the Curriculum		Yes	
 Is there a life skills programme established in you 	r education system at the following levels:	Vec	
Primary? Secondary?		Yes Yes	
Does the life skills programme consider issu		Yes	
 Have orientation programmes been undertaken fe Has there been an orientation process for parents 		No In Process	
Are HIV/AIDS materials available to all students via		Yes	
 Are HIV/AIDS and life skills integral components teachers? 	n the curriculum for the professional preparation of a	res	
	rouths in life skills and HIV/AIDS awareness efforts?	Yes	
 Responses aimes at the Infected and Af Does the Ministry have a programme to address system? 	he needs of orphaned and vulnerable children in the	e education In Process	
 Is there currently a school feeding scheme in place 		Yes	
At the Primary levelAt the Secondary level	rvailable at most or all schools at the following levels	: No No	
9. Partnership development in response to	• HIV/AIDS ners for the fight against HIV/AIDS within the educati	on sector? Yes	
 Has all effort been made to identify possible parties. Does the education sector have a shared strategy 		Ves	
	AIDS ses gaps in knowledge relating to the impacts of and	response to Yes	
HIV/AIDS within the education sector? Has any research been commissioned to inform t	he education sector response to HIV/AIDS?	Yes	

Selected Key Results for: Guinea	
UN Region: Sub-Saharan Africa Prevalence: Medium Date Completed	9 Oct 04
1. Education System	
 Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)? 	Three
 Is total enrolment in your schools growing, shrinking or remaining stable? Ministry of Education HIV/AIDS structures 	Growing
 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic? 	Yes
 Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? 	No
Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	No
3. Enabling Environment for an effective response to HIV/AIDS You have regulations for schools and other educational institutions in terms of admissions and focus	True
 You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy 	In Process
The Ministry of Education has a specific HV/AIDS policy The Ministry of Education has a workplace policy relating to HIV/AIDS	False
Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of	
HIV/AIDS	False
4. HIV/AIDS Mainstreaming	
Is there an education sector HIV/AIDS strategic plan? In LIV/AIDS considered when realising district level plane?	No
Is HIV/AIDS considered when making district level plans? Human Resources adoptation to the impacts of HIV/AIDS adoptation to the impacts of HIV/AIDS. The property of HIV/AIDS adoptation to the impacts of HIV/AIDS. The property of HIV/AIDS adoptation to the impacts of HIV/AIDS. The property of HIV/AIDS adoptation to the impacts of HIV/AIDS. The property of HIV/AIDS adoptation to the impacts of HIV/AIDS. The property of HIV/AIDS adoptation to the impacts of HIV/AIDS. The property of HIV/AIDS adoptation to the impacts of HIV/AIDS. The property of HIV/AIDS adoptation to the impact of HIV/AIDS adoptation to the impact of HIV/AIDS. The property of HIV/AIDS adoptation to the impact of HIV/AIDS adoptation to the impact of HIV/AIDS. The property of HIV/AIDS adoptation to the impact of HIV/AIDS adoptation to the H	No
 Human Resources adaptation to the impacts of HIV/AIDS adaptation to the impacts of HIV/AID Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. 	
deployment of teachers away from their families)	False
 An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted 	n/a
Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	True
6. Workplace HIV/AIDS programmes	
Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees:	.,
At the national level?	Yes
At the district level? For staff at education institutions?	Yes Yes
Have guidelines for implementing universal precautions been developed for use by all staff?	Yes
 Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS 	Yes
 Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? 	Yes
7. HIV/AIDS and the Curriculum	
 Is there a life skills programme established in your education system at the following levels: 	
Primary?	Yes
Secondary?	Yes
Does the life skills programme consider issues relating to gender? • Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes Yes
Has there been an orientation process for parents regarding life skills programmes in schools?	Yes
Are HIV/AIDS materials available to all students within the tertiary sector?	No
 Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers? 	Yes
 Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? 	Yes
 Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education 	
system?	No
Is there currently a school feeding scheme in place?	No
 Are counseling services, by trained counsellors, available at most or all schools at the following levels: 	
At the Primary level At the Secondary level	No No
At the Secondary level Bartnership development in response to HIV/AIDS	No
 9. Partnership development in response to HIV/AIDS Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? 	Yes
 Does the education sector have a shared strategy for the fight against AIDS? 	Yes
10. Research guiding the response to HIV/AIDS	
Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?	No
Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

Se	elected Key Results for: Guyana	1		
UI	N Region: Latin America Prevalenc	e: Medium	Date Completed: 1	4 Jul 04
1.	Education System			
	Is there a single education Ministry in your country, or two (e.g. Min Education)?		Ministry of Higher	Single
	Is total enrolment in your schools growing, shrinking or remaining st	table?		Growing
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or manage the response to the HIV/AIDS epidemic?	ement unit that is responsible	e for co-ordinating	In Process
	Are there staff at the national Ministry level who <u>only</u> deal with HIV/. Do you have regional structures responsible for implementing a res		amic?	No No
	Enabling Environment for an effective response to HIV	•	JIIIIQ:	IVO
	You have regulations for schools and other educational institutions		ees	True
	The Ministry of Education has a specific HIV/AIDS policy			In Process
	The Ministry of Education has a workplace policy relating to HIV/AII Other rules and regulations within the Ministry have been reviewed		onlications of	In Process
•	HIV/AIDS	in light of the impacts and in	iplications of	False
	HIV/AIDS Mainstreaming			NI.
	Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans?			No No
	Human Resources adaptation to the impacts of HIV/AI	DS adaptation to the im	nacts of HIV/AIDS	IVO
	Human resource policies have been amended to minimise vulnerab			In Process
•	deployment of teachers away from their families) An analysis of the impact of HIV/AIDS on demand and supply of hu	man resources in the educat	ion sector has been	n/a
•	conducted Guidelines for teachers on dealing with HIV/AIDS in schools have b	een developed		In Process
	Workplace HIV/AIDS programmes	oon woverepou		
	Does the Ministry/Department have an HIV/AIDS awareness progra	nmme for all its employees:		
	At the national level?			In Process
	At the district level? For staff at education institutions?			In Process In Process
•	Have guidelines for implementing universal precautions been devel	oped for use by all staff?		In Process
	Does the Ministry have a policy of non-discrimination with regard to employment and benefits for personnel affected by HIV/AIDS		continued	No
	Do you enforce confidentiality of information about Ministry employe	ees affected by HIV/AIDS?		No
	HIV/AIDS and the Curriculum Is there a life skills programme established in your education system	m at the following levels:		
	Primary?	if at the following levels.		Yes
	Secondary?			Yes
	Does the life skills programme consider issues relating to gen			Yes
	Have orientation programmes been undertaken for teachers in scho Has there been an orientation process for parents regarding life skil			In Process In Process
	Are HIV/AIDS materials available to all students within the tertiary s			No
•	Are HIV/AIDS and life skills integral components in the curriculum for teachers?		on of all new	No
	Have efforts been made to include out of school youths in life skills $% \left\{ \left(1\right) \right\} =\left\{ \left(1\right) \right\}$	and HIV/AIDS awareness ef	forts?	Yes
	Responses aimes at the Infected and Affected	and and will are his ability	in the education	
	Does the Ministry have a programme to address the needs of orpha system?	aned and vuinerable children	in the education	No
	Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most o	r all schools at the following	levels.	Yes
•	At the Primary level At the Secondary level	r air scrioois at the following	iovois.	No No
9.	Partnership development in response to HIV/AIDS			
•	Has an effort been made to identify possible partners for the fight a		ducation sector?	Yes
	Does the education sector have a shared strategy for the fight again	nst AIDS?		No
	Research guiding the response to HIV/AIDS Has a research agenda been defined that prioritises gaps in knowle	adae relating to the impacts o	of and response to	
•	HIV/AIDS within the education sector?	age relating to the impacts t	ana response to	No
•	Has any research been commissioned to inform the education sector	or response to HIV/AIDS?		No

Selected Key Results for: Islamic Republic of Iran **UN Region: South & South East Asia Prevalence: Low** Date Completed: 24 Aug 04 1. Education System • Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher **Single** Education)? • Is total enrolment in your schools growing, shrinking or remaining stable? **Shrinking** 2. Ministry of Education HIV/AIDS structures · At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating Yes the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who only deal with HIV/AIDS issues? No Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? n/a 3. Enabling Environment for an effective response to HIV/AIDS · You have regulations for schools and other educational institutions in terms of admissions and fees **False** • The Ministry of Education has a specific HIV/AIDS policy True The Ministry of Education has a workplace policy relating to HIV/AIDS True Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of True **HIV/AIDS** 4. HIV/AIDS Mainstreaming • Is there an education sector HIV/AIDS strategic plan? n/a • Is HIV/AIDS considered when making district level plans? n/a 5. Human Resources adaptation to the impacts of HIV/AIDS adaptation to the impacts of HIV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. n/a deployment of teachers away from their families) An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been n/a conducted • Guidelines for teachers on dealing with HIV/AIDS in schools have been developed In Process 6. Workplace HIV/AIDS programmes • Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? In Process At the district level? In Process For staff at education institutions? In Process • Have guidelines for implementing universal precautions been developed for use by all staff? Yes • Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued Yes employment and benefits for personnel affected by HIV/AIDS • Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? Yes 7. HIV/AIDS and the Curriculum • Is there a life skills programme established in your education system at the following levels: Primary? No Secondary? No Does the life skills programme consider issues relating to gender? Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS? In Process Has there been an orientation process for parents regarding life skills programmes in schools? • Are HIV/AIDS materials available to all students within the tertiary sector? No · Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new Yes teachers? • Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? No 8. Responses aimes at the Infected and Affected • Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education No • Is there currently a school feeding scheme in place? Yes • Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level No At the Secondary level Yes 9. Partnership development in response to HIV/AIDS Yes • Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? • Does the education sector have a shared strategy for the fight against AIDS? n/a 10. Research guiding the response to HIV/AIDS · Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to Yes HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?

S	elected Key Results for: Israel	
ι	N Region: North Africa & Middle East Prevalence: Low Date Completed: 2	21 May 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
•	Is total enrolment in your schools growing, shrinking or remaining stable?	Growing
2.	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
	Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues?	No
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? Enabling Environment for an effective response to HIV/AIDS	n/a
	You have regulations for schools and other educational institutions in terms of admissions and fees	True
•	The Ministry of Education has a specific HIV/AIDS policy	True
	The Ministry of Education has a workplace policy relating to HIV/AIDS	In Process
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	True
	HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	n/a
	Is HIV/AIDS considered when making district level plans?	n/a
	Human Resources adaptation to the impacts of HIV/AIDS adaptation to the impacts of HIV/AIDS	3 4 4
•	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	n/a
•	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	n/a
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	True
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? At the district level?	In Process No
	For staff at education institutions?	In Process
	Have guidelines for implementing universal precautions been developed for use by all staff? Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued	Yes No
	employment and benefits for personnel affected by HIV/AIDS Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels:	Voc
	Primary? Secondary?	Yes Yes
	Does the life skills programme consider issues relating to gender?	Yes
•	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
	Has there been an orientation process for parents regarding life skills programmes in schools?	Yes
	Are HIV/AIDS materials available to all students within the tertiary sector?	Yes
	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	No
_	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8.	Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education custom?	In Process
	system? Is there currently a school feeding scheme in place?	No
	Are counseling services, by trained counsellors, available at most or all schools at the following levels:	
•	At the Primary level At the Secondary level	Yes Yes
9.	Partnership development in response to HIV/AIDS	
•	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	n/a
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?	Yes
	Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

Selected Key Results for	: Italy		
UN Region: Western Europe	Prevalence: Low	Date Completed:	30 Nov 04
1. Education System			
 Is there a single education Ministry in your cou Education)? 		tion and Ministry of Higher	Single
 Is total enrolment in your schools growing, shri 			Growing
 Ministry of Education HIV/AIDS struct At the national level, do you have a dedicated the response to the HIV/AIDS epidemic? 		sponsible for co-ordinating	No
Are there staff at the national Ministry level who			No
Do you have regional structures responsible for		DS epidemic?	n/a
 You have regulations for schools and other ed 	ucational institutions in terms of admissio	ns and fees	True
 The Ministry of Education has a specific HIV/A The Ministry of Education has a workplace poli 			In Process In Process
 Other rules and regulations within the Ministry 		ts and implications of	
HIV/AIDS	nave seem remember in figure or are impact	to and improductions of	True
4. HIV/AIDS Mainstreaming	o nlan?		m/a
 Is there an education sector HIV/AIDS strategie Is HIV/AIDS considered when making district let 			n/a n/a
5. Human Resources adaptation to the in	•	the impacts of HIV/AIDS	
 Human resource policies have been amended 	to minimise vulnerability and susceptibility		n/a
 deployment of teachers away from their familie An analysis of the impact of HIV/AIDS on demandant 		e education sector has been	n/a
conductedGuidelines for teachers on dealing with HIV/AII	DS in schools have been developed		In Process
6. Workplace HIV/AIDS programmes			
 Does the Ministry/Department have an HIV/AID 	OS awareness programme for all its empl	loyees:	
At the national level? At the district level?			In Process In Process
For staff at education institutions?			In Process
 Have guidelines for implementing universal pre 			In Process
 Does the Ministry have a policy of non-discrimi employment and benefits for personnel affecte 	d by HIV/AIDS		Yes
Do you enforce confidentiality of information at	oout Ministry employees affected by HIV/	AIDS?	Yes
7. HIV/AIDS and the CurriculumIs there a life skills programme established in y	your education system at the following lev	ıels.	
Primary?	your education system at the following let	7013.	Yes
Secondary?			Yes
Does the life skills programme consider i		MAIDCO	Yes
Have orientation programmes been undertakerHas there been an orientation process for pare			Yes Yes
 Are HIV/AIDS materials available to all student 		SHOOIS:	Yes
 Are HIV/AIDS and life skills integral componen teachers? 		reparation of all new	No
Have efforts been made to include out of school	-	eness efforts?	Yes
8. Responses aimes at the Infected and			
 Does the Ministry have a programme to address system? 	·	children in the education	In Process
 Is there currently a school feeding scheme in p Are counseling services, by trained counsellors 		ollowing levels:	Yes
 Are counseling services, by trained counsellors At the Primary level 	s, available at Hiost of all Schools at the R	onowing levels.	Yes
At the Secondary level			Yes
9. Partnership development in response			
Has an effort been made to identify possible particles the education sector base a shared strate.		hin the education sector?	Yes
 Does the education sector have a shared strate 10. Research guiding the response to HIV 	0, 0		n/a
 Has a research agenda been defined that prior 		mpacts of and response to	
HIV/AIDS within the education sector?		·	No
 Has any research been commissioned to inform 	m the education sector response to HIV/A	AIDS?	No

Selected Key Results for:	Jamaica		
UN Region: Caribbean	Prevalence: Low	Date Completed:	
Education System Is there a single education Ministry in your country	ry, or two (e.g. Ministry of Basic Edu	cation and Ministry of Higher	Single
Education)?	ing or romaining stable?		
 Is total enrolment in your schools growing, shrink Ministry of Education HIV/AIDS structure 	o o		Stable
At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic?		responsible for co-ordinating	No
 Are there staff at the national Ministry level who g 			Yes
 Do you have regional structures responsible for in Enabling Environment for an effective r 		AIDS epidemic?	n/a
You have regulations for schools and other educations for schools.		sions and fees	True
The Ministry of Education has a specific HIV/AID			True
 The Ministry of Education has a workplace policy Other rules and regulations within the Ministry ha 		acts and implications of	In Process
HIV/AIDS	ive been reviewed in light of the imp	acts and implications of	False
4. HIV/AIDS Mainstreaming			
 Is there an education sector HIV/AIDS strategic p Is HIV/AIDS considered when making district leve 			n/a n/a
Is HIV/AID'S considered when making district level Human Resources adaptation to the im	•	to the impacts of HIV/AIDS	11/4
Human resource policies have been amended to deployment of teachers away from their families)			n/a
An analysis of the impact of HIV/AIDS on demanded conducted.	d and supply of human resources in	the education sector has been	n/a
 Guidelines for teachers on dealing with HIV/AIDS 	in schools have been developed		True
6. Workplace HIV/AIDS programmes	awaranasa pragramma far all ita an	nnlava aa.	
Does the Ministry/Department have an HIV/AIDS At the national level? At the district level?	awareness programme for all its er	npioyees:	In Process Yes
For staff at education institutions?			Yes
Have guidelines for implementing universal preca Does the Ministry have a policy of non-discriminal	ition with regard to recruitment, adva		Yes Yes
 employment and benefits for personnel affected I Do you enforce confidentiality of information about 		IV/AIDS?	Yes
7. HIV/AIDS and the Curriculum	at Ministry employees affected by Th	IVIAIDO:	163
 Is there a life skills programme established in you 	ur education system at the following	levels:	
Primary?			Yes
Secondary? Does the life skills programme consider iss	ues relating to gender?		Yes Yes
Have orientation programmes been undertaken for the state of the		HIV/AIDS?	Yes
 Has there been an orientation process for parent 		schools?	In Process
 Are HIV/AIDS materials available to all students v Are HIV/AIDS and life skills integral components 		I proparation of all now	Yes
teachers?	in the curriculum for the professions	ii preparation or all new	Yes
Have efforts been made to include out of school		vareness efforts?	Yes
 Responses aimes at the Infected and At Does the Ministry have a programme to address 		ole children in the education	No
system?Is there currently a school feeding scheme in place	ro?		Yes
 Are counseling services, by trained counsellors, a 		e following levels:	103
At the Primary levelAt the Secondary level		J	No Yes
9. Partnership development in response to			
 Has an effort been made to identify possible part Does the education sector have a shared strateg 		within the education sector?	Yes n/a
10. Research guiding the response to HIV/A			11/a
Has a research agenda been defined that prioritis HIV/AIDS within the education sector?		e impacts of and response to	No
 Has any research been commissioned to inform to 	the education sector response to HI	V/AIDS?	No

Selected K	Cey Results for:	Kenya		
UN Region: Sub	-Saharan Africa	Prevalence: High	Date Completed:	11 Aug 04
1. Education Sys	stem			
Education)?	, ,	try, or two (e.g. Ministry of Basic Educa	tion and Ministry of Higher	Single
	t in your schools growing, shrinl			Growing
 At the national level 	lucation HIV/AIDS structu vel, do you have a dedicated co he HIV/AIDS epidemic?	res ommittee or management unit that is re-	sponsible for co-ordinating	Yes
		only deal with HIV/AIDS issues?		Yes
, ,	•	implementing a response to the HIV/AII	DS epidemic?	Yes
	ronment for an effective			_
		cational institutions in terms of admissio	ons and fees	True
	ducation has a specific HIV/AID ducation has a workplace policy			True True
		ave been reviewed in light of the impac	ts and implications of	
HIV/AIDS	egalations within the willistry no	ave been reviewed in light of the impac	is and implications of	True
4. HIV/AIDS Mair	nstreaming			
 Is there an educa 	ation sector HIV/AIDS strategic			Yes
	sidered when making district lev	•		Yes
		pacts of HIV/AIDS adaptation to		
deployment of tea	achers away from their families)			In Process
 An analysis of the conducted 	e impact of HIV/AIDS on demar	nd and supply of human resources in th	e education sector has been	False
 Guidelines for tea 	achers on dealing with HIV/AIDS	S in schools have been developed		In Process
	V/AIDS programmes			
		S awareness programme for all its empl	loyees:	
At the natio				Yes
At the distri	education institutions?			Yes Yes
		autions been developed for use by all s	staff?	No
 Does the Ministry 		ation with regard to recruitment, advance		Yes
 Do you enforce c 	onfidentiality of information abo	out Ministry employees affected by HIV/	AIDS?	Yes
7. HIV/AIDS and				
	is programme established in yo	ur education system at the following lev	/els:	.,
Primary?	2			Yes
Secondary Secondary	<i>r</i> e skills programme consider iss	cups relating to gondor?		Yes Yes
		for teachers in school life skills and HIV	V/AIDS?	In Process
		ts regarding life skills programmes in so		No
	aterials available to all students			Yes
teachers?		in the curriculum for the professional p		Yes
		youths in life skills and HIV/AIDS awar	eness efforts?	No
	mes at the Infected and A			
system?		the needs of orphaned and vulnerable	children in the education	Yes
	a school feeding scheme in pla		ollowing lovels	Yes
Are counseling seAt the Primary lev		available at most or all schools at the fo	ullowing levels:	No
 At the Primary lev At the Secondary 				Yes
	evelopment in response t	to HIV/AIDS		
		tners for the fight against HIV/AIDS with	hin the education sector?	Yes
	on sector have a shared strateg			Yes
	ding the response to HIV/			
		ises gaps in knowledge relating to the i	mpacts of and response to	No
	the education sector?	the advanting	NDCO	
 Has any research 	1 been commissioned to inform	the education sector response to HIV/A	AIDS?	No

Selected Key Results for: Kuwait	
UN Region: North Africa & Middle East Prevalence: Low Date Completed:	27 Jul 04
 1. Education System Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)? 	Single
 Is total enrolment in your schools growing, shrinking or remaining stable? Ministry of Education HIV/AIDS structures 	Stable
 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic? 	No
 Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? 	No n/a
 3. Enabling Environment for an effective response to HIV/AIDS You have regulations for schools and other educational institutions in terms of admissions and fees 	
 The Ministry of Education has a specific HIV/AIDS policy The Ministry of Education has a workplace policy relating to HIV/AIDS 	In Process False
Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	True
HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	n/a
Is HIV/AIDS considered when making district level plans?	n/a
 Human Resources adaptation to the impacts of HIV/AIDS adaptation to the impacts of HIV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families) 	n/a
 An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted 	n/a
Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
 Workplace HIV/AIDS programmes Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: 	
At the national level? At the district level?	No No
For staff at education institutions?	Yes
 Have guidelines for implementing universal precautions been developed for use by all staff? Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS 	Yes Yes
 Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? HIV/AIDS and the Curriculum 	Yes
 Is there a life skills programme established in your education system at the following levels: Primary? 	Yes
Secondary?	Yes
Does the life skills programme consider issues relating to gender? • Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes No
 Have orientation programmes been undertaken for teachers in school file skills programmes in schools? Has there been an orientation process for parents regarding life skills programmes in schools? 	No
Are HIV/AIDS materials available to all students within the tertiary sector?	No
 Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers? 	No response
 Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? Responses aimes at the Infected and Affected 	No
 Responses almes at the infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system? 	No
 Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels: 	Yes
 Are counselling services, by trained counsellors, available at most of all schools at the following levels: At the Primary level At the Secondary level 	Yes Yes
9. Partnership development in response to HIV/AIDS	
 Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Does the education sector have a shared strategy for the fight against AIDS? 	Yes n/a
 10. Research guiding the response to HIV/AIDS Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to 	Ne
HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?	No Yes
• rias any research been commissioned to inform the education sector response to my/AiDS?	162

S	elected Key Results for: Latvia	
U	N Region: Eastern Europe & Central Asia Prevalence: Low Date Completed: 2	26 Mar 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
	Is total enrolment in your schools growing, shrinking or remaining stable?	Shrinking
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	In Process
	Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	No
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? Enabling Environment for an effective response to HIV/AIDS	n/a
•	You have regulations for schools and other educational institutions in terms of admissions and fees	True
	The Ministry of Education has a specific HIV/AIDS policy	False
	The Ministry of Education has a workplace policy relating to HIV/AIDS Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of	False
•	HIV/AIDS	False
	HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	nla
	Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans?	n/a n/a
	Human Resources adaptation to the impacts of HIV/AIDS adaptation to the impacts of HIV/AIDS	Tira
	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g.	n/a
•	deployment of teachers away from their families) An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been	n/a
•	conducted Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
	Workplace HIV/AIDS programmes	
	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees:	
	At the national level?	No
	At the district level?	No
	For staff at education institutions? Have guidelines for implementing universal precautions been developed for use by all staff?	Yes No
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels: Primary?	Yes
	Secondary?	Yes
	Does the life skills programme consider issues relating to gender?	Yes
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	In Process
	Has there been an orientation process for parents regarding life skills programmes in schools? Are LIV/ADS materials available to all students within the testing sector?	In Process
	Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new	Yes
	teachers?	Yes
• 8.	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? Responses aimes at the Infected and Affected	Yes
	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	In Process
	Is there currently a school feeding scheme in place?	Yes
	Are counseling services, by trained counsellors, available at most or all schools at the following levels:	
	At the Primary level At the Secondary level	Yes Yes
	Partnership development in response to HIV/AIDS	
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	n/a
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?	No
•	Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

Please note that this is an <u>extract</u> of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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Selected Key Results for:	Lesotho		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed:	21 Oct 04
Education System Is there a single education Ministry in your count Education)?		ation and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrink Ministry of Education HIV/AIDS structu 	o o		Growing
 At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic? 	ommittee or management unit that is re	esponsible for co-ordinating	Yes
 Are there staff at the national Ministry level who Do you have regional structures responsible for 		AIDS epidemic?	Yes No
 3. Enabling Environment for an effective in You have regulations for schools and other educations. 		ions and foos	False
The Ministry of Education has a specific HIV/AID		ions and rees	In Process
 The Ministry of Education has a workplace policy Other rules and regulations within the Ministry had HIV/AIDS 	y relating to HIV/AIDS	cts and implications of	In Process
 HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic 	nlan?		Yes
 Is HIV/AIDS considered when making district lev 	el plans?		Yes
5. Human Resources adaptation to the imHuman resource policies have been amended to		lity to HIV/AIDS (o a	
 Human resource policies have been amended to deployment of teachers away from their families) An analysis of the impact of HIV/AIDS on deman 			False
conducted		The education sector has been	True
Guidelines for teachers on dealing with HIV/AIDSWorkplace HIV/AIDS programmes	S in schools have been developed		In Process
Does the Ministry/Department have an HIV/AIDS	S awareness programme for all its emp	ployees:	
At the national level?	, 0		Yes
At the district level? For staff at education institutions?			Yes Yes
Have guidelines for implementing universal precia	autions been developed for use by all	staff?	Yes
 Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected 	ation with regard to recruitment, advar by HIV/AIDS	ncement, continued	Yes
 Do you enforce confidentiality of information abo HIV/AIDS and the Curriculum 	ut Ministry employees affected by HIV	//AIDS?	Yes
Is there a life skills programme established in your state.	ur education system at the following le	evels:	
Primary?			No
Secondary? Does the life skills programme consider iss	suce relating to gondor?		No No
Have orientation programmes been undertaken.		V/AIDS?	In Process
 Has there been an orientation process for parent 	ts regarding life skills programmes in s		No
Are HIV/AIDS materials available to all students		r	No
 Are HIV/AIDS and life skills integral components teachers? 	·		Yes
Have efforts been made to include out of school		reness efforts?	Yes
 Responses aimes at the Infected and A Does the Ministry have a programme to address system? 		e children in the education	Yes
 Is there currently a school feeding scheme in pla 			Yes
Are counseling services, by trained counsellors,At the Primary levelAt the Secondary level	available at most or all schools at the	following levels:	No No
9. Partnership development in response t			.,
 Has an effort been made to identify possible part Does the education sector have a shared strateg 	gy for the fight against AIDS?	ithin the education sector?	Yes Yes
10. Research guiding the response to HIV/		Imports of and recovered	
 Has a research agenda been defined that prioriti HIV/AIDS within the education sector? 		·	Yes
 Has any research been commissioned to inform 	the education sector response to HIV	/AIDS?	Yes

Selected Key Results for:	Liberia	
UN Region: Sub-Saharan Africa	Prevalence: Medium Date Comple	eted: 7 Aug 04
1. Education SystemIs there a single education Ministry in your count Education)?	ry, or two (e.g. Ministry of Basic Education and Ministry of Highe	er Single
 Is total enrolment in your schools growing, shrink 	0	Growing
the response to the HIV/AIDS epidemic?	mmittee or management unit that is responsible for co-ordinatin	g
 Are there staff at the national Ministry level who one Do you have regional structures responsible for in 	only deal with HIV/AIDS issues? mplementing a response to the HIV/AIDS epidemic?	No No
3. Enabling Environment for an effective r		
You have regulations for schools and other educ The Ministry of Education has a specific UN/ALD The Ministry of UN/ALD The Ministr		False
 The Ministry of Education has a specific HIV/AID The Ministry of Education has a workplace policy 		True
 Other rules and regulations within the Ministry had HIV/AIDS 	ive been reviewed in light of the impacts and implications of	False
4. HIV/AIDS Mainstreaming	Jan 2	Ne
 Is there an education sector HIV/AIDS strategic p Is HIV/AIDS considered when making district lev 		No No
5. Human Resources adaptation to the im	•	
 Human resource policies have been amended to deployment of teachers away from their families) 	minimise vulnerability and susceptibility to HIV/AIDS (e.g.	False
conducted	d and supply of human resources in the education sector has be	11/4
 Guidelines for teachers on dealing with HIV/AIDS 	S in schools have been developed	False
6. Workplace HIV/AIDS programmes		
 Does the Ministry/Department have an HIV/AIDS At the national level? 	awareness programme for all its employees:	No
At the district level?		No No
For staff at education institutions?		No
Have guidelines for implementing universal preca	autions been developed for use by all staff?	No
employment and benefits for personnel affected		No
 Do you enforce confidentiality of information about HIV/AIDS and the Curriculum 	ut Ministry employees affected by HIV/AIDS?	Yes
 Is there a life skills programme established in you 	ir education system at the following levels:	
Primary?	ar education system at the following levels.	Yes
Secondary?		Yes
Does the life skills programme consider iss		Yes
Have orientation programmes been undertaken f Lieuthers been an orientation program for persent		Yes
 Has there been an orientation process for parent Are HIV/AIDS materials available to all students 		In Process No
 Are HIV/AIDS and life skills integral components 	in the curriculum for the professional preparation of all new	No
teachers? Have efforts been made to include out of school.	youths in life skills and HIV/AIDS awareness efforts?	Yes
8. Responses aimes at the Infected and A		163
	the needs of orphaned and vulnerable children in the education	No
 Is there currently a school feeding scheme in pla 		Yes
At the Primary level	available at most or all schools at the following levels:	No
At the Secondary level		No
9. Partnership development in response to		Voo
 Has an effort been made to identify possible part Does the education sector have a shared strateg 	ners for the fight against HIV/AIDS within the education sector? v for the fight against AIDS?	Yes No
10. Research guiding the response to HIV/		IVO
	ses gaps in knowledge relating to the impacts of and response t	O No
Has any research been commissioned to inform	the education sector response to HIV/AIDS?	Yes

Selected Key Results for:	Madagascar		
UN Region: Sub-Saharan Africa	Prevalence: Low	Date Completed:	5 May 04
Education System Is there a single education Ministry in your coun Education)?		cation and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrin Ministry of Education HIV/AIDS structum 	<u> </u>		Growing
 At the national level, do you have a dedicated of the response to the HIV/AIDS epidemic? 	ommittee or management unit that is re	esponsible for co-ordinating	In Process
Are there staff at the national Ministry level whoDo you have regional structures responsible for		AIDS epidemic?	No n/a
3. Enabling Environment for an effective	response to HIV/AIDS	·	
 You have regulations for schools and other edu The Ministry of Education has a specific HIV/AII 		ions and fees	True In Process
The Ministry of Education has a workplace police			False
 Other rules and regulations within the Ministry h HIV/AIDS 		cts and implications of	False
4. HIV/AIDS Mainstreaming	nlan?		n/a
 Is there an education sector HIV/AIDS strategic Is HIV/AIDS considered when making district leverage 			n/a n/a
5. Human Resources adaptation to the in	npacts of HIV/AIDS		
Human resource policies have been amended to deployment of teachers away from their families An archiving of the impact of HIV/AIDS and depressions.	3)		n/a
 An analysis of the impact of HIV/AIDS on demail conducted 	nd and supply of numan resources in t	ine education sector has been	n/a
 Guidelines for teachers on dealing with HIV/AID 	S in schools have been developed		True
6. Workplace HIV/AIDS programmes	C autoronoco programmo for all ito om	nlavioce	
 Does the Ministry/Department have an HIV/AID: At the national level? 	S awareness programme for all its emp	pioyees.	No
At the district level?			No
For staff at education institutions?	coutions been developed for use by all	ctoff?	No
 Have guidelines for implementing universal prec Does the Ministry have a policy of non-discrimin employment and benefits for personnel affected 	nation with regard to recruitment, advar		No No
 Do you enforce confidentiality of information about 		//AIDS?	No
 HIV/AIDS and the Curriculum Is there a life skills programme established in your 	our education system at the following le	avals.	
Primary?	our caucation system at the following it	CVCI3.	Yes
Secondary?			Yes
Does the life skills programme consider is		IV//AIDCO	Yes
Have orientation programmes been undertakenHas there been an orientation process for parer			No No
Are HIV/AIDS materials available to all students		301100131	No
 Are HIV/AIDS and life skills integral components teachers? 		preparation of all new	No
Have efforts been made to include out of school	•	areness efforts?	Yes
 Responses aimes at the Infected and A Does the Ministry have a programme to address 		le children in the education	No
system? Is there currently a school feeding scheme in place.	ace?		Yes
 Are counseling services, by trained counsellors, At the Primary level At the Secondary level 		following levels:	No No
9. Partnership development in response	to HIV/AIDS		
 Has an effort been made to identify possible par Does the education sector have a shared strate 	rtners for the fight against HIV/AIDS wi	ithin the education sector?	Yes n/a
10. Research guiding the response to HIV	AIDS		
 Has a research agenda been defined that priorit HIV/AIDS within the education sector? 		· ·	No
 Has any research been commissioned to inform 	the education sector response to HIV	/AIDS?	No

S	elected Key Results for: Malawi	
u	N Region: Sub-Saharan Africa Prevalence: High Date Complete	d: 19 May 04
1.	Education System	
	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
•	Is total enrolment in your schools growing, shrinking or remaining stable?	Stable
2.	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
	Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues?	Yes
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS	
•	You have regulations for schools and other educational institutions in terms of admissions and fees	True
•	· · · · · · · · · · · · · · · · · · ·	In Process
	The Ministry of Education has a workplace policy relating to HIV/AIDS Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of	In Process
•	HIV/AIDS	True
4.	HIV/AIDS Mainstreaming	
•	Is there an education sector HIV/AIDS strategic plan?	Yes
	Is HIV/AIDS considered when making district level plans?	No
	Human Resources adaptation to the impacts of HIV/AIDS	
	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	In Process
	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	rrue
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level?	In Process
	At the district level?	In Process
	For staff at education institutions?	In Process
	Have guidelines for implementing universal precautions been developed for use by all staff?	In Process
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels: Primary?	Yes
	Secondary?	Yes
	Does the life skills programme consider issues relating to gender?	Yes
•	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
•	Has there been an orientation process for parents regarding life skills programmes in schools?	In Process
	Are HIV/AIDS materials available to all students within the tertiary sector?	Yes
	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes
_	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8. •	Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education	In Process
	system? Is there currently a school feeding scheme in place?	Yes
	Are counseling services, by trained counsellors, available at most or all schools at the following levels:	162
•	At the Primary level At the Secondary level	No No
	Partnership development in response to HIV/AIDS	
	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	Yes
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to	No
	HIV/AIDS within the education sector?	
•	Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

Selected Key Results for:	Mali	
UN Region: Sub-Saharan Africa	Prevalence: Medium Date Completed	5 Mar 04
1. Education System		
Education)?	ry, or two (e.g. Ministry of Basic Education and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrink 		Growing
 Ministry of Education HIV/AIDS structure At the national level, do you have a dedicated conthe response to the HIV/AIDS epidemic? 	res mmittee or management unit that is responsible for co-ordinating	In Process
 Are there staff at the national Ministry level who g 	only deal with HIV/AIDS issues?	No
	mplementing a response to the HIV/AIDS epidemic?	Yes
 Senabling Environment for an effective r You have regulations for schools and other eductions 		True
The Ministry of Education has a specific HIV/AID		True
The Ministry of Education has a workplace policy	relating to HIV/AIDS	True
HIV/AIDS	eve been reviewed in light of the impacts and implications of	False
4. HIV/AIDS Mainstreaming	slan?	Vac
 Is there an education sector HIV/AIDS strategic p Is HIV/AIDS considered when making district levent 		Yes Yes
5. Human Resources adaptation to the im		103
 Human resource policies have been amended to deployment of teachers away from their families) 	minimise vulnerability and susceptibility to HIV/AIDS (e.g.	False
 An analysis of the impact of HIV/AIDS on deman conducted 	d and supply of human resources in the education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDS	S in schools have been developed	True
6. Workplace HIV/AIDS programmes		
 Does the Ministry/Department have an HIV/AIDS At the national level? At the district level? For staff at education institutions? 		In Process In Process In Process
 Have guidelines for implementing universal preca Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected 	ation with regard to recruitment, advancement, continued	In Process No response
 Do you enforce confidentiality of information about HIV/AIDS and the Curriculum 		
 Is there a life skills programme established in you 	ur education system at the following levels:	
Primary? Secondary?	g	No No
Does the life skills programme consider iss	ues relating to gender?	Yes
 Have orientation programmes been undertaken f 		No
Has there been an orientation process for parent		No
	in the curriculum for the professional preparation of all new	No No
teachers? Have efforts been made to include out of school.	youths in life skills and HIV/AIDS awareness efforts?	No
Responses aimes at the Infected and A	•	110
	the needs of orphaned and vulnerable children in the education	No
 Is there currently a school feeding scheme in pla 		No
 Are counseling services, by trained counsellors, At the Primary level At the Secondary level 	available at most or all schools at the following levels:	No No
	o HIV/AIDS	INU
	ners for the fight against HIV/AIDS within the education sector?	Yes Yes
Nesearch guiding the response to HIV//		162
	ses gaps in knowledge relating to the impacts of and response to	No
HIV/AIDS within the education sector?Has any research been commissioned to inform		No No

Selected Key Results for	Malta		
UN Region: Western Europe	Prevalence: Low	Date Completed:	12 Jul 04
1. Education System			
 Is there a single education Ministry in your cou Education)? 		tion and Ministry of Higher	Single
Is total enrolment in your schools growing, shri			
 Ministry of Education HIV/AIDS struct At the national level, do you have a dedicated the response to the HIV/AIDS epidemic? 		sponsible for co-ordinating	Yes
 Are there staff at the national Ministry level who Do you have regional structures responsible fo 		OS epidemic?	No n/a
3. Enabling Environment for an effective			
 You have regulations for schools and other ed 	ucational institutions in terms of admissio	ns and fees	True
The Ministry of Education has a specific HIV/A			In Process
The Ministry of Education has a workplace poliOther rules and regulations within the Ministry		s and implications of	False
HIV/AIDS	mave been reviewed in light of the impact	s and implications of	False
4. HIV/AIDS MainstreamingIs there an education sector HIV/AIDS strategic	c nlan?		n/a
 Is HIV/AIDS considered when making district let 			n/a
5. Human Resources adaptation to the i	•		
Human resource policies have been amended deployment of teachers away from their familie	to minimise vulnerability and susceptibilitys)	, ,	n/a
 An analysis of the impact of HIV/AIDS on demaconducted 	and and supply of human resources in the	e education sector has been	n/a
Guidelines for teachers on dealing with HIV/AII	DS in schools have been developed		False
6. Workplace HIV/AIDS programmes			
 Does the Ministry/Department have an HIV/AIE At the national level? 	OS awareness programme for all its empl	oyees:	No
At the district level?			No
For staff at education institutions?			No
 Have guidelines for implementing universal pre 			Yes
 Does the Ministry have a policy of non-discrimi employment and benefits for personnel affecte 	d by HIV/AIDS		No
Do you enforce confidentiality of information ab	oout Ministry employees affected by HIV/	AIDS?	Yes
7. HIV/AIDS and the CurriculumIs there a life skills programme established in y	your adjugation system at the following lov	volc:	
Primary?	roul education system at the following lev	·CI3.	Yes
Secondary?			Yes
Does the life skills programme consider is			Yes
Have orientation programmes been undertaken			Yes
Has there been an orientation process for pare Are LIV/ALDS materials available to all students.		chools?	Yes
 Are HIV/AIDS materials available to all student Are HIV/AIDS and life skills integral component 		reparation of all new	No Yes
teachers? • Have efforts been made to include out of school	ol youths in life skills and HIV/AIDS aware	eness efforts?	No
8. Responses aimes at the Infected and	•		
 Does the Ministry have a programme to address system? 		children in the education	No
 Is there currently a school feeding scheme in p 			No
 Are counseling services, by trained counsellors 		ollowing levels:	
At the Primary levelAt the Secondary level			No No
9. Partnership development in response			
Has an effort been made to identify possible particle.		nin the education sector?	No
Does the education sector have a shared strate	0 0		n/a
10. Research guiding the response to HIV		unado efectivas.	
 Has a research agenda been defined that prior HIV/AIDS within the education sector? 	Truses gaps in knowledge relating to the in	mpacts of and response to	No
 Has any research been commissioned to inforr 	m the education sector response to HIV/A	NDS?	No

Please note that this is an <u>extract</u> of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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Se	elected Key Results for:	Mexico		
UN	Region: Latin America	Prevalence: Low	Date Completed:	30 Jul 04
1.	Education System			
	is there a single education Ministry in your countr Education)?		ation and Ministry of Higher	Two
	s total enrolment in your schools growing, shrink			Growing
• /	Ministry of Education HIV/AIDS structur At the national level, do you have a dedicated con the response to the HIV/AIDS epidemic?		esponsible for co-ordinating	No
	Are there staff at the national Ministry level who <u>c</u>	only deal with HIV/AIDS issues?		No
	Do you have regional structures responsible for in		IDS epidemic?	n/a
	Enabling Environment for an effective re		'	
	You have regulations for schools and other educa		ons and fees	False
	The Ministry of Education has a specific HIV/AIDS			False
	The Ministry of Education has a workplace policy		ata and implications of	In Process
	Other rules and regulations within the Ministry ha HIV/AIDS	ive been reviewed in light of the impac	and implications of	False
	HIV/AIDS Mainstreaming			
•	s there an education sector HIV/AIDS strategic p	olan?		n/a
•	s HIV/AIDS considered when making district level	el plans?		n/a
	Human Resources adaptation to the imp			
(Human resource policies have been amended to deployment of teachers away from their families)			n/a
	An analysis of the impact of HIV/AIDS on demand conducted	d and supply of human resources in the	ne education sector has been	n/a
	Guidelines for teachers on dealing with HIV/AIDS	S in schools have been developed		False
	Workplace HIV/AIDS programmes			
	Does the Ministry/Department have an HIV/AIDS	awareness programme for all its emp	oloyees:	
	At the national level?			No
	At the district level?			No
_	For staff at education institutions? Have guidelines for implementing universal preca	autions boon dovoloped for use by all	ctaff?	No No
•	Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected by	ition with regard to recruitment, advan		Yes
•	Do you enforce confidentiality of information abou		/AIDS?	Yes
	HIV/AIDS and the Curriculum	un advisation avators at the fallevine la	uala:	
•	s there a life skills programme established in you Primary?	ar education system at the following le	eveis:	Yes
	Secondary?			Yes
	Does the life skills programme consider issu	ues relating to gender?		Yes
•	Have orientation programmes been undertaken fo		V/AIDS?	Yes
•	Has there been an orientation process for parents	s regarding life skills programmes in s		No
	Are HIV/AIDS materials available to all students v			Yes
	Are HIV/AIDS and life skills integral components leachers?	in the curriculum for the professional	preparation of all new	Yes
	Have efforts been made to include out of school y		reness efforts?	No
	Responses aimes at the Infected and Af		191 1 11 1 11	
	Does the Ministry have a programme to address system?	·	e children in the education	No
	s there currently a school feeding scheme in place		following lovels:	Yes
	Are counseling services, by trained counsellors, a At the Primary level	available at 1110St Of all SCHOOLS at the	ioliowing levels.	No
	At the Secondary level			No
	Partnership development in response to	o HIV/AIDS		
	Has an effort been made to identify possible parti		thin the education sector?	Yes
•	Does the education sector have a shared strategy	y for the fight against AIDS?		n/a
	Research guiding the response to HIV/A			
	Has a research agenda been defined that prioritis	ses gaps in knowledge relating to the	impacts of and response to	No
	HIV/AIDS within the education sector? Has any research been commissioned to inform t	the education sector response to LIM	AIDC2	No

S	elected Key Results for: Moldova	
U	N Region: Eastern Europe & Central Asia Prevalence: Low Date Completed:	17 Sep 04
	Education System	
•	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
• 2.	Is total enrolment in your schools growing, shrinking or remaining stable? Ministry of Education HIV/AIDS structures	Shrinking
•	At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	Yes
	Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes n/a
3.	Enabling Environment for an effective response to HIV/AIDS	
	You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy	True No response
•	The Ministry of Education has a workplace policy relating to HIV/AIDS	In Process
•	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	True
	HIV/AIDS Mainstreaming	
	Is there an education sector HIV/AIDS strategic plan?	n/a
	Is HIV/AIDS considered when making district level plans? Human Resources adaptation to the impacts of HIV/AIDS	n/a
	Human resources adaptation to the impacts of FitV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	n/a
٠	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	n/a
•	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	True
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? At the district level? For staff at education institutions?	No No No
•	Have guidelines for implementing universal precautions been developed for use by all staff?	No
	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum Is there a life skills programme established in your education system at the following levels:	
•	Primary? Secondary?	Yes Yes
	Does the life skills programme consider issues relating to gender?	Yes
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
•	Has there been an orientation process for parents regarding life skills programmes in schools? Are HIV/AIDS materials available to all students within the tertiary sector?	In Process No
	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes
• 8.	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? Responses aimes at the Infected and Affected	Yes
•	Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	Yes
	Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels:	Yes
•	At the Primary level At the Secondary level	Yes Yes
	Partnership development in response to HIV/AIDS	103
•	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Does the education sector have a shared strategy for the fight against AIDS?	Yes n/a
10.	Research guiding the response to HIV/AIDS	
	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?	Yes
•	Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

UN Region: Sub-Saharan Africa Prevalence: High Date Completed: 2 A	pril 04
A. Education Creature	
 1. Education System Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)? Is total enrolment in your schools growing, shrinking or remaining stable? 	Two Growing
Ministry of Education HIV/AIDS structures	Growing
 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic? 	Yes
 Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? 	Yes Yes
3. Enabling Environment for an effective response to HIV/AIDS	
You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a possific LINVAIDS policy. The Ministry of Education has a possific LINVAIDS policy. The Ministry of Education has a possific LINVAIDS policy. The Ministry of Education has a possific LINVAIDS policy.	True
, ,	n Process n Process
Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	True
4. HIV/AIDS Mainstreaming	Vaa
 Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans? 	Yes No
5. Human Resources adaptation to the impacts of HIV/AIDS	
deployment of teachers away from their families)	Process
 An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted 	True
Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	True
 Workplace HIV/AIDS programmes Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: 	
At the national level? At the district level?	Yes n Process n Process
Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued	Process Yes
 employment and benefits for personnel affected by HIV/AIDS Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? HIV/AIDS and the Curriculum 	Yes
Is there a life skills programme established in your education system at the following levels:	
Primary?	Yes
Secondary?	Yes
Does the life skills programme consider issues relating to gender? Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes Yes
1 3	Process
 Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers? 	Yes
 Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? 	Yes
 Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system? 	No
 Is there currently a school feeding scheme in place? 	No
 Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level At the Secondary level 	No No
9. Partnership development in response to HIV/AIDS	
 Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Does the education sector have a shared strategy for the fight against AIDS? 	Yes Yes
 10. Research guiding the response to HIV/AIDS Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to 	No
HIV/AIDS within the education sector?Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

Selected Key Results for:	Myanmar		
UN Region: South & South East Asia	Prevalence: Low	Date Completed:	21 Jul 04
1. Education System			
 Is there a single education Ministry in your countr Education)? 		ation and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrinking 			Growing
 Ministry of Education HIV/AIDS structur At the national level, do you have a dedicated cor the response to the HIV/AIDS epidemic? Are there staff at the national Ministry level who o 	mmittee or management unit that is re	esponsible for co-ordinating	
 Do you have regional structures responsible for in 3. Enabling Environment for an effective re 		IDS epidemic?	n/a
 You have regulations for schools and other educa The Ministry of Education has a specific HIV/AIDS The Ministry of Education has a workplace policy Other rules and regulations within the Ministry have 	S policy relating to HIV/AIDS		No response
HIV/AIDS 4. HIV/AIDS Mainstreaming			
 Is there an education sector HIV/AIDS strategic p 			n/a
Is HIV/AIDS considered when making district level	•		n/a
 Human Resources adaptation to the imp Human resource policies have been amended to deployment of teachers away from their families) 		lity to HIV/AIDS (e.g.	n/a
An analysis of the impact of HIV/AIDS on demand conducted	d and supply of human resources in t	he education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDS	in schools have been developed		No response
6. Workplace HIV/AIDS programmes			
Does the Ministry/Department have an HIV/AIDS At the national level? At the district level? For staff at education institutions?		_	No response No response
 Have guidelines for implementing universal preca Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected be 	tion with regard to recruitment, advar		No response
 Do you enforce confidentiality of information abou HIV/AIDS and the Curriculum 	ut Ministry employees affected by HIV	//AIDS?	
 Is there a life skills programme established in you 	ir education system at the following le	evels:	
Primary? Secondary?			Yes Yes
Does the life skills programme consider issu		WAIDS2	Yes Yes
 Have orientation programmes been undertaken for Has there been an orientation process for parents 			Yes
 Are HIV/AIDS materials available to all students v 	within the tertiary sector?		
 Are HIV/AIDS and life skills integral components i teachers? 	·		Yes
Have efforts been made to include out of school y		reness efforts?	Yes
 Responses aimes at the Infected and Af Does the Ministry have a programme to address to system? 		e children in the education	No response
 Is there currently a school feeding scheme in place Are counseling services, by trained counsellors, a At the Primary level At the Secondary level 		following levels:	No response
 9. Partnership development in response to Has an effort been made to identify possible partr Does the education sector have a shared strategy 	ners for the fight against HIV/AIDS wi	ithin the education sector?	No response n/a
Research guiding the response to HIV/A Has a research agenda been defined that prioritis	AIDS	impacts of and response to	184
HIV/AIDS within the education sector? Has any research been commissioned to inform t			No response

Selected Key Results for	or: Namibia		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed:	06 Aug 04
1. Education System			
 Is there a single education Ministry in your Education)? 		ition and Ministry of Higher	Two
 Is total enrolment in your schools growing, 			Growing
 Ministry of Education HIV/AIDS str At the national level, do you have a dedica the response to the HIV/AIDS epidemic? 		sponsible for co-ordinating	Yes
Are there staff at the national Ministry level	who only deal with HIV/AIDS issues?		Yes
 Do you have regional structures responsible 		DS epidemic?	Yes
3. Enabling Environment for an effect			
You have regulations for schools and other The Ministry of Education Inc. The Ministry		ons and fees	True
The Ministry of Education has a specific HIThe Ministry of Education has a workplace			True True
Other rules and regulations within the Ministry		ts and implications of	
HIV/AIDS	say have been reviewed in light of the impac	is and implications of	False
4. HIV/AIDS Mainstreaming			
 Is there an education sector HIV/AIDS stra 			Yes
Is HIV/AIDS considered when making distr	•		Yes
 Human Resources adaptation to the Human resource policies have been amended 		ty to UIV/AIDS (o.g.	
deployment of teachers away from their far	milies)		False
An analysis of the impact of HIV/AIDS on conducted	, . .	le education sector has been	True
Guidelines for teachers on dealing with HIV	//AIDS in schools have been developed		In Process
6. Workplace HIV/AIDS programmes	UNIDS awareness programme for all its own	lovoce	
 Does the Ministry/Department have an HIV At the national level? 	TAIDS awareness programme for all its emp	loyees.	No
At the district level?			No
For staff at education institutions?			No
 Have guidelines for implementing universa 			In Process
 Does the Ministry have a policy of non-disc employment and benefits for personnel affer 	ected by HIV/AIDS		Yes
Do you enforce confidentiality of information	n about Ministry employees affected by HIV/	AIDS?	Yes
7. HIV/AIDS and the Curriculum	in your advantion system at the following les	volo.	
 Is there a life skills programme established Primary? 	in your education system at the following lev	veis:	Yes
Secondary?			Yes
Does the life skills programme consideration	der issues relating to gender?		Yes
 Have orientation programmes been undert 	aken for teachers in school life skills and HIV		Yes
Has there been an orientation process for I		chools?	Yes
Are HIV/AIDS materials available to all stud Are HIV/AIDS and life skills into real agreements.		man analism of all man	Yes
 Are HIV/AIDS and life skills integral compoteachers? 	· · ·	•	Yes
Have efforts been made to include out of s	-	eness efforts?	Yes
8. Responses aimes at the Infected a		abildran in the endure the	
 Does the Ministry have a programme to ad system? 	·	children in the education	No
Is there currently a school feeding scheme Are gaugeding services, by trained sources.		following lovels	Yes
Are counseling services, by trained counseAt the Primary level	eliois, avaliable at most of all schools at the f	ollowing levels:	Yes
At the Secondary level			Yes
9. Partnership development in respon	nse to HIV/AIDS		
Has an effort been made to identify possible		hin the education sector?	Yes
Does the education sector have a shared s	strategy for the fight against AIDS?		Yes
10. Research guiding the response to			
Has a research agenda been defined that	prioritises gaps in knowledge relating to the i	mpacts of and response to	No
HIV/AIDS within the education sector?	oform the education sector response to LIIVII	NIDS2	
 Has any research been commissioned to ir 	nform the education sector response to HIV/	AID2.	Yes

Selected Key Results for	r: Nicaragua		
UN Region: Latin America	Prevalence: Low	Date Completed:	12 Jul 04
1. Education System			
 Is there a single education Ministry in your co Education)? 		tion and Ministry of Higher	Single
 Is total enrolment in your schools growing, sh 			Growing
 Ministry of Education HIV/AIDS struction At the national level, do you have a dedicated the response to the HIV/AIDS epidemic? 		sponsible for co-ordinating	Yes
 Are there staff at the national Ministry level w 	ho only deal with HIV/AIDS issues?		No
 Do you have regional structures responsible f 		DS epidemic?	n/a
3. Enabling Environment for an effective		1.6	-
 You have regulations for schools and other en The Ministry of Education has a specific HIV/A 		ns and fees	True False
 The Ministry of Education has a specific HIV/A The Ministry of Education has a workplace po 			False
 Other rules and regulations within the Ministry 		ts and implications of	
HIV/AIDS	,		False
4. HIV/AIDS Mainstreaming			
Is there an education sector HIV/AIDS strategy			n/a
Is HIV/AIDS considered when making district	•		n/a
 Human Resources adaptation to the Human resource policies have been amended deployment of teachers away from their familiary 	d to minimise vulnerability and susceptibilit	ty to HIV/AIDS (e.g.	n/a
An analysis of the impact of HIV/AIDS on der conducted		e education sector has been	n/a
Guidelines for teachers on dealing with HIV/A	AIDS in schools have been developed		False
6. Workplace HIV/AIDS programmes	·		
Does the Ministry/Department have an HIV/A	IDS awareness programme for all its empl	oyees:	
At the national level?			No
At the district level? For staff at education institutions?			No No
 Have guidelines for implementing universal p 	recautions been developed for use by all s	taff?	No
Does the Ministry have a policy of non-discrin employment and benefits for personnel affect	nination with regard to recruitment, advance		No
 Do you enforce confidentiality of information a HIV/AIDS and the Curriculum 	about Ministry employees affected by HIV/	AIDS?	Yes
• Is there a life skills programme established in	your education system at the following lev	vels:	
Primary?			Yes
Secondary?			Yes
Does the life skills programme considerHave orientation programmes been undertaken		//AIDC2	Yes Yes
 Has there been an orientation process for par 			Yes
 Are HIV/AIDS materials available to all studer 			No
 Are HIV/AIDS and life skills integral compone teachers? 		reparation of all new	No
Have efforts been made to include out of sche	=	eness efforts?	Yes
8. Responses aimes at the Infected and		191 171 1 11	
 Does the Ministry have a programme to addressystem? 		children in the education	No
Is there currently a school feeding scheme inAre counseling services, by trained counsello		allowing levels:	No
 Ale counseling services, by trailled counsello At the Primary level 	ns, available at thost of all schools at the It	oliowing levels.	Yes
At the Secondary level			Yes
9. Partnership development in respons	e to HIV/AIDS		
 Has an effort been made to identify possible 	partners for the fight against HIV/AIDS with	nin the education sector?	Yes
Does the education sector have a shared strain	0,000		n/a
10. Research guiding the response to H			
Has a research agenda been defined that price the second of the sec	oritises gaps in knowledge relating to the ir	mpacts of and response to	No
HIV/AIDS within the education sector?Has any research been commissioned to info	orm the education sector response to LIVIII	NDS2	No

Selected Key Results for	: Niger	
UN Region: Sub-Saharan Africa	Prevalence: Low Date Complete	ed: 22 Sep 04
1. Education System		
 Is there a single education Ministry in your council Education)? 	untry, or two (e.g. Ministry of Basic Education and Ministry of Higher	Two
 Is total enrolment in your schools growing, shr 	inking or remaining stable?	Growing
	tures committee or management unit that is responsible for co-ordinating	Yes
the response to the HIV/AIDS epidemic?Are there staff at the national Ministry level wh	no only deal with HIV/AIDS issues?	No
	or implementing a response to the HIV/AIDS epidemic?	n/a
3. Enabling Environment for an effective		
 You have regulations for schools and other ed The Ministry of Education has a specific HIV/A 	ducational institutions in terms of admissions and fees	In Process
The Ministry of Education has a workplace policy.		In Process
	have been reviewed in light of the impacts and implications of	False
HIV/AIDS		raise
4. HIV/AIDS Mainstreaming	ic plan?	nla
 Is there an education sector HIV/AIDS strateg Is HIV/AIDS considered when making district I 		n/a n/a
5. Human Resources adaptation to the i		Tird
 Human resource policies have been amended deployment of teachers away from their familie 	I to minimise vulnerability and susceptibility to HIV/AIDS (e.g. es)	n/a
 An analysis of the impact of HIV/AIDS on dem conducted 	nand and supply of human resources in the education sector has been	n/a
 Guidelines for teachers on dealing with HIV/Al 	IDS in schools have been developed	In Process
6. Workplace HIV/AIDS programmes		
 Does the Ministry/Department have an HIV/AI At the national level? At the district level? For staff at education institutions? 	DS awareness programme for all its employees:	In Process In Process In Process
Have guidelines for implementing universal pro-	ecautions been developed for use by all staff?	No
employment and benefits for personnel affects		No response
 Do you enforce confidentiality of information a HIV/AIDS and the Curriculum 	bout Ministry employees affected by HIV/AIDS?	
 Is there a life skills programme established in 	your education system at the following levels:	
Primary? Secondary?	your oddednor system at the following levels.	No No
Does the life skills programme consider	issues relating to gender?	No
Have orientation programmes been undertake		In Process
Has there been an orientation process for pare		No
Are HIV/AIDS materials available to all studen Are HIV/AIDS and life skills integral company. Are HIV/AIDS and life skills integral company.	its within the tertiary sector? Its in the curriculum for the professional preparation of all new	Yes
teachers?	its in the curriculum for the professional preparation of all new	No
	ool youths in life skills and HIV/AIDS awareness efforts?	Yes
8. Responses aimes at the Infected and	Affected uses the needs of orphaned and vulnerable children in the education	
system?	·	In Process
Is there currently a school feeding scheme in p Are counseling services, by trained counseller.		Yes
Are counseling services, by trained counsellorAt the Primary levelAt the Secondary level	s, available at most or all schools at the following levels:	No No
Partnership development in response	e to HIV/AIDS	INO
	partners for the fight against HIV/AIDS within the education sector?	Yes
Does the education sector have a shared strate		n/a
10. Research guiding the response to HI		
 Has a research agenda been defined that prio HIV/AIDS within the education sector? 	ritises gaps in knowledge relating to the impacts of and response to	No
	m the education sector response to HIV/AIDS?	No

Selected Key Results for:	Nigeria		
UN Region: Sub-Saharan Africa	Prevalence: Medium	Date Completed:	20 May 04
1. Education System			
 Is there a single education Ministry in your countr Education)? 	ry, or two (e.g. Ministry of Basic Education	n and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrink Ministry of Education HIV/AIDS structure 	•		Growing
 At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic? 	mmittee or management unit that is respo	onsible for co-ordinating	Yes
 Are there staff at the national Ministry level who go 			Yes
Do you have regional structures responsible for in	, ,	epidemic?	Yes
 Enabling Environment for an effective r You have regulations for schools and other educations 		and foos	True
The Ministry of Education has a specific HIV/AID.		and ices	In Process
The Ministry of Education has a workplace policy			In Process
 Other rules and regulations within the Ministry had HIV/AIDS 		and implications of	False
4. HIV/AIDS Mainstreaming			
Is there an education sector HIV/AIDS strategic p			Yes
Is HIV/AIDS considered when making district level	•		Yes
 Human Resources adaptation to the important of the important		o HIV/AIDS (e.g.	In Process
An analysis of the impact of HIV/AIDS on demandended	d and supply of human resources in the ϵ	education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDS	S in schools have been developed		In Process
6. Workplace HIV/AIDS programmes	<u> </u>		
Does the Ministry/Department have an HIV/AIDS At the national level? At the district level? For staff at education institutions?	awareness programme for all its employ	ees:	Yes Yes Yes
Have guidelines for implementing universal preca	autions been developed for use by all staf	f?	In Process
 Does the Ministry have a policy of non-discriminal employment and benefits for personnel affected l 	by HIV/AIDS		Yes
Do you enforce confidentiality of information about	ut Ministry employees affected by HIV/AII	DS?	No
7. HIV/AIDS and the Curriculum	on a diversal are acceptance at the fall and are level	-	
Is there a life skills programme established in you Primary? Secondary? If the life is a		S:	Yes Yes
Does the life skills programme consider iss Have orientation programmes been undertaken for		IDS2	Yes In Process
 Have orientation programmes been undertaken in Has there been an orientation process for parent 			No
Are HIV/AIDS materials available to all students to			Yes
 Are HIV/AIDS and life skills integral components teachers? 		paration of all new	Yes
 Have efforts been made to include out of school y Responses aimes at the Infected and A 	,	ess efforts?	Yes
 Does the Ministry have a programme to address system? 		ildren in the education	In Process
 Is there currently a school feeding scheme in plan 		nuing lovels	No
 Are counseling services, by trained counsellors, a At the Primary level At the Secondary level 	avanable at most of an schools at the follo	owing levels:	Yes Yes
9. Partnership development in response to	o HIV/AIDS		
 Has an effort been made to identify possible part Does the education sector have a shared strateg 	ners for the fight against HIV/AIDS within	the education sector?	Yes
10. Research guiding the response to HIV/			
 Has a research agenda been defined that prioritis HIV/AIDS within the education sector? 		·	No
Has any research been commissioned to inform to	the education sector response to HIV/AID	S?	Yes

Se	elected Key Results for: Papua	New Guinea		
U	N Region: East Asia & Pacific Prevalen	ce: Low	Date Completed:	
1.	Education System			
•	Is there a single education Ministry in your country, or two (e.g. M Education)?	•	nd Ministry of Higher	Two
	Is total enrolment in your schools growing, shrinking or remaining	stable?		Growing
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or mana the response to the HIV/AIDS epidemic?	gement unit that is respons	ible for co-ordinating	In Process
	Are there staff at the national Ministry level who only deal with HIV			Yes
	Do you have regional structures responsible for implementing a re	•	oidemic?	n/a
	Enabling Environment for an effective response to H You have regulations for schools and other educational institution		d fees	True
	TI AN I	3 III terriis or admiissions an	u iccs	In Process
•	The Ministry of Education has a workplace policy relating to HIV/A			False
	Other rules and regulations within the Ministry have been reviewe HIV/AIDS	d in light of the impacts and	l implications of	True
4.	HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?			nla
	Is HIV/AIDS considered when making district level plans?			n/a n/a
	Human Resources adaptation to the impacts of HIV/A	AIDS		
•	Human resource policies have been amended to minimise vulneradeployment of teachers away from their families)	ability and susceptibility to F	· -	n/a
•	An analysis of the impact of HIV/AIDS on demand and supply of beconducted	numan resources in the edu	cation sector has been	n/a
	Guidelines for teachers on dealing with HIV/AIDS in schools have	been developed		In Process
	Workplace HIV/AIDS programmes			
•	Does the Ministry/Department have an HIV/AIDS awareness prog	ramme for all its employees	S:	No
	At the national level? At the district level?			No No
	For staff at education institutions?			No
	Have guidelines for implementing universal precautions been dev			No
	Does the Ministry have a policy of non-discrimination with regard employment and benefits for personnel affected by HIV/AIDS			No
	Do you enforce confidentiality of information about Ministry emplo	yees affected by HIV/AIDS?	?	Yes
	HIV/AIDS and the Curriculum Is there a life skills programme established in your education syst	om at the following levels:		
•	Primary?	eni at the following levels.		Yes
	Secondary?			Yes
	Does the life skills programme consider issues relating to ge			Yes
	Have orientation programmes been undertaken for teachers in sc			In Process
	Has there been an orientation process for parents regarding life s Are HIV/AIDS materials available to all students within the tertiary		5 <i>{</i>	In Process Yes
	Are HIV/AIDS and life skills integral components in the curriculum teachers?		ation of all new	Yes
•	Have efforts been made to include out of school youths in life skill	s and HIV/AIDS awareness	efforts?	Yes
8.	Responses aimes at the Infected and Affected			
	Does the Ministry have a programme to address the needs of orposystem?	haned and vulnerable childr	ren in the education	No
	Is there currently a school feeding scheme in place?	an all asks also states follows	an lavala	No
•	Are counseling services, by trained counsellors, available at most At the Primary level At the Secondary level	ui ali schools at the followii	ng ieveis:	No No
	Partnership development in response to HIV/AIDS			INO
	Has an effort been made to identify possible partners for the fight	against HIV/AIDS within the	e education sector?	Yes
	Does the education sector have a shared strategy for the fight again			n/a
	Research guiding the response to HIV/AIDS			
•	Has a research agenda been defined that prioritises gaps in know	rledge relating to the impact	s of and response to	No
•	HIV/AIDS within the education sector? Has any research been commissioned to inform the education sec	ctor response to HIV/AIDS?		No

S	elected Key Results for:	Paraguay		
U	N Region: Latin America	Prevalence: Low	Date Completed:	16 Sep 04
1.	Education System			
	Is there a single education Ministry in your countribute Education)?		ition and Ministry of Higher	Single
•	Is total enrolment in your schools growing, shrink	ing or remaining stable?		Stable
•	Ministry of Education HIV/AIDS structure At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic?	mmittee or management unit that is re	sponsible for co-ordinating	Yes
	Are there staff at the national Ministry level who go you have regional structures responsible for it		DS onidomic?	n/a
	Enabling Environment for an effective r		D3 epidemic:	II/a
	You have regulations for schools and other educations		ons and fees	
•	The Ministry of Education has a specific HIV/AID	S policy		In Process
	The Ministry of Education has a workplace policy			False
	Other rules and regulations within the Ministry ha HIV/AIDS	ive been reviewed in light of the impac	ts and implications of	False
	HIV/AIDS Mainstreaming	olan?		2/2
	Is there an education sector HIV/AIDS strategic p Is HIV/AIDS considered when making district leve			n/a n/a
	Human Resources adaptation to the im	•		TITA
	Human resource policies have been amended to deployment of teachers away from their families)	minimise vulnerability and susceptibili	ty to HIV/AIDS (e.g.	n/a
٠	An analysis of the impact of HIV/AIDS on deman conducted		e education sector has been	n/a
•	Guidelines for teachers on dealing with HIV/AIDS	S in schools have been developed		True
	Workplace HIV/AIDS programmes			
•	Does the Ministry/Department have an HIV/AIDS	awareness programme for all its emp	loyees:	
	At the national level? At the district level? For staff at education institutions?			No response In Process
	Have guidelines for implementing universal preca	autions been developed for use by all s	staff?	
	Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected l	ation with regard to recruitment, advance		Yes
	Do you enforce confidentiality of information about HIV/AIDS and the Curriculum		'AIDS?	Yes
	Is there a life skills programme established in you	ur education system at the following lev	vels:	
	Primary?	, and the second		Yes
	Secondary?			Yes
	Does the life skills programme consider iss Have orientation programmes been undertaken f		NNIDCO	Yes Yes
	Has there been an orientation process for parent			Yes
	Are HIV/AIDS materials available to all students		01100131	Yes
	Are HIV/AIDS and life skills integral components teachers?		preparation of all new	Yes
•	Have efforts been made to include out of school	youths in life skills and HIV/AIDS awar	eness efforts?	Yes
8.	Responses aimes at the Infected and A			
	Does the Ministry have a programme to address system?	·	children in the education	In Process
	Is there currently a school feeding scheme in plan		ollowing lovels	Yes
•	Are counseling services, by trained counsellors, a At the Primary level At the Secondary level	avanable at thost of all schools at the f	ollowing levels:	No Yes
	Partnership development in response to	n HIV/AIDS		163
	Has an effort been made to identify possible part		hin the education sector?	Yes
	Does the education sector have a shared strateg		2.0 2.0 2.0 2.0 1.0 2.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1	n/a
10.	Research guiding the response to HIV/	AIDS		
	Has a research agenda been defined that prioritis		mpacts of and response to	No
	HIV/AIDS within the education sector?		AIDCO	
	Has any research been commissioned to inform	tne education sector response to HIV//	AIDS?	No

Selected Key Results for	: Peru		
UN Region: Latin America	Prevalence: Low	Date Completed:	11 Jun 04
1. Education System			
 Is there a single education Ministry in your cou Education)? 		on and Ministry of Higher	Single
 Is total enrolment in your schools growing, shri 			Shrinking
 Ministry of Education HIV/AIDS struct At the national level, do you have a dedicated the response to the HIV/AIDS epidemic? 		oonsible for co-ordinating	No
 Are there staff at the national Ministry level wh 	o only deal with HIV/AIDS issues?		No
 Do you have regional structures responsible for 	or implementing a response to the HIV/AID	S epidemic?	n/a
3. Enabling Environment for an effective		a and face	Tour
 You have regulations for schools and other ed The Ministry of Education has a specific HIV/A 		is and fees	True In Process
The Ministry of Education has a workplace political control of the Ministry of the Minis			In Process
 Other rules and regulations within the Ministry HIV/AIDS 	have been reviewed in light of the impacts	and implications of	True
4. HIV/AIDS Mainstreaming			/ -
 Is there an education sector HIV/AIDS strategi Is HIV/AIDS considered when making district leads 			n/a n/a
5. Human Resources adaptation to the i	•		II/a
 Human resource policies have been amended deployment of teachers away from their familie 	to minimise vulnerability and susceptibility es)		n/a
 An analysis of the impact of HIV/AIDS on dem- conducted 	and and supply of human resources in the	education sector has been	n/a
Guidelines for teachers on dealing with HIV/AI	DS in schools have been developed		False
6. Workplace HIV/AIDS programmes			
 Does the Ministry/Department have an HIV/AII At the national level? 	DS awareness programme for all its emplo	yees:	No
At the district level?			No
For staff at education institutions?			No
 Have guidelines for implementing universal pre Does the Ministry have a policy of non-discrimination 	ination with regard to recruitment, advance		In Process Yes
employment and benefits for personnel affecteDo you enforce confidentiality of information al		IDS?	Yes
7. HIV/AIDS and the Curriculum			
 Is there a life skills programme established in y Primary? 	your education system at the following leve	els:	No
Secondary?			Yes
Does the life skills programme consider i			Yes
Have orientation programmes been undertake			Yes
 Has there been an orientation process for pare Are HIV/AIDS materials available to all student 		100ls?	In Process Yes
Are HIV/AIDS materials available to all student Are HIV/AIDS and life skills integral component teachers?		eparation of all new	No
Have efforts been made to include out of school	ol youths in life skills and HIV/AIDS awarer	ness efforts?	No
8. Responses aimes at the Infected and			
 Does the Ministry have a programme to address system? 		children in the education	No
 Is there currently a school feeding scheme in p Are counseling services, by trained counsellors 		llowing levels:	No
 At the Primary level At the Secondary level 	s, avandule at thust of all Schools at the fol	ilowing levels.	No No
9. Partnership development in response	e to HIV/AIDS		
 Has an effort been made to identify possible pa Does the education sector have a shared strat 	artners for the fight against HIV/AIDS within	n the education sector?	No n/a
10. Research guiding the response to HIV	0, 0		TIJU
 Has a research agenda been defined that prior 		pacts of and response to	No
HIV/AIDS within the education sector?			
 Has any research been commissioned to inform 	m the education sector response to HIV/AI	DS?	No

Selected Key Results for: Russian Federation **UN Region: Eastern Europe & Central Asia Prevalence: Low** Date Completed: 28?? 04 1. Education System • Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher **Single** Education)? • Is total enrolment in your schools growing, shrinking or remaining stable? **Shrinking** 2. Ministry of Education HIV/AIDS structures · At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating Yes the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who only deal with HIV/AIDS issues? No Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? n/a 3. Enabling Environment for an effective response to HIV/AIDS · You have regulations for schools and other educational institutions in terms of admissions and fees True • The Ministry of Education has a specific HIV/AIDS policy No response The Ministry of Education has a workplace policy relating to HIV/AIDS **False** Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of **False HIV/AIDS** 4. HIV/AIDS Mainstreaming • Is there an education sector HIV/AIDS strategic plan? n/a • Is HIV/AIDS considered when making district level plans? n/a 5. Human Resources adaptation to the impacts of HIV/AIDS • Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. n/a deployment of teachers away from their families) • An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been n/a conducted • Guidelines for teachers on dealing with HIV/AIDS in schools have been developed **False** 6. Workplace HIV/AIDS programmes • Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? No At the district level? No For staff at education institutions? No • Have guidelines for implementing universal precautions been developed for use by all staff? No • Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued Yes employment and benefits for personnel affected by HIV/AIDS • Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? Yes 7. HIV/AIDS and the Curriculum • Is there a life skills programme established in your education system at the following levels: Primary? Yes Secondary? Yes Does the life skills programme consider issues relating to gender? No Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS? In Process Has there been an orientation process for parents regarding life skills programmes in schools? In Process • Are HIV/AIDS materials available to all students within the tertiary sector? No · Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new Yes teachers? • Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? Yes 8. Responses aimes at the Infected and Affected • Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education Yes • Is there currently a school feeding scheme in place? Yes • Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level Yes At the Secondary level Yes 9. Partnership development in response to HIV/AIDS Yes • Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? • Does the education sector have a shared strategy for the fight against AIDS? n/a 10. Research guiding the response to HIV/AIDS · Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to Yes HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?

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S	Selected Key Results for: Rwanda	
U	JN Region: Sub-Saharan Africa Prevalence: High Date Co	ompleted: 14 Jun 04
1.	Education System	
	 Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Education)? 	Single
•	• Is total enrolment in your schools growing, shrinking or remaining stable?	Growing
2.	 Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-or the response to the HIV/AIDS epidemic? 	dinating Yes
•	Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	Yes
	• Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS	Truo
•	 You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy 	True In Process
	The Ministry of Education has a workplace policy relating to HIV/AIDS	True
	 Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications 	of False
	HIV/AIDS	I dise
4.	HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	
	Is HIV/AIDS considered when making district level plans?	No response
	Human Resources adaptation to the impacts of HIV/AIDS	110 100 00100
•	 Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families) 	No response
•	 An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector conducted 	has been No response
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	No response
	Workplace HIV/AIDS programmes	
•	 Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? 	Yes
	At the district level?	Yes
	For staff at education institutions? Have guidelines for implementing universal precautions been developed for use by all staff?	Yes No
	 Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS 	No
	 Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? 	No
	HIV/AIDS and the Curriculum	
•	 Is there a life skills programme established in your education system at the following levels: Primary? 	No
	Secondary? Does the life skills programme consider issues relating to gender?	No No
•	 Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS? 	In Process
•	 Has there been an orientation process for parents regarding life skills programmes in schools? 	In Process
	• Are HIV/AIDS materials available to all students within the tertiary sector?	Yes
•	 Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all ne teachers? 	ew Yes
_	 Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? 	Yes
8.	Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the edu	ication
	system?	III Process
	 Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels: 	Yes
•	 Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level At the Secondary level 	No No
		INU
	 Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education s 	sector? Yes
	Does the education sector have a shared strategy for the fight against AIDS?	Yes
	. Research guiding the response to HIV/AIDS	
•	 Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and responsible to the impacts of an impact of the impacts of an impact of the impacts of an impact of the impact	oonse to Yes
•	HIV/AIDS within the education sector?Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

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Selected Key Results for	Scotland		
UN Region: Western Europe	Prevalence: Low	Date Completed:	9 Jul 04
1. Education System			
 Is there a single education Ministry in your cou Education)? 		ition and Ministry of Higher	Single
Is total enrolment in your schools growing, shr			Shrinking
 Ministry of Education HIV/AIDS struction At the national level, do you have a dedicated the response to the HIV/AIDS epidemic? 		sponsible for co-ordinating	No
 Are there staff at the national Ministry level wh 	no only deal with HIV/AIDS issues?		No
Do you have regional structures responsible for	or implementing a response to the HIV/AI	DS epidemic?	n/a
3. Enabling Environment for an effective			
You have regulations for schools and other ed The Ministry of Education has a specific UNIV		ons and fees	True
 The Ministry of Education has a specific HIV/A The Ministry of Education has a workplace pol 			False False
 Other rules and regulations within the Ministry 		ts and implications of	
HIV/AIDS	That a section of the might of the impac	to and improduction of	True
4. HIV/AIDS Mainstreaming			
Is there an education sector HIV/AIDS strateg			n/a
Is HIV/AIDS considered when making district I	•		n/a
 Human Resources adaptation to the i Human resource policies have been amended deployment of teachers away from their familie 	I to minimise vulnerability and susceptibili	ty to HIV/AIDS (e.g.	n/a
An analysis of the impact of HIV/AIDS on dem conducted		e education sector has been	n/a
 Guidelines for teachers on dealing with HIV/Al 	IDS in schools have been developed		False
6. Workplace HIV/AIDS programmes			
 Does the Ministry/Department have an HIV/AI 	DS awareness programme for all its emp	loyees:	
At the national level?			Yes
At the district level?			Yes
For staff at education institutions? • Have guidelines for implementing universal pr	ecautions been developed for use by all s	staff?	Yes No
Does the Ministry have a policy of non-discrim employment and benefits for personnel affected.	ination with regard to recruitment, advance		Yes
 Do you enforce confidentiality of information a HIV/AIDS and the Curriculum 		'AIDS?	Yes
Is there a life skills programme established in	your education system at the following lev	vels:	
Primary?	-		Yes
Secondary?			Yes
Does the life skills programme consider • Have orientation programmes been undertake		NNIDCO	Yes Yes
 Has there been an orientation process for pare 			Yes
 Are HIV/AIDS materials available to all studen 		01100131	Yes
 Are HIV/AIDS and life skills integral componer teachers? 		preparation of all new	Yes
Have efforts been made to include out of scho		eness efforts?	Yes
Responses aimes at the Infected and		191 1 2	
 Does the Ministry have a programme to addressystem? 		children in the education	Yes
 Is there currently a school feeding scheme in p Are counseling services, by trained counsellor 		ollowing levels	Yes
 Are counselling services, by trained counsellor At the Primary level 	s, available at Hiost Of all Schools at the f	ullowing levels.	Yes
At the Secondary level			Yes
9. Partnership development in response	e to HIV/AIDS		
Has an effort been made to identify possible p	artners for the fight against HIV/AIDS wit	hin the education sector?	Yes
Does the education sector have a shared strategy	0, 0		n/a
10. Research guiding the response to HI			
Has a research agenda been defined that prio HIV/AIDS within the education sector?	ritises gaps in knowledge relating to the i	mpacts of and response to	No
HIV/AIDS within the education sector?Has any research been commissioned to infor	m the education sector response to LINU	NIDS2	No

Please note that this is an <u>extract</u> of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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Selected Key Results for	or: Sierra Leone		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed:	16 Jul 04
1. Education System			
 Is there a single education Ministry in your of Education)? 		ion and Ministry of Higher	Single
 Is total enrolment in your schools growing, s 			Growing
 Ministry of Education HIV/AIDS stru At the national level, do you have a dedicate the response to the HIV/AIDS epidemic? 		ponsible for co-ordinating	Yes
 Are there staff at the national Ministry level v 		20 11 10	Yes
Do you have regional structures responsible)S epidemic?	No
3. Enabling Environment for an effectiYou have regulations for schools and other		ns and foos	True
The Ministry of Education has a specific HIV		is and ices	In Process
 The Ministry of Education has a workplace p 	policy relating to HIV/AIDS		False
 Other rules and regulations within the Minist HIV/AIDS 	ry have been reviewed in light of the impacts	s and implications of	False
4. HIV/AIDS Mainstreaming			NI-
 Is there an education sector HIV/AIDS strate Is HIV/AIDS considered when making district 			No Yes
5. Human Resources adaptation to the	•		103
 Human resource policies have been amend deployment of teachers away from their fam 	ed to minimise vulnerability and susceptibility ilies)	, , ,	False
 An analysis of the impact of HIV/AIDS on de conducted 	emand and supply of human resources in the	e education sector has been	False
Guidelines for teachers on dealing with HIV/	AIDS in schools have been developed		False
6. Workplace HIV/AIDS programmes			
Does the Ministry/Department have an HIV/. At the patienal level?	AIDS awareness programme for all its emplo	oyees:	Van
At the national level? At the district level?			Yes Yes
For staff at education institutions?			No
Have guidelines for implementing universal	precautions been developed for use by all st	taff?	No
 Does the Ministry have a policy of non-discr employment and benefits for personnel affect 	cted by HIV/AIDS		Yes
Do you enforce confidentiality of information	about Ministry employees affected by HIV/A	AIDS?	Yes
7. HIV/AIDS and the CurriculumIs there a life skills programme established i	n your adjustion system at the following love	ole:	
Primary?	if your education system at the following levi	els.	Yes
Secondary?			Yes
Does the life skills programme conside	er issues relating to gender?		Yes
 Have orientation programmes been underta 			Yes
Has there been an orientation process for particular to the state of the state		hools?	No
 Are HIV/AIDS materials available to all stude Are HIV/AIDS and life skills integral component 		renaration of all now	No
teachers?	ents in the cumculant for the professional pr	eparation of all new	Yes
 Have efforts been made to include out of sc 	-	eness efforts?	Yes
8. Responses aimes at the Infected an			
 Does the Ministry have a programme to add system? 	·	children in the education	No
 Is there currently a school feeding scheme in Are counseling services, by trained counsell 		Illowing levels:	Yes
 Are counseling services, by trained counsell At the Primary level At the Secondary level 	ors, available at 1110st of all SCHOOIS at the 10	mowing levels.	No Yes
Partnership development in respon	se to HIV/AIDS		163
Has an effort been made to identify possible		in the education sector?	Yes
 Does the education sector have a shared sti 		2.10 0440411011 0001011	Yes
10. Research guiding the response to I	IIV/AIDS		
 Has a research agenda been defined that present the present of the p		npacts of and response to	Yes
HIV/AIDS within the education sector?	form the education coster response to LIN//A	IDC2	
 Has any research been commissioned to inf 	orm the education sector response to HIV/A	ID2.	No

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S	elected Key Results for: South Africa	
u	N Region: Sub-Saharan Africa Prevalence: High Date Completed:	9 Jun 04
1.	Education System	
•	Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)?	Single
	Is total enrolment in your schools growing, shrinking or remaining stable?	Shrinking
	Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating	Yes
	the response to the HIV/AIDS epidemic? Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	Yes
	Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Yes
	Enabling Environment for an effective response to HIV/AIDS	
	You have regulations for schools and other educational institutions in terms of admissions and fees	True
•	The Ministry of Education has a specific HIV/AIDS policy	True
	The Ministry of Education has a workplace policy relating to HIV/AIDS	True
	Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	True
4.	HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	Yes
	Is HIV/AIDS considered when making district level plans?	Yes
	Human Resources adaptation to the impacts of HIV/AIDS	
	Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	In Process
	An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted	True
	Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process
	Workplace HIV/AIDS programmes	
•	Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees:	Voo
	At the national level? At the district level?	Yes Yes
	For staff at education institutions?	Yes
•	Have guidelines for implementing universal precautions been developed for use by all staff?	In Process
•	Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS	Yes
	Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
	HIV/AIDS and the Curriculum	
•	Is there a life skills programme established in your education system at the following levels:	Voc
	Primary? Secondary?	Yes Yes
	Does the life skills programme consider issues relating to gender?	Yes
	Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
•	Has there been an orientation process for parents regarding life skills programmes in schools?	Yes
	Are HIV/AIDS materials available to all students within the tertiary sector?	Yes
	Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes
_	Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes
8.	Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education	In Process
	system?	
	Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels:	Yes
•	At the Primary level	Yes
•	At the Secondary level	Yes
	Partnership development in response to HIV/AIDS	
•	Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Yes
	Does the education sector have a shared strategy for the fight against AIDS?	Yes
	Research guiding the response to HIV/AIDS	
•	Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to	Yes
	HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?	Yes

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Selected Key Results for:	Spain		
UN Region: Western Europe	Prevalence: Low	Date Completed:	
1. Education SystemIs there a single education Ministry in your count Education)?		cation and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrink Ministry of Education HIV/AIDS structu 	ě ě		Growing
 At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic? 	ommittee or management unit that is	responsible for co-ordinating	No
 Are there staff at the national Ministry level who Do you have regional structures responsible for 		AIDS epidemic?	No n/a
3. Enabling Environment for an effective	response to HIV/AIDS	•	T
 You have regulations for schools and other educ The Ministry of Education has a specific HIV/AID 		sions and rees	True In Process
 The Ministry of Education has a workplace policy Other rules and regulations within the Ministry had HIV/AIDS 	y relating to HIV/AIDS	acts and implications of	In Process
 HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic 	nlan?		n/a
 Is HIV/AIDS considered when making district lev 	vel plans?		n/a
 Human Resources adaptation to the im Human resource policies have been amended to deployment of teachers away from their families' 	minimise vulnerability and susceptib	bility to HIV/AIDS (e.g.	n/a
An analysis of the impact of HIV/AIDS on demar conducted		the education sector has been	n/a
 Guidelines for teachers on dealing with HIV/AIDS 	S in schools have been developed		In Process
 Workplace HIV/AIDS programmes Does the Ministry/Department have an HIV/AIDS 	S awaronose programmo for all its on	anlovoos:	
At the national level? At the district level?	o awareness programme for all its en	трюуеесь.	In Process Yes
For staff at education institutions? • Have guidelines for implementing universal prec	autions have developed for use by a	ll ctaff?	Yes In Process
 Does the Ministry have a policy of non-discriminal employment and benefits for personnel affected 	ation with regard to recruitment, adva		Yes
 Do you enforce confidentiality of information abo HIV/AIDS and the Curriculum 	out Ministry employees affected by HI	V/AIDS?	Yes
 Is there a life skills programme established in yo Primary? 	ur education system at the following	levels:	Yes
Secondary?			Yes
Does the life skills programme consider iss Have orientation programmes been undertaken		IIV/AIDS?	Yes In Process
 Has there been an orientation process for paren Are HIV/AIDS materials available to all students 	ts regarding life skills programmes in		In Process
 Are HIV/AIDS and life skills integral components teachers? 	in the curriculum for the professiona	I preparation of all new	No
Have efforts been made to include out of school Recommendations of the Infected and A		areness efforts?	
 Responses aimes at the Infected and A Does the Ministry have a programme to address system? 		ole children in the education	No
 Is there currently a school feeding scheme in pla 		o following lovels	No
Are counseling services, by trained counsellors,At the Primary levelAt the Secondary level	avanable at 1110st OF all SCHOOLS AT THE	e ronowing revers:	Yes Yes
9. Partnership development in response t		within the education easter?	Voo
 Has an effort been made to identify possible par Does the education sector have a shared strateg 	gy for the fight against AIDS?	vithin the education sector?	Yes n/a
 10. Research guiding the response to HIV/. Has a research agenda been defined that prioriti HIV/AIDS within the education sector? 		e impacts of and response to	
Has any research been commissioned to inform	the education sector response to HIV	V/AIDS?	No response

Selected Key Results for: Sudan	
UN Region: North Africa & Middle East Prevalence: Medium Date Comp	pleted:
 1. Education System Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Hig Education)? 	TWO
 Is total enrolment in your schools growing, shrinking or remaining stable? Ministry of Education HIV/AIDS structures 	Growing
 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinate the response to the HIV/AIDS epidemic? 	ting Yes
 Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? 	No No
 3. Enabling Environment for an effective response to HIV/AIDS You have regulations for schools and other educational institutions in terms of admissions and fees 	False
The Ministry of Education has a specific HIV/AIDS policy	In Process
The Ministry of Education has a workplace policy relating to HIV/AIDS	False
Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS	False
HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	Yes
Is HIV/AIDS considered when making district level plans?	No
5. Human Resources adaptation to the impacts of HIV/AIDS	
 Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families) An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has 	False
conducted	II/d
Guidelines for teachers on dealing with HIV/AIDS in schools have been developed Workplace HIV/AIDS programmed.	In Process
 Workplace HIV/AIDS programmes Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: 	
At the district level?	In Process No
For staff at education institutions?	In Process
 Have guidelines for implementing universal precautions been developed for use by all staff? Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS 	No Yes
 Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? HIV/AIDS and the Curriculum 	Yes
Is there a life skills programme established in your education system at the following levels:	
Primary?	Yes
Secondary? Does the life skills programme consider issues relating to gender?	Yes Yes
Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	In Process
 Has there been an orientation process for parents regarding life skills programmes in schools? 	In Process
Are HIV/AIDS materials available to all students within the tertiary sector?	No
 Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers? 	Yes
Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? Page 1 and 1 affected and 1 affected and 2 affected.	Yes
 Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system? 	ion In Process
Is there currently a school feeding scheme in place?	Yes
 Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level At the Secondary level 	No No
9. Partnership development in response to HIV/AIDS	110
 Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education secto Does the education sector have a shared strategy for the fight against AIDS? 	or? Yes Yes
Does the education sector have a shared shared shared shared shared shared shared shared a shared shar	162
 Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response HIV/AIDS within the education sector? 	e to No
Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

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Selected Key Results for:	Surinam		
UN Region: Latin America	Prevalence: Low	Date Completed:	16 Apr 04
Education System Is there a single education Ministry in your counteducation)? Is total enrolment in your schools growing, shrining.		ation and Ministry of Higher	Single Growing
2. Ministry of Education HIV/AIDS structu	ires	and the few and and the steer	Growing
At the national level, do you have a dedicated co the response to the HIV/AIDS epidemic?		esponsible for co-ordinating	Yes
 Are there staff at the national Ministry level who Do you have regional structures responsible for 	implementing a response to the HIV/A	IDS epidemic?	No n/a
Enabling Environment for an effective You have regulations for schools and other educe The Ministry of Education has a credific LINVALE. The Ministry of Education has a credific LINVALE.	cational institutions in terms of admissi	ions and fees	True
 The Ministry of Education has a specific HIV/AIE The Ministry of Education has a workplace polic Other rules and regulations within the Ministry had HIV/AIDS 	y relating to HIV/AIDS	cts and implications of	False False False
4. HIV/AIDS Mainstreaming • Is there an education sector HIV/AIDS strategic	nlan?		n/a
Is HIV/AIDS considered when making district lev Human Resources adaptation to the im	vel plans?		n/a
Human resource policies have been amended to deployment of teachers away from their families	minimise vulnerability and susceptibi	lity to HIV/AIDS (e.g.	n/a
 An analysis of the impact of HIV/AIDS on demar conducted 		he education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDWorkplace HIV/AIDS programmes	S in schools have been developed		In Process
Does the Ministry/Department have an HIV/AIDS At the national level? At the district level? For staff at education institutions? Have guidelines for implementing universal prec			No No In Process In Process
Does the Ministry have a policy of non-discrimin employment and benefits for personnel affected	ation with regard to recruitment, advar		No
 Do you enforce confidentiality of information about HIV/AIDS and the Curriculum 		//AIDS?	No
 Is there a life skills programme established in yo Primary? Secondary? Does the life skills programme consider is: 		evels:	Yes Yes Yes
 Have orientation programmes been undertaken Has there been an orientation process for paren Are HIV/AIDS materials available to all students 	ts regarding life skills programmes in s		In Process In Process Yes
 Are HIV/AIDS and life skills integral components teachers? 		preparation of all new	No
 Have efforts been made to include out of school Responses aimes at the Infected and A 		reness efforts?	Yes
Does the Ministry have a programme to address system?		e children in the education	No
 Is there currently a school feeding scheme in pla Are counseling services, by trained counsellors, At the Primary level At the Secondary level 		following levels:	Yes No No
 9. Partnership development in response to Has an effort been made to identify possible par Does the education sector have a shared strate 	tners for the fight against HIV/AIDS wiggy for the fight against AIDS?	ithin the education sector?	Yes n/a
Research guiding the response to HIV/ Has a research agenda been defined that priorit HIV/AIDS within the advertise page 2.		impacts of and response to	No
HIV/AIDS within the education sector?Has any research been commissioned to inform	the education sector response to HIV	/AIDS?	No

Selected Key Results for:	Swaziland		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed:	10 Jun 04
1. Education System			
 Is there a single education Ministry in your count Education)? 	try, or two (e.g. Ministry of Basic Educ	ation and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrink 	king or remaining stable?		Shrinking
 Ministry of Education HIV/AIDS structu At the national level, do you have a dedicated conthe response to the HIV/AIDS epidemic? 		esponsible for co-ordinating	Yes
Are there staff at the national Ministry level who Do you have regional structures responsible for		JDS onidomic?	Yes Yes
3. Enabling Environment for an effective		aibs epidemic:	162
You have regulations for schools and other educe		ions and fees	True
The Ministry of Education has a specific HIV/AID			In Process
 The Ministry of Education has a workplace policy 			In Process
Other rules and regulations within the Ministry has HIV/AIDS	ave been reviewed in light of the impa	cts and implications of	True
4. HIV/AIDS Mainstreaming	mla m 2		Me
 Is there an education sector HIV/AIDS strategic Is HIV/AIDS considered when making district lev 			No No
5. Human Resources adaptation to the im	•		NO
Human resource policies have been amended to deployment of teachers away from their families.	minimise vulnerability and susceptibi	lity to HIV/AIDS (e.g.	False
 An analysis of the impact of HIV/AIDS on demar conducted 	nd and supply of human resources in t	he education sector has been	False
Guidelines for teachers on dealing with HIV/AIDS	S in schools have been developed		In Process
6. Workplace HIV/AIDS programmes			
 Does the Ministry/Department have an HIV/AIDS 	S awareness programme for all its em	ployees:	
At the national level?			In Process
At the district level? For staff at education institutions?			In Process In Process
Have guidelines for implementing universal prec	autions been developed for use by all	staff?	No
Does the Ministry have a policy of non-discriminal employment and benefits for personnel affected	ation with regard to recruitment, advar		Yes
 Do you enforce confidentiality of information about 		//AIDS?	No
7. HIV/AIDS and the Curriculum			
 Is there a life skills programme established in yo Primary? 	ur education system at the following le	evels:	Yes
Secondary?			Yes
Does the life skills programme consider iss		MAIDCO	Yes
 Have orientation programmes been undertaken Has there been an orientation process for paren 			Yes No
Are HIV/AIDS materials available to all students		SCHOOLS!	Yes
Are HIV/AIDS and life skills integral components teachers?		preparation of all new	Yes
Have efforts been made to include out of school	youths in life skills and HIV/AIDS awa	reness efforts?	No
8. Responses aimes at the Infected and A	Affected		
 Does the Ministry have a programme to address system? 		e children in the education	No
Is there currently a school feeding scheme in plan		full accidental to the	No
Are counseling services, by trained counsellors,At the Primary level	available at most or all schools at the	ioliowing levels:	No
At the Secondary level			No No
9. Partnership development in response t	to HIV/AIDS		
Has an effort been made to identify possible par		ithin the education sector?	Yes
 Does the education sector have a shared strateg 			Yes
10. Research guiding the response to HIV/			
Has a research agenda been defined that prioriti	ises gaps in knowledge relating to the	impacts of and response to	No
HIV/AIDS within the education sector?Has any research been commissioned to inform	the education sector response to HIV	/AIDS?	Yes

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Selected Key Results for: Thailand	
UN Region: South & South East Asia Prevalence: Medium Date Completed:	
 1. Education System Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Education)? Is total enrolment in your schools growing, shrinking or remaining stable? 	Single Growing
 Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating 	
the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	Yes
 Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? Enabling Environment for an effective response to HIV/AIDS 	Yes
 You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy 	True True
 The Ministry of Education has a workplace policy relating to HIV/AIDS Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS 	False False
 4. HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plans? 	Yes No
 Human Resources adaptation to the impacts of HIV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families) 	False
 An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been conducted 	n/a
 Guidelines for teachers on dealing with HIV/AIDS in schools have been developed Workplace HIV/AIDS programmes 	In Process
 Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? At the district level? For staff at education institutions? 	No No Yes
 Have guidelines for implementing universal precautions been developed for use by all staff? Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS 	No Yes
 Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? HIV/AIDS and the Curriculum 	Yes
 Is there a life skills programme established in your education system at the following levels: Primary? Secondary? 	No No
Does the life skills programme consider issues relating to gender? • Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	No In Process
 Has there been an orientation process for parents regarding life skills programmes in schools? Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new 	No Yes
teachers? Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	No Yes
 8. Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education 	
system? • Is there currently a school feeding scheme in place?	Yes Yes
 Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level At the Secondary level 	Yes Yes
 Partnership development in response to HIV/AIDS Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Does the education sector have a shared strategy for the fight against AIDS? 	Yes Yes
 10. Research guiding the response to HIV/AIDS Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector? 	No
Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

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S	elected Key Results for:	Trinidad and Toba	ago	
U	N Region: Caribbean	Prevalence: Medium	Date Completed:	
1.	Education System			
	Is there a single education Ministry in your country Education)?		and Ministry of Higher	Two
	Is total enrolment in your schools growing, shrinki			Shrinking
	Ministry of Education HIV/AIDS structure. At the national level, do you have a dedicated control the representation of the representation.		nsible for co-ordinating	Yes
	the response to the HIV/AIDS epidemic? Are there staff at the national Ministry level who o	nly deal with HIV/AIDS issues?		No
	Do you have regional structures responsible for in		epidemic?	Yes
	Enabling Environment for an effective re			
	You have regulations for schools and other educa		and fees	False
	The Ministry of Education has a specific HIV/AIDS The Ministry of Education has a workplace policy			In Process In Process
	Other rules and regulations within the Ministry have		nd implications of	
	HIV/AIDS			False
4.	HIV/AIDS Mainstreaming			
	Is there an education sector HIV/AIDS strategic p			No
	Is HIV/AIDS considered when making district leve	•		No
	Human Resources adaptation to the imp Human resource policies have been amended to		η ΑΙΝ/ΛΙΗ α	
	deployment of teachers away from their families) An analysis of the impact of HIV/AIDS on demand	, ,		False
•	conducted	a and supply of numan resources in the e	uucalion sectoi nas been	n/a
•	Guidelines for teachers on dealing with HIV/AIDS	in schools have been developed		In Process
	Workplace HIV/AIDS programmes			
•	Does the Ministry/Department have an HIV/AIDS	awareness programme for all its employe	ees:	
	At the national level? At the district level?			No No
	For staff at education institutions?			No
•	Have guidelines for implementing universal preca	utions been developed for use by all staff	?	No
	Does the Ministry have a policy of non-discriminal employment and benefits for personnel affected by	tion with regard to recruitment, advancem		Yes
	Do you enforce confidentiality of information about	it Ministry employees affected by HIV/AID	S?	Yes
	HIV/AIDS and the Curriculum			
•	Is there a life skills programme established in you Primary?	r education system at the following levels		Yes
	Secondary?			Yes
	Does the life skills programme consider issu	ues relating to gender?		Yes
•	Have orientation programmes been undertaken for		DS?	In Process
	Has there been an orientation process for parents		ols?	No
	Are HIV/AIDS materials available to all students w		orotion of all nave	Yes
•	Are HIV/AIDS and life skills integral components i teachers?	n the curriculum for the professional prep	aration of all new	Yes
•	Have efforts been made to include out of school y	ouths in life skills and HIV/AIDS awarene	ess efforts?	Yes
8.	Responses aimes at the Infected and Af	fected		
	Does the Ministry have a programme to address t system?		ldren in the education	No
	Is there currently a school feeding scheme in place			Yes
	Are counseling services, by trained counsellors, a	vailable at most or all schools at the follo	wing levels:	N-
	At the Primary level At the Secondary level			No No
	Partnership development in response to	HIV/AIDS		INO
	Has an effort been made to identify possible partr		the education sector?	Yes
	Does the education sector have a shared strategy			Yes
10.	Research guiding the response to HIV/A	IDS		
•	Has a research agenda been defined that prioritis	ses gaps in knowledge relating to the impa	acts of and response to	No
	HIV/AIDS within the education sector?	ho adjustion easter response to LINUALD	\$2	
•	Has any research been commissioned to inform the	ne education sector response to HIV/AID	5!	No

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Selected Key Results for: Turkey	
UN Region: North Africa & Middle East Prevalence: Low Date Comple	eted: 15 Jun 04
1. Education System	
 Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Highe Education)? 	Sirigle
 Is total enrolment in your schools growing, shrinking or remaining stable? Ministry of Education HIV/AIDS structures 	Growing
 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic? 	g No
Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? Payor have regional structures recognized for implementing a regreene to the LIV/AIDS epidemic?	No
 Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? Enabling Environment for an effective response to HIV/AIDS 	n/a
 You have regulations for schools and other educational institutions in terms of admissions and fees 	True
 The Ministry of Education has a specific HIV/AIDS policy The Ministry of Education has a workplace policy relating to HIV/AIDS 	True False
 The Ministry of Education has a workplace policy relating to FitVAIDS Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of 	
HIV/AIDS	False
HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic plan?	n/a
Is there an education sector firty/AIDS strategic plans? Is HIV/AIDS considered when making district level plans?	n/a
5. Human Resources adaptation to the impacts of HIV/AIDS	
 Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families) 	n/a
 An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has be conducted 	een n/a
Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	False
6. Workplace HIV/AIDS programmes	
 Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? At the district level? 	No No
For staff at education institutions?	No
 Have guidelines for implementing universal precautions been developed for use by all staff? Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS 	Yes No
Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes
7. HIV/AIDS and the Curriculum	
 Is there a life skills programme established in your education system at the following levels: Primary? 	
Secondary? Does the life skills programme consider issues relating to gender?	No
Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
Has there been an orientation process for parents regarding life skills programmes in schools? Are LIV/ADS materials available to all students within the testions costor?	Yes
 Are HIV/AIDS materials available to all students within the tertiary sector? Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers? 	No Yes
 Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? 	Yes
8. Responses aimes at the Infected and Affected	
 Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system? 	IVU
 Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available at most or all schools at the following levels: 	Yes
 Are counselling services, by trained counsellors, available at most of all scribors at the following levels. At the Primary level 	Yes
At the Secondary level	Yes
 9. Partnership development in response to HIV/AIDS Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? 	Yes
Does the education sector have a shared strategy for the fight against AIDS?	n/a
 10. Research guiding the response to HIV/AIDS Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education context. 	O Yes
HIV/AIDS within the education sector?Has any research been commissioned to inform the education sector response to HIV/AIDS?	No
- Tida dirij reasourem been commissioned to milenin the education acctor reaponate to mileniae;	140

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Selected Key Results for:	Uganda		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed:	26 Apr 04
1. Education System			
 Is there a single education Ministry in your coun Education)? 		ition and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrin 			Growing
 Ministry of Education HIV/AIDS structu At the national level, do you have a dedicated of the response to the HIV/AIDS epidemic? 		sponsible for co-ordinating	Yes
 Are there staff at the national Ministry level who 	only deal with HIV/AIDS issues?		Yes
 Do you have regional structures responsible for 		DS epidemic?	Yes
3. Enabling Environment for an effective			
You have regulations for schools and other edu		ons and fees	True
The Ministry of Education has a specific HIV/AII The Ministry of Education has a guardeness policy The Ministry of Education has a specific HIV/AII The Ministry of HIV/AII The Ministr			In Process
The Ministry of Education has a workplace policOther rules and regulations within the Ministry h		ts and implications of	In Process
HIV/AIDS	lave been reviewed in light of the impac	is and implications of	True
4. HIV/AIDS Mainstreaming			
Is there an education sector HIV/AIDS strategic	plan?		Yes
 Is HIV/AIDS considered when making district leverage 	vel plans?		Yes
5. Human Resources adaptation to the in			
 Human resource policies have been amended to deployment of teachers away from their families 	5)	, ,	In Process
 An analysis of the impact of HIV/AIDS on demandent conducted 		e education sector has been	False
Guidelines for teachers on dealing with HIV/AID	S in schools have been developed		In Process
6. Workplace HIV/AIDS programmes			
 Does the Ministry/Department have an HIV/AID: At the national level? 	S awareness programme for all its emp	loyees:	In Process
At the district level?			In Process
For staff at education institutions?			In Process
 Have guidelines for implementing universal pred 	cautions been developed for use by all s	staff?	In Process
 Does the Ministry have a policy of non-discrimin employment and benefits for personnel affected 	by HIV/AIDS		Yes
 Do you enforce confidentiality of information about 	out Ministry employees affected by HIV/	'AIDS?	Yes
7. HIV/AIDS and the Curriculum			
Is there a life skills programme established in your primary?	our education system at the following lev	vels:	Voc
Primary? Secondary?			Yes No
Does the life skills programme consider is	sues relating to gender?		Yes
Have orientation programmes been undertaken		//AIDS?	In Process
 Has there been an orientation process for parer 	nts regarding life skills programmes in so		No
Are HIV/AIDS materials available to all students			No
 Are HIV/AIDS and life skills integral components teachers? 	·	•	No
Have efforts been made to include out of school	•	eness efforts?	No
8. Responses aimes at the Infected and A		abildran in the early 1!	
 Does the Ministry have a programme to address system? 		children in the education	No
 Is there currently a school feeding scheme in pla Are counseling services, by trained counsellors, 		following levels:	No
 Are counseling services, by trained counsellors, At the Primary level 	, available at Hibst of all Schools at the f	ollowing levels.	No
At the Frinary level At the Secondary level			No
9. Partnership development in response	to HIV/AIDS		
Has an effort been made to identify possible par		hin the education sector?	No
 Does the education sector have a shared strate 	gy for the fight against AIDS?		Yes
10. Research guiding the response to HIV			
Has a research agenda been defined that priorit	tises gaps in knowledge relating to the i	mpacts of and response to	No
HIV/AIDS within the education sector?	the adjustion coster response to LINII	NIDCO	
 Has any research been commissioned to inform 	itne education sector response to HIV/	AID2.	Yes

Selected Key Results for: Ukraine	
UN Region: Eastern Europe & Central Asia Prevalence: Low Da	ate Completed: 5 Aug 04
1. Education System	
 Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Mini Education)? 	Single
Is total enrolment in your schools growing, shrinking or remaining stable?	Shrinking
 Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee or management unit that is responsible for the response to the HIV/AIDS epidemic? 	co-ordinating Yes
 Are there staff at the national Ministry level who <u>only</u> deal with HIV/AIDS issues? 	No
 Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic 	? n/a
3. Enabling Environment for an effective response to HIV/AIDS	
 You have regulations for schools and other educational institutions in terms of admissions and fees The Ministry of Education has a specific HIV/AIDS policy 	True True
The Ministry of Education has a specific HV/AIDS policy The Ministry of Education has a workplace policy relating to HIV/AIDS	In Process
 Other rules and regulations within the Ministry have been reviewed in light of the impacts and implication. 	
4. HIV/AIDS Mainstreaming	
Is there an education sector HIV/AIDS strategic plan?Is HIV/AIDS considered when making district level plans?	n/a n/a
5. Human Resources adaptation to the impacts of HIV/AIDS	II/a
 Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AID deployment of teachers away from their families) 	OS (e.g. n/a
 An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sconducted 	sector has been n/a
Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	True
6. Workplace HIV/AIDS programmes	
 Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? At the district level? For staff at education institutions? 	In Process In Process In Process
Have guidelines for implementing universal precautions been developed for use by all staff?	No
 Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, conti employment and benefits for personnel affected by HIV/AIDS 	inued Yes
 Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? HIV/AIDS and the Curriculum 	Yes
Is there a life skills programme established in your education system at the following levels:	
Primary?	Yes
Secondary? Does the life skills programme consider issues relating to gender?	Yes Yes
Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS?	Yes
 Has there been an orientation process for parents regarding life skills programmes in schools? 	Yes
Are HIV/AIDS materials available to all students within the tertiary sector? And HIV/AIDS and life with interest and account to the control of the con	Yes
 Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of teachers? 	res
Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts Programmes at the Infected and Affected.	? Yes
 Responses aimes at the Infected and Affected Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the system? 	ne education Yes
Is there currently a school feeding scheme in place?	Yes
 Are counseling services, by trained counsellors, available at most or all schools at the following leve 	ls:
At the Primary levelAt the Secondary level	Yes Yes
Partnership development in response to HIV/AIDS	res
 Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education 	ation sector? Yes
Does the education sector have a shared strategy for the fight against AIDS?	n/a
10. Research guiding the response to HIV/AIDS	
 Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of an LINVANDS within the education sector? 	d response to No
HIV/AIDS within the education sector?Has any research been commissioned to inform the education sector response to HIV/AIDS?	No

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Selected Key Results for: United Kingdom **UN Region: Western Europe Prevalence: Low** Date Completed: 28 Jul 04 1. Education System • Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher **Single** Education)? • Is total enrolment in your schools growing, shrinking or remaining stable? **Stable** 2. Ministry of Education HIV/AIDS structures · At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating Yes the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who only deal with HIV/AIDS issues? Yes Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? n/a 3. Enabling Environment for an effective response to HIV/AIDS · You have regulations for schools and other educational institutions in terms of admissions and fees True • The Ministry of Education has a specific HIV/AIDS policy **False** The Ministry of Education has a workplace policy relating to HIV/AIDS True Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of True HIV/AIDS 4. HIV/AIDS Mainstreaming • Is there an education sector HIV/AIDS strategic plan? n/a • Is HIV/AIDS considered when making district level plans? n/a 5. Human Resources adaptation to the impacts of HIV/AIDS • Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. n/a deployment of teachers away from their families) • An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been n/a conducted • Guidelines for teachers on dealing with HIV/AIDS in schools have been developed True 6. Workplace HIV/AIDS programmes • Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? No At the district level? No For staff at education institutions? No • Have guidelines for implementing universal precautions been developed for use by all staff? No • Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued Yes employment and benefits for personnel affected by HIV/AIDS • Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? Yes 7. HIV/AIDS and the Curriculum • Is there a life skills programme established in your education system at the following levels: Primary? Yes Secondary? Yes Does the life skills programme consider issues relating to gender? Yes Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS? No Has there been an orientation process for parents regarding life skills programmes in schools? No • Are HIV/AIDS materials available to all students within the tertiary sector? No · Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new Yes teachers? • Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? Yes 8. Responses aimes at the Infected and Affected • Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education Yes • Is there currently a school feeding scheme in place? Yes • Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level No At the Secondary level No 9. Partnership development in response to HIV/AIDS • Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Yes • Does the education sector have a shared strategy for the fight against AIDS? n/a 10. Research guiding the response to HIV/AIDS · Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to Yes HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?

Please note that this is an extract of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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Selected Key Results for: United Republic of Tanzania **UN Region: Sub-Saharan Africa** Date Completed: 10 May 04 Prevalence: High 1. Education System • Is there a single education Ministry in your country, or two (e.g. Ministry of Basic Education and Ministry of Higher Two Education)? • Is total enrolment in your schools growing, shrinking or remaining stable? Growing 2. Ministry of Education HIV/AIDS structures · At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating Yes the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who only deal with HIV/AIDS issues? Yes Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? Yes 3. Enabling Environment for an effective response to HIV/AIDS · You have regulations for schools and other educational institutions in terms of admissions and fees True • The Ministry of Education has a specific HIV/AIDS policy **False** The Ministry of Education has a workplace policy relating to HIV/AIDS **False** Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of **False HIV/AIDS** 4. HIV/AIDS Mainstreaming • Is there an education sector HIV/AIDS strategic plan? Yes • Is HIV/AIDS considered when making district level plans? Yes 5. Human Resources adaptation to the impacts of HIV/AIDS Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. False deployment of teachers away from their families) • An analysis of the impact of HIV/AIDS on demand and supply of human resources in the education sector has been **False** conducted • Guidelines for teachers on dealing with HIV/AIDS in schools have been developed True 6. Workplace HIV/AIDS programmes • Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees: At the national level? Yes At the district level? Yes For staff at education institutions? Yes • Have guidelines for implementing universal precautions been developed for use by all staff? No • Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued No employment and benefits for personnel affected by HIV/AIDS • Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS? Yes 7. HIV/AIDS and the Curriculum • Is there a life skills programme established in your education system at the following levels: Primary? Yes Secondary? Yes Does the life skills programme consider issues relating to gender? Yes Have orientation programmes been undertaken for teachers in school life skills and HIV/AIDS? Yes Has there been an orientation process for parents regarding life skills programmes in schools? No • Are HIV/AIDS materials available to all students within the tertiary sector? · Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new No response teachers? • Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts? 8. Responses aimes at the Infected and Affected • Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education In Process • Is there currently a school feeding scheme in place? Yes • Are counseling services, by trained counsellors, available at most or all schools at the following levels: At the Primary level No At the Secondary level No 9. Partnership development in response to HIV/AIDS • Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? Yes • Does the education sector have a shared strategy for the fight against AIDS? Yes 10. Research guiding the response to HIV/AIDS · Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to Yes HIV/AIDS within the education sector? Has any research been commissioned to inform the education sector response to HIV/AIDS?

Please note that this is an extract of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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Selected Key Results for:	Uruguay		
UN Region: Latin America	Prevalence: Low	Date Completed:	17 Sep 04
1. Education System			
 Is there a single education Ministry in your countr Education)? 		cation and Ministry of Higher	Single
Is total enrolment in your schools growing, shrink	•		
 Ministry of Education HIV/AIDS structur At the national level, do you have a dedicated cor 		rosponsible for co ordinating	
the response to the HIV/AIDS epidemic?	minutee of management unit that is	responsible for co-ordinating	Yes
 Are there staff at the national Ministry level who 			Yes
 Do you have regional structures responsible for in 		AIDS epidemic?	n/a
3. Enabling Environment for an effective r		sions and food	Truc
 You have regulations for schools and other education The Ministry of Education has a specific HIV/AID: 		Sions and iees	True In Process
The Ministry of Education has a workplace policy			In Process
 Other rules and regulations within the Ministry ha 		acts and implications of	True
HIV/AIDS			Truc
HIV/AIDS Mainstreaming Is there an education sector HIV/AIDS strategic p	slan?		n/a
Is HIV/AIDS considered when making district level	el plans?		n/a
5. Human Resources adaptation to the imp			
 Human resource policies have been amended to deployment of teachers away from their families) 		oility to HIV/AIDS (e.g.	n/a
 An analysis of the impact of HIV/AIDS on demand conducted 	d and supply of human resources in	the education sector has been	n/a
 Guidelines for teachers on dealing with HIV/AIDS 	in schools have been developed		True
6. Workplace HIV/AIDS programmes	6 11 11		
Does the Ministry/Department have an HIV/AIDS At the national level? At the district level? For the first level is institutions?	awareness programme for all its en	nployees:	No No
For staff at education institutions? • Have guidelines for implementing universal preca	autions been developed for use by a	II staff?	In Process Yes
Does the Ministry have a policy of non-discrimina employment and benefits for personnel affected by	ition with regard to recruitment, adva		Yes
Do you enforce confidentiality of information about		V/AIDS?	Yes
7. HIV/AIDS and the Curriculum			
 Is there a life skills programme established in you Primary? Secondary? 	ur education system at the following	levels:	Yes Yes
Does the life skills programme consider issu			Yes
Have orientation programmes been undertaken for the state of the			In Process
 Has there been an orientation process for parents Are HIV/AIDS materials available to all students v 		SCN00IS?	In Process Yes
Are HIV/AIDS materials available to all students to all students teachers? Are HIV/AIDS and life skills integral components teachers?		l preparation of all new	No
Have efforts been made to include out of school y	youths in life skills and HIV/AIDS aw	areness efforts?	No
Responses aimes at the Infected and Af Does the Ministry have a programme to address	ffected		New
system?			No response
Is there currently a school feeding scheme in place.			Yes
 Are counseling services, by trained counsellors, a At the Primary level At the Secondary level 	available at most or all schools at the	e following levels:	No response
9. Partnership development in response to	o HIV/AIDS		110 100001130
Has an effort been made to identify possible particle. Does the education sector have a shared strategy.	ners for the fight against HIV/AIDS v	vithin the education sector?	Yes n/a
10. Research guiding the response to HIV/A			
Has a research agenda been defined that prioritis HIV/AIDS within the education sector?		e impacts of and response to	No
Has any research been commissioned to inform to	the education sector response to HIV	V/AIDS?	No

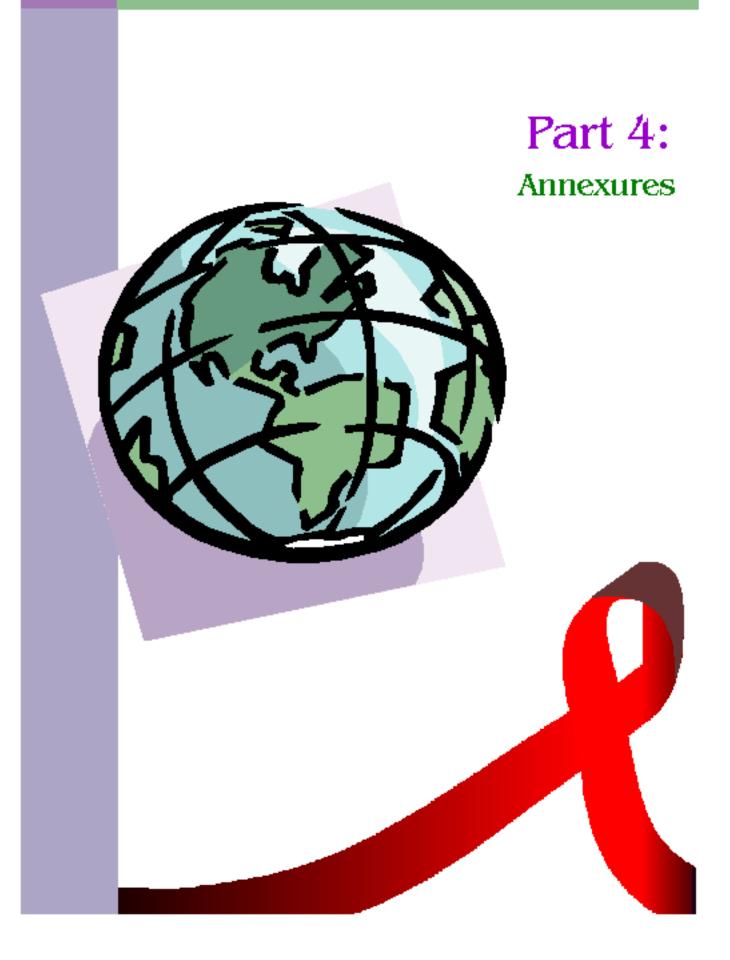
Please note that this is an <u>extract</u> of responses to the Education Sector Global HIV/AIDS Readiness Assessment Survey

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Selected Key Results for: Vi	ietnam		
UN Region: South & South East Asia	Prevalence: Low	Date Completed:	28 Apr 04
1. Education System			
 Is there a single education Ministry in your country, or t Education)? 		ation and Ministry of Higher	Single
 Is total enrolment in your schools growing, shrinking or 	remaining stable?		Growing
 Ministry of Education HIV/AIDS structures At the national level, do you have a dedicated committee the response to the HIV/AIDS epidemic? 	ee or management unit that is re	esponsible for co-ordinating	Yes
 Are there staff at the national Ministry level who <u>only</u> de 			Yes
Do you have regional structures responsible for implem	• .	AIDS epidemic?	n/a
 Enabling Environment for an effective respo You have regulations for schools and other educational 		ions and fees	True
The Ministry of Education has a specific HIV/AIDS police		ions una rees	True
 The Ministry of Education has a workplace policy relatir 	ng to HIV/AIDS		True
Other rules and regulations within the Ministry have been HIV/AIDS	en reviewed in light of the impa	cts and implications of	True
4. HIV/AIDS Mainstreaming			n/a
 Is there an education sector HIV/AIDS strategic plan? Is HIV/AIDS considered when making district level plan 	ς?		n/a n/a
5. Human Resources adaptation to the impacts			Tira
 Human resource policies have been amended to minim deployment of teachers away from their families) 	ise vulnerability and susceptibi	, ,	n/a
 An analysis of the impact of HIV/AIDS on demand and conducted 	supply of human resources in t	he education sector has been	n/a
Guidelines for teachers on dealing with HIV/AIDS in scl	nools have been developed		True
6. Workplace HIV/AIDS programmes			
Does the Ministry/Department have an HIV/AIDS aware At the patient level?	eness programme for all its emp	ployees:	Van
At the national level? At the district level?			Yes Yes
For staff at education institutions?			Yes
 Have guidelines for implementing universal precautions 	been developed for use by all	staff?	Yes
 Does the Ministry have a policy of non-discrimination w employment and benefits for personnel affected by HIV 	/AIDS		Yes
Do you enforce confidentiality of information about Mini	stry employees affected by HIV	//AIDS?	Yes
7. HIV/AIDS and the Curriculum	cation system at the following le	ovole:	
 Is there a life skills programme established in your educe Primary? 	Lation system at the following is	evels.	Yes
Secondary?			Yes
Does the life skills programme consider issues re	lating to gender?		Yes
 Have orientation programmes been undertaken for tead 			Yes
Has there been an orientation process for parents rega		schools?	Yes
 Are HIV/AIDS materials available to all students within Are HIV/AIDS and life skills integral components in the 		preparation of all new	Yes
teachers?	cumculum for the professional	preparation of all new	Yes
Have efforts been made to include out of school youths		areness efforts?	Yes
8. Responses aimes at the Infected and Affected			
 Does the Ministry have a programme to address the ne system? 	eds of orphaned and vulnerabl	e children in the education	Yes
 Is there currently a school feeding scheme in place? Are counseling services, by trained counsellors, available 	ale at most or all schools at the	following levels:	Yes
 Are counselling services, by trained counsellors, available At the Primary level 	ole at most of all scribors at the	Tollowing levels.	No
At the Secondary level			No
9. Partnership development in response to HIV			
Has an effort been made to identify possible partners for		ithin the education sector?	Yes
Does the education sector have a shared strategy for the sector h	ne tight against AIDS?		n/a
10. Research guiding the response to HIV/AIDS	ne in knowledge relating to the	impacts of and response to	
 Has a research agenda been defined that prioritises ga HIV/AIDS within the education sector? 	ps in knowledge relating to the	impacts of and response to	Yes
Has any research been commissioned to inform the ed	ucation sector response to HIV	//AIDS?	Yes

Selected Key Results for:	Zambia		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed:	1 Apr 04
 1. Education System Is there a single education Ministry in your count Education)? Is total enrolment in your schools growing, shrink 		ation and Ministry of Higher	Single Growing
Ministry of Education HIV/AIDS structure At the national level, do you have a dedicated co	res	esponsible for co-ordinating	Yes
the response to the HIV/AIDS epidemic? • Are there staff at the national Ministry level who are the properties of the HIV/AIDS epidemic?		IDC anidomic?	Yes
 Do you have regional structures responsible for i Enabling Environment for an effective r You have regulations for schools and other educ 	esponse to HIV/AIDS	•	Yes
 The Ministry of Education has a specific HIV/AID The Ministry of Education has a workplace policy Other rules and regulations within the Ministry has 	S policy relating to HIV/AIDS		In Process In Process True
HIV/AIDS 4. HIV/AIDS Mainstreaming			
 Is there an education sector HIV/AIDS strategic p Is HIV/AIDS considered when making district lev Human Resources adaptation to the im 	el plans?		Yes Yes
 Human resources adaptation to the Im Human resource policies have been amended to deployment of teachers away from their families) 	minimise vulnerability and susceptibi	lity to HIV/AIDS (e.g.	In Process
An analysis of the impact of HIV/AIDS on deman conducted		he education sector has been	True
Guidelines for teachers on dealing with HIV/AIDS6. Workplace HIV/AIDS programmes	S in schools have been developed		True
Does the Ministry/Department have an HIV/AIDS At the national level? At the district level? For other throughing institutions?	s awareness programme for all its emp	oloyees:	Yes Yes
 For staff at education institutions? Have guidelines for implementing universal precase. Does the Ministry have a policy of non-discriminal employment and benefits for personnel affected. 	ation with regard to recruitment, advar		Yes In Process Yes
 Do you enforce confidentiality of information abo HIV/AIDS and the Curriculum 	ut Ministry employees affected by HIV		Yes
 Is there a life skills programme established in you Primary? Secondary? 	ur education system at the following le	evels:	Yes No
Does the life skills programme consider iss Have orientation programmes been undertaken f Has there been an orientation process for parent	for teachers in school life skills and HI		Yes Yes Yes
 Are HIV/AIDS materials available to all students Are HIV/AIDS and life skills integral components 	within the tertiary sector?		No
teachers? • Have efforts been made to include out of school	youths in life skills and HIV/AIDS awa		Yes Yes
 Responses aimes at the Infected and A Does the Ministry have a programme to address system? 		e children in the education	Yes
 Is there currently a school feeding scheme in pla Are counseling services, by trained counsellors, At the Primary level At the Secondary level 		following levels:	Yes Yes No
9. Partnership development in response t Has an effort been made to identify possible part Does the education sector have a shared strategen	ners for the fight against HIV/AIDS wi	thin the education sector?	Yes Yes
10. Research guiding the response to HIV/AHas a research agenda been defined that prioriti	AIDS	impacts of and response to	Yes
HIV/AIDS within the education sector?Has any research been commissioned to inform	the education sector response to HIV	/AIDS?	Yes

Selected Key Results for	Zimbabwe		
UN Region: Sub-Saharan Africa	Prevalence: High	Date Completed: 7	7 May 04
I. Education System			
 Is there a single education Ministry in your cou Education)? 		ition and Ministry of Higher	Two
Is total enrolment in your schools growing, shr			Stable
 Ministry of Education HIV/AIDS struct At the national level, do you have a dedicated the response to the HIV/AIDS epidemic? 		sponsible for co-ordinating	Yes
 Are there staff at the national Ministry level wh 	o only deal with HIV/AIDS issues?		Yes
Do you have regional structures responsible for		DS epidemic?	Yes
B. Enabling Environment for an effective			_
 You have regulations for schools and other ed The Ministry of Education has a specific HIV/A 		ons and fees	True False
 The Ministry of Education has a specific HIV/A The Ministry of Education has a workplace pol 			False
Other rules and regulations within the Ministry		ts and implications of	
HIV/AIDS	g		True
I. HIV/AIDS Mainstreaming			
Is there an education sector HIV/AIDS strategic			Yes
Is HIV/AIDS considered when making district I	•		Yes
 Human Resources adaptation to the i Human resource policies have been amended deployment of teachers away from their familie 	to minimise vulnerability and susceptibili	ity to HIV/AIDS (e.g.	True
An analysis of the impact of HIV/AIDS on dem conducted		ne education sector has been	True
Guidelines for teachers on dealing with HIV/AI	DS in schools have been developed		False
. Workplace HIV/AIDS programmes			
Does the Ministry/Department have an HIV/AII At the potional level?	DS awareness programme for all its emp	loyees:	Voc
At the national level? At the district level?			Yes Yes
For staff at education institutions?			Yes
Have guidelines for implementing universal pro	ecautions been developed for use by all s	staff?	No
 Does the Ministry have a policy of non-discrim employment and benefits for personnel affecte 	ination with regard to recruitment, advanged by HIV/AIDS	cement, continued	Yes
Do you enforce confidentiality of information at the County of the	bout Ministry employees affected by HIV	/AIDS?	Yes
 HIV/AIDS and the Curriculum Is there a life skills programme established in v 	vour education system at the following le	vols.	
Primary?	your education system at the following le	vois.	Yes
Secondary?			Yes
Does the life skills programme consider			Yes
Have orientation programmes been undertake			Yes
Has there been an orientation process for pare Are LINVAIDS materials available to all students.		chools?	Yes
 Are HIV/AIDS materials available to all studen Are HIV/AIDS and life skills integral componer 		preparation of all new	No
teachers?	ns in the cumedium for the professional p	oreparation of all new	Yes
Have efforts been made to include out of scho	ol youths in life skills and HIV/AIDS awar	reness efforts?	Yes
8. Responses aimes at the Infected and	Affected		
 Does the Ministry have a programme to addre system? 	·	children in the education	Yes
Is there currently a school feeding scheme in p		iallauda a lauda	Yes
Are counseling services, by trained counsellorAt the Primary level	s, available at most or all schools at the f	oliowing levels:	No
At the Secondary level			No
9. Partnership development in response	to HIV/AIDS		
Has an effort been made to identify possible p		hin the education sector?	Yes
Does the education sector have a shared strat	0, 0		Yes
0. Research guiding the response to HIV			
Has a research agenda been defined that prio WADS within the education costs?	ritises gaps in knowledge relating to the i	mpacts of and response to	Yes
HIV/AIDS within the education sector?	m the education sector response to HIV/	NIDCO	Yes





Countries that responded

Seventy one countries responded to the Global HIV/AIDS Readiness Survey by the end of November 2004. The alphabetical listing of these countries, including their prevalence categorisation and UN Region to which they are assigned are provided below:

Country	Prevalence	UN Region
Argentina	Low	Latin America
Armenia	Low	Eastern Europe & Central Asia
Barbados	Medium	Caribbean
Belarus	Low	Eastern Europe & Central Asia
Benin	Medium	Sub-Saharan Africa
Bolivia	Low	Latin America
Botswana	High	Sub-Saharan Africa
Brazil	Low	Latin America
Burkina Faso	High	Sub-Saharan Africa
Burundi	High	Sub-Saharan Africa
Cambodia	Medium	South & South East Asia
Central African Republic	High	Sub-Saharan Africa
Chad	Medium	Sub-Saharan Africa
China	Low	East Asia & Pacific
Colombia	Low	Latin America
Congo	High	Sub-Saharan Africa
Costa Rica	Low	Latin America
Cote d'Ivoire	High	Sub-Saharan Africa
Cyprus	Low	North Africa & Middle East
Egypt	Low	North Africa & Middle East
Equatorial Guinea	Medium	Sub-Saharan Africa
Estonia	Low	Eastern Europe & Central Asia
Ethiopia	High	Sub-Saharan Africa
Gabon	Medium	Sub-Saharan Africa
Ghana	Medium	Sub-Saharan Africa
Guinea	Medium	Sub-Saharan Africa
Guyana	Medium	Latin America
Iran (Islamic Republic of)	Low	South & South East Asia

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Country	Prevalence	UN Region
Israel	Low	North Africa & Middle East
Italy	Low	Western Europe
Jamaica	Low	Caribbean
Kenya	High	Sub-Saharan Africa
Kuwait	Low	North Africa & Middle East
Latvia	Low	Eastern Europe & Central Asia
Lesotho	High	Sub-Saharan Africa
Liberia	Medium	Sub-Saharan Africa
Madagascar	Low	Sub-Saharan Africa
Malawi	High	Sub-Saharan Africa
Mali	Medium	Sub-Saharan Africa
Malta	Low	Western Europe
Mexico	Low	Latin America
Moldova	Low	Eastern Europe & Central Asia
Mozambique	High	Sub-Saharan Africa
Myanmar	Low	South & South East Asia
Namibia	High	Sub-Saharan Africa
Nicaragua	Low	Latin America
Niger	Low	Sub-Saharan Africa
Nigeria	Medium	Sub-Saharan Africa
Papua New Guinea	Low	East Asia & Pacific
Paraguay	Low	Latin America
Peru	Low	Latin America
Russian Federation	Low	Eastern Europe & Central Asia
Rwanda	High	Sub-Saharan Africa
Scotland	Low	Western Europe
Sierra Leone	High	Sub-Saharan Africa
South Africa	High	Sub-Saharan Africa
Spain	Low	Western Europe
Sudan	Medium	North Africa & Middle East
Surinam	Low	Latin America
Swaziland	High	Sub-Saharan Africa
Thailand	Medium	South & South East Asia
Trinidad and Tobago	Medium	Caribbean
Turkey	Low	North Africa & Middle East
Uganda	High	Sub-Saharan Africa
Ukraine	Low	Eastern Europe & Central Asia
United Kingdom	Low	Western Europe
Tanzania	High	Sub-Saharan Africa
Uruguay	Low	Latin America

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Global HIV/AIDS Readiness Survey: Annexures

Country	Prevalence	UN Region
Vietnam	Low	South & South East Asia
Zambia	High	Sub-Saharan Africa
Zimbabwe	High	Sub-Saharan Africa

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Completed by (Country):	Date:				
Individuals present during completion	Position or Responsibility	Contact Telephone and Emai address			
Mark Yes or No/True or False using the mouse. For those questions that require you to enter information - click on the box shown and enter the information required.					
Refer to the Guide to Completing the Survey if you need further details or clarification on the questions. Some questions also have a comment with supporting information attached - this is shown by a small red triangle in the upper right corner next to the question - point to this with the mouse to display the information.					
Save the completed survey as your country name (e.g. Gabon) and embe most grateful if you could ensure that the survey is completed and					
Please ensure that the full name and title of a senior official who is empowered to sign on behalf of the Ministry is included on Page 1 of this form. Please arrange to print out a hard copy of the completed survey form, ensure that the official concerned signs it, and post it to:					
EduAction GRR PO BOX 17125 Congella 4013 Durban South Africa					
If you have any further questions that are not dealt with by the Guide, 2731410) or Daniel Wilson (Tel: +27 31 2615922) or Email: info@eduAc		smond (Tel: +27 31			
Signature of senior official on behalf of the Ministry:					
Many thanks for your assistance					

<u>Section 1: Education System and Statistical Indicators</u> In this section you are required to provide some basic education and statistical indicators for your country.

		e a single education Ministry in your country, or two (e.g. N and Ministry of Higher Education)?	Ministry of Bas	ic	Single	Two
1.2 Please supply the following budget information for the last reported year:						
	1.2.1 What is the last year of available data/statistics for schools in your country?					
	1.2.2	1.2.2 What was the total public expenditure (in local currency) on education?				
	1.2.3	1.2.3 What percentage (%) of total government expenditure was on education?				%
			Pre-primary	Primary	Secondary	Tertiary
	1.2.4	What was the total expenditure on education by level?				
			Currency Units:			%
		What percentage (%) of education expenditure was on teaullowances?	cher and supp	ort staff sa	laries	76
1.3	Please	supply the following basic education statistics:				
	1.3.1	.3.1 What is the total number of schools by level?		Pre-Primary	Primary	Secondary
	1.3.2	What is the total enrolment by level?		Pre-Primary	Primary	Secondary
	1.3.3 stabl	Is total enrolment in your schools growing, shrinking or ree?	emaining	Growing	Shrinking	Stable
	1.3.4	What is the total number of teachers by level?		Pre-Primary	Primary	Secondary
						%
		If known, estimate the percentage (%) of total teachers en ally for any reason (e.g. due to retirement, resignation, pro	• •	-	stem	
	1.3.6	What percentage of children of school-going age are out of	of school? (see	Comment)		%
1.4	Please	supply the following general information:				
	1.4.1	How many times a year is information collected on schoo	ls?			
		On a scale of 1 to 5, what is your estimate of how reliable ole and 5 = very unreliable	this data is, w	here 1 = ve	ry	
	1.4.3	What is the adult literacy rate in your country?				
	1.4.4 Estimate the number of orphans or vulnerable children in the basic education system?			em?		

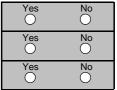
<u>Section 2: Ministry of Education HIV/AIDS structures</u>

This section investigates the degree to which structures have been established in the Ministry to address and manage issues relating to HIV/AIDS.

National Level			
2.1 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic? (see Comment)	In Process	Yes	No O
2.1.1 Does it include senior staff? (see Comment)		Yes	No O
2.1.2 How often does it meet?	Weekly	Monthly	Quarterly
2.1.3 Does it have a dedicated budget? (see Comment)		Yes	No O
2.1.4 Are the following represented in the committee or management unit			
Planning?		Yes	No O
Finance?		Yes	No O
Curriculum?		Yes	No O
Human Resources?		Yes	No O
Education Management Information Systems (EMIS)?		Yes	No (
2.1.5 Has any HIV/AIDS training been provided to members of the committee of management unit referred to above?	r	Yes	No O
2.2 Are there staff at the national Ministry level who only deal with HIV/AIDS issues?	,	Yes	No O
2.2.1 If Yes, are they at a senior level? (see Comment)		Yes	No O
2.2.2 If No, are there \underline{any} staff at the national Ministry level whose responsibilinglude HIV/AIDS?	ties	Yes	No O
	ſ	Yes	No
2.3 Have financial resources, other than for awareness, prevention, behaviour chan curriculum development, been allocated to address the impact of the HIV/AIDS epidential control of the HIV/A	_	0	0
2.3.1 If Yes, are these resources being used in full every year?		Yes	No O
2.3.2 Is the Ministry involved in any application for funding to the Global Fund HIV/AIDS, Tuberculosis and Malaria?	for	Yes	No O
2.3.3 Do the financial resources consist only of Donor money (foreign aid)?		Yes	No O
Regional and District Level	-		
2.4 Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic? (see Comment)	• [Yes	No O
2.4.1 Do they include senior staff?	ŀ	Yes	No

2.4.2 Do they have their own budget?

2.5 Within education institutions, do you have working groups or committees that address internal and external HIV/AIDS related matters?





Section 3: Enabling Environment

An enabling environment provides the framework in which a response to HIV/AIDS can develop. This section investigates the supportiveness of the broader political and regulatory environment towards the development of an appropriate response to HIV/AIDS in education. These are statements to which you respond True or False.

HIV/AIDS on the education sector (see Comment)	O	False
3.2 HIV/AIDS is a standing point on the agenda for senior education management meetings (see Comment)	True	False
3.3 HIV/AIDS is a standing point on the agenda for Teacher Union meetings (see Comment)	True	False
3.4 You have regulations for schools and other educational institutions in terms of admissions and fees	True	False
3.4.1 Your country does NOT have free education	True	False
3.4.1.1 If your country does have free education, to what age or level?	Age	Level
3.4.2 In cases where fees are applicable there are regulations that provide for the exemption from school fees for children from poor families	True	False
3.5 The Ministry of Education has a specific HIV/AIDS policy	True	False
3.5.1 The Ministry does NOT have a specific policy but HIV/AIDS issues are addressed in other policies governing the education sector	True	False
3.6 The Ministry of Education has a workplace policy relating to HIV/AIDS (see Comment)	True	False
3.6.1 If True: Were Ministry Employees involved in the development of the HIV/AIDS workplace policy?	Yes	No O
3.6.2 If True: Is the policy regularly reviewed?	Yes	No O
3.7 Other rules and regulations within the Ministry have been reviewed in light of the impacts and implications of HIV/AIDS (see Comment)	True	False
Section 4: HIV/AIDS mainstreaming The aim of this section is to investigate the degree to which the response to HIV/AIDS has been integrand management and planning functions of the Ministry/Department.	grated into	the
4.1 Is there an education sector HIV/AIDS strategic plan?	Yes	No O
4.1.1 If Yes, is there an action plan for the implementation of this strategic plan?	Yes	No O
4.2 At the national level is HIV/AIDS explicitly considered and reported on in the planning process? (see Comment for examples)	Yes	No O
4.3 Does the education sector have an Education Information Management System (EMIS)?	Yes	No O

sensitive indicators? (see Comment for examples)

4.4 Is HIV/AIDS considered when making district level plans?

4.3.1 If Yes, has the EMIS system been reviewed and amended to include HIV/AIDS

4.5 Is HIV/AIDS relevant data being collected at the district level?		Yes	No O
4.6 Has an assessment of the impacts of HIV/AIDS on the education sector been co	nducted?	Yes	No O
4.6.1 If No, is one planned?		Yes	No O
Section 5: Human Resources This section aims to acquire information relating to the adaptation of human resource proceed response to the impacts of HIV/AIDS. These are statements to which you respond True or		I functions ir	n
5.1 Human resource policies have been amended to minimise vulnerability and susceptibility to HIV/AIDS (e.g. deployment of teachers away from their families)	In Process	True	False
5.2 An analysis of the impact of HIV/AIDS on demand and supply of human resource education sector has been conducted	es in the	True	False
5.2.1 In cases where an analysis has been conducted, this has prompted a character Human Resources planning	ange in	True	False
5.3 As yet there are NO plans to train more teachers as a result of increased teacher due to AIDS (see Comment)	r attrition	True	False
5.4 Human resource issues that are affected by the HIV/AIDS epidemic are being m and reported on (for example sick leave, compassionate leave, attrition, pension cos		True	False
5.5 Guidelines for teachers on dealing with HIV/AIDS in schools have been developed	In Process	True	False
5.5.1 The guidelines were distributed WITHOUT training		True	False
Section 6: Workplace HIV/AIDS programmes These questions consider to what degree a response to HIV/AIDS and those infected and mounted in the workplace. 6.1 Does the Ministry/Department have an HIV/AIDS awareness programme for all it employees: (see Comment for examples)	•	it has beer	n
6.1.1 At the national level?	In Process	Yes	No O
6.1.2 At the district level?	In Process	Yes	No O
6.1.3 For staff at education institutions?	In Process	Yes	No O
 6.2 Does the Education Ministry have a prevention programme aimed at preventing infections among staff? (see Comment) 6.2.1 If Yes, are these prevention programmes gender sensitive? (see Comment examples) 		Yes O Yes	No O No
6.3 Have guidelines for implementing universal precautions been developed for use by all staff? (see Comment)	In Process	Yes	No O
6.4 Do voluntary counselling and testing facilities exist in your country?		Yes	No O

6.4.1 Can Ministry employees be referred to them?

6.5 Has a referral system for access to HIV/AIDS treatment been established?	O	Ö
6.6 Does the Ministry have a policy of non-discrimination with regard to recruitment, advancement, continued employment and benefits for personnel affected by HIV/AIDS?	Yes	No O
6.7 Do you enforce confidentiality of information about Ministry employees affected by HIV/AIDS?	Yes	No O
6.8 Where accommodation is provided by the Ministry have steps been taken to ensure that it is appropriate for the needs of Ministry employees affected by HIV/AIDS?	Yes	No O
6.9 Do you have accessible outlet points within or in the vicinity of your workplace for the purchase or free distribution of condoms?	Yes	No O
Section 7: HIV/AIDS and the curriculum This section assesses the degree to which curricula within the various educational institutions have b response to the needs arising as a result of the HIV/AIDS epidemic.	een adapted	l in
7.1 Is there a life skills programme (see Comment) established in your education system at the following levels:		
7.1.1 Primary?	Yes	N _O
7.1.2 Secondary?	Yes	No (
7.1.3 Does the life skills programme consider issues relating to gender? (see Comment)	Yes	No O
7.2 Is HIV/AIDS addressed in the curriculum at the following levels: (see Comment)		
7.2.1 Primary?	Yes	No O
7.2.2 Secondary?	Yes	O _N
7.2.3 If HIV/AIDS is addressed in the curriculum, estimate the percentage of schools at which it is in place at the following levels:		
7.2.3.1 Primary?	%	
7.2.3.2 Secondary?	%	
7.3 Have support materials been developed which address life skills and HIV/AIDS issues, at the following levels: (see Comment)		
7.3.1 Primary?	Yes	No O
7.3.2 Secondary?	Yes	No O
7.4 Have orientation programmes been undertaken for teachers in school life skills on Process and HIV/AIDS?	Yes	No O
7.5 Has there been an orientation process for parents regarding life skills programmes in schools? (see Comment)	Yes	No O
7.6 Have efforts been made to ensure that religious leaders support the HIV prevention approach adopted by the education sector, the messages it communicates and the materials it uses?	Yes	No O

7.7 Are HIV/AIDS materials available to all students within the tertiary sector?	Yes	No O
7.8 Are HIV/AIDS and life skills integral components in the curriculum for the professional preparation of all new teachers?	Yes	No O
7.9 Have university and other tertiary institution curricula been adapted to include subject specific HIV/AIDS issues?	Yes	No O
7.10 Have systems to monitor the success of HIV/AIDS prevention messages throughout the education system been established?	Yes	No O
7.11 Have efforts been made to include out of school youths in life skills and HIV/AIDS awareness efforts?	Yes	No O
Section 8: Infected and affected The education sector will come into contact with infected and affected pupils in a variety of circumstant designed to assess how prepared ministries are to respond to these challenges.		ection is
8.1 Does the Ministry have a programme to address the needs of orphaned and vulnerable children in the education system? (see Comment)	Yes	No O
8.2 Is there currently a school feeding scheme in place? (see Comment)	Yes	No O
8.3 Have teachers received training in caring for infected pupils?	Yes	No O
8.4 Are counselling services, by trained counsellors, available at most or all schools at the following levels: (see Comment)		
8.4.1 Primary?	Yes	No O
8.4.2 Secondary?	Yes	No O
Section 9: Partnerships The impact of HIV/AIDS is broad and often requires the formation of key partnerships in order to resp questions in this section are intended to facilitate a better understanding of steps that ministries have partnerships.		•
9.1 Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector? (see Comment)	Yes	No O
9.2 Does the education sector have a shared strategy for the fight against AIDS?	Yes	No O
9.3 Does the Education Ministry involve other government agencies/ministries in its fight against HIV/AIDS?	Yes	No O
9.3.1 Does it involve the private sector?	Yes	No O
9.3.2 Does it involve non-governmental organisations?	Yes	No O
9.3.3 Does it involve faith-based organizations and religious groupings?	Yes	No O

Section 10: Research

These questions are intended to identify whether education sector related HIV/AIDS research programmes have been initiated.

10.1 Has a research agenda been defined that prioritises gaps in knowledge relating to the impacts of and response to HIV/AIDS within the education sector?



10.2 Has any research been commissioned to inform the education sector response to HIV/AIDS?



Section 11: Self assessment and prioritization

The intention of this section is to gain an understanding of how Ministry officials rate their state of readiness in relation to key areas of response.

- 11.1 How would you rate your Ministry on a scale of 1 to 5, where 1 = low and 5 = high, in each of the following areas? (please select one for each area the priority areas relate to Sections 2 to 10 above)
 - 11.1.1 Ministry of Education HIV/AIDS structures (Section 2)
 - 11.1.2 Enabling environment for an effective response to HIV/AIDS (Section 3)
 - 11.1.3 HIV/AIDS mainstreaming (Section 4)
 - 11.1.4 Human resources adaptation to the impacts of HIV/AIDS (Section 5)
 - 11.1.5 Workplace HIV/AIDS programmes (Section 6)
 - 11.1.6 HIV/AIDS and the curriculum (Section 7)
 - 11.1.7 Responses aimed at the infected and affected (Section 8)
 - 11.1.8 Partnership development in response to HIV/AIDS (Section 9)
 - 11.1.9 Research guiding the response to HIV/AIDS in the education sector (Section 10)

Low		-	High		
1	2	3	4	5	
1 0	2 0 2 0 2 0 2 0 2 0 2 0 0 2 0 0 0 0 0 0	3 3 3 3 3 3 3 3 3	4 0 4 0 4 0 4 0	5 5 5 5 5 5 5	
	2	3	4	5	
1 0	2	3	4	5	
	2	3	4	5	
1 0	2	3	4	5	
1	2	3	4	5	
1	2		4	5	
1	2	3	4	5	

11.2 Rank t	he following priority a	ireas in ordei	of importance	for <u>funding</u>	from 1 to 9,	where 1
= most impo	ortant and 9 = least im	portant (refer	to the Guide for a	in example)		

- 11.2.1 Ministry of Education HIV/AIDS structures (Section 2)
- 11.2.2 Enabling environment for an effective response to HIV/AIDS (Section 3)
- 11.2.3 HIV/AIDS mainstreaming (Section 4)
- 11.2.4 Human resources adaptation to the impacts of HIV/AIDS (Section 5)
- 11.2.5 Workplace HIV/AIDS programmes (Section 6)
- 11.2.6 HIV/AIDS and the curriculum (Section 7)
- 11.2.7 Responses aimed at the infected and affected (Section 8)
- 11.2.8 Partnership development in response to HIV/AIDS (Section 9)
- 11.2.9 Research guiding the response to HIV/AIDS in the education sector (Section 10)

11.3 Rank the following priority areas in order of importance for technical assistance from 1 to 9, where 1 = most important and 9 = least important	Rank
11.3.1 Ministry of Education HIV/AIDS structures (Section 2)	
11.3.2 Enabling environment for an effective response to HIV/AIDS (Section 3)	
11.3.3 HIV/AIDS mainstreaming (Section 4)	
11.3.4 Human resources adaptation to the impacts of HIV/AIDS (Section 5)	
11.3.5 Workplace HIV/AIDS programmes (Section 6)	
11.3.6 HIV/AIDS and the curriculum (Section 7)	
11.3.7 Responses aimed at the infected and affected (Section 8)	
11.3.8 Partnership development in response to HIV/AIDS (Section 9)	
11.3.9 Research guiding the response to HIV/AIDS in the education sector (Section 10)	

Thank you for the time taken to complete the survey

Save the completed survey as your country name (e.g. Gabon) and email it to info@eduAction.co.za

Please ensure that the full name and title of a senior official who is empowered to sign on behalf of the Ministry is included on Page 1 of this form. Please arrange to print out a hard copy of the completed survey form, ensure that the official concerned signs it, and post it to:

EduAction GRR PO BOX 17125 Congella 4013 Durban South Africa

EDUCATION SECTOR GLOBAL HIV/AIDS READINESS ASSESSMENT SURVEY

Guide to Completing the Survey

These notes provide background information on the Education Sector Global HIV/AIDS Readiness Assessment Survey, as well as information on specific questions and contact details should you require further information.

Background information

The purpose of this survey, which has been commissioned by IATT, is to capture and measure qualitative and quantitative information on the state of readiness of the education sectors of 100 countries considered most at risk, to respond to, manage and mitigate the impact of HIV/AIDS.

The objective is to gather sufficient information to publish a document that will:

- Assess countries in terms of 'readiness' and response capacity;
- Analyse vulnerability and need in order to guide agency support; and
- Establish a benchmark for the annual updating of this information.

An additional benefit of the survey is the educative/learning process of filling in the survey, which is a checklist of issues to be flagged. We must emphasise, however, that the list is illustrative and not prescriptive.

The survey, which should take approximately one hour to complete, is designed to be self-administered by Ministries of Education. Ideally, it should be completed by a small group of senior officials, using the electronic version of the form on computer. Once complete it should be emailed to info@eduAction.co.za. Any queries can be directed to Chris Desmond or Daniel Wilson at the above Email address. They can also be contacted on **Tel**: +27 31 2731410 / +27 31 2615922 or **Fax**: +27 31 2615927.

Please ensure that the full name and title of a senior official who is empowered to sign on behalf of the Ministry is included on Page 1 of the Survey form. Please arrange to print out a hard copy of the completed survey form, ensure that the official concerned signs it, and post it to:

EduAction GRR PO BOX 17125 Congella 4013 Durban South Africa There are two parts to the survey. The first requires you to provide a few basic education-related statistics for your country. The second consists of a series of questions enquiring on the presence or otherwise of key components of a response to HIV/AIDS in the education sector. Most of these questions require a yes/no or true/false response but some require priorities to be ranked, or for performance to be assessed, and these are clearly marked.

Completing the form

Ideally the form should be completed in electronic format using the mouse to select the appropriate answer as shown in the example below:



Some questions have an option marked 'In Process'. This is designed to recognise situations where Ministries have taken substantive steps towards the realisation of some goal i.e. that work is in progress. This option should only be marked if the process is *under way* and is beyond the discussion stage.



Please save the electronic version of the form as your country name (e.g. Namibia) and return it to us using the email addresses shown at the end of this document.

Notes on Terminology in the Survey

Education Sector: for the purposes of the survey, the education sector is defined as the pre-employment cycle of learning and training for all pupils, teachers, managers, administrators and support staff, involved in all formal institutions.

Ministry of Education: the Ministry of Education refers to the national ministry, department or directorate that is responsible for education in the country.

District: A district refers to any sub-geographical division of the country and therefore may be considered interchangeable with Region, Province or Division, depending on the country-specific terminology.

School: Used to refer to any educational institution.

Information on Specific Questions in the Survey

Section 1: Education System and Statistical Indicators

Question	Explanation
1.3.6 What percentage of children of school-going age are out of school?	The definition of children of school-going age will vary from country to country. It is the age group for which children <i>should</i> be attending school (or for which attendance at school is compulsory).

Section 2: Ministry of Education HIV/AIDS structures

Question	Explanation
2.1 At the national level, do you have a dedicated committee or management unit that is responsible for co-ordinating the response to the HIV/AIDS epidemic?	A management unit is a dedicated structure or committee consisting of two or more individuals whose primary task is to manage the ministries response to the impact of HIV/AIDS.
2.1.1 Does it include senior staff?	A senior staff member is a head or director of a department within the education ministry such as the Head of Human Resources or Director of Planning.
2.1.3 Does it have a dedicated budget?	Examples of a dedicated budget include:
	Management Committee budget
	Posts for people responding to the epidemic
	Resources for the Review of Regulations and Guidelines
	Development of a workplace policy
2.2.1 If yes, are they at a senior level?	A senior staff member is a head or director of a department within the education ministry such as the Head of Human Resources or Director of Planning.
2.4 Do you have regional structures responsible for implementing a response to the HIV/AIDS epidemic?	Regions refer to any geographical division of the country below the national level such as regions, districts, divisions etc.
	A regional structure could be a dedicated structure or committee consisting of two or more individuals whose primary task is to manage the ministries regional level response to the impact of HIV/AIDS.

Section 3: Enabling Environment

<u>-</u>	
Question	Explanation
3.1 You have NOT heard your Education Minister speak publicly about the impact of HIV/AIDS on the education sector	You have not heard your Education Minister speak publicly about the impact of HIV/AIDS on the education sector, which includes the ministry and its personnel, all education institutions private and public, teacher unions, NGOs involved in education, as well as the tertiary and pre-school sectors. (True or False)

Question	Explanation
3.2 HIV/AIDS is a standing point on the agenda for senior education management meetings	HIV/AIDS is an important, fixed item on the agenda that is regularly discussed in senior education management meetings. (True or False)
3.3 HIV/AIDS is a standing point on the agenda for Teacher Union meetings	HIV/AIDS is an important, fixed item on the agenda that is regularly discussed in Teacher Union meetings. (True or False)
3.6 The ministry has a workplace policy relating to HIV/AIDS	A workplace policy is a document of intent describing the objectives in relation to HIV/AIDS in the workplace, addressing issues such as non discrimination, safety in the workplace, prohibitions of compulsory HIV testing, confidentiality, openness, acceptance, care and support for employees living with HIV, reasonable accommodation for HIV infected employees, benefits, dismissals and the development of a workplace programme. (True or False)
3. 7 Other rules and regulations within the ministry have been reviewed in light of the impacts and implications of HIV/AIDS	Examples of these include rules and regulations to ensure that there is no discrimination against infected staff in relation to issues such as promotion and placement and that there is zero tolerance of sexual abuse. (True or False)

Section 4: HIV/AIDS mainstreaming

Question	Explanation
4.2 At the national level is HIV/AIDS explicitly considered and reported on in the planning process?	Examples of the ways in which HIV/AIDS might be considered and reported on include:
	Increased pupil and teacher attrition and absenteeism
	Effects on fee income of schools
	An examination of the vulnerability of education plans to the impact of HIV/AIDS
4.3.1 If yes, has the EMIS system been reviewed and amended to include HIV/AIDS sensitive indicators?	Examples of revisions include modifications to the EMIS School Census (Survey) forms to monitor Illness and death among teachers, orphaning, reasons for teacher attrition and school drop outs etc.

Section 5: Human Resources

Question	Explanation
5.3 As yet there are no plans to train more teachers as a result of increased teacher attrition due to AIDS	For example, the annual quota of teacher trainees admitted to training institutions has NOT been increased and more specialist teachers have not been trained (True or False)

Section 6: Workplace HIV/AIDS programmes

Question Explanation

6.1 Does the Ministry/Department have an HIV/AIDS awareness programme for all its employees?	Is there an HIV/AIDS awareness programme for staff, sensitive to issues such as language, culture, age and gender?
	Is there a peer education programme in place with sessions held during working hours?
	Have teachers attended briefing sessions on signs, symptoms and management of HIV disease in young people?
6.2 Does the Education Ministry have a prevention programme aimed at preventing HIV infections among staff?	A prevention programme aimed at preventing HIV/AIDS infections among staff may include peer education, Condom and Femidom distribution to staff, HIV/AIDS awareness sessions.
6.2.1 If yes, are these prevention programmes gender sensitive?	Examples of gender sensitive prevention programmes include programmes which help women to understand their rights both within and outside the workplace and empower them to protect themselves, as well as strategies to promote men's acceptance of their responsibilities regarding HIV/AIDS prevention.
6.3 Have guidelines for implementing universal precautions been developed for use by all staff?	This includes the development and dissemination of infection control guidelines covering issues such as first aid, basic prevention practices and infection control.

Section 7: HIV/AIDS and the curriculum

Question	Explanation
7.1 Is there a life skills programme established in your education system at the following levels	A Life Skills or Life Orientation programme covers issues such as health promotion, family planning, health and family life education, personal and social development, religious education, physical education and, in some countries, HIV/AIDS awareness.
7.1.3 Does the life skills programme consider issues relating to gender	Examples of issues relating to gender include helping young women to understand their rights to protect themselves, as well as strategies to promote acceptance by young men of their responsibilities regarding HIV/AIDS prevention.
7.2 Is HIV/AIDS addressed in the curriculum at the following levels	Has the Life Skills programme been amended to include HIV/AIDS as a specific component or has it been included as a component of any other subjects?
7.3 Have support materials been developed which address life skills and HIV/AIDS issues, at the following levels	Have teaching materials been reviewed and amended for different levels within the education system (primary, secondary & tertiary) and for local use?
7.5 Has there been an orientation process for parents regarding life skills programmes in schools?	An orientation process for parents regarding school life skills could include introducing the programme at parent or community meetings.

Section 8: Infected and affected

Question	Explanation
8.1 Does the ministry have a programme to address the needs of orphaned and vulnerable children in the education system?	Is there a system for identifying and supporting orphans and vulnerable children such as alternatives to regular attendance agreed for infected and affected children? These might include provision to supervised medication, home learning, shorter hours for children caring for parents and/or siblings.
8.2 Is there currently a school feeding scheme in place?	An example of a school feeding scheme is where a meal per day is provided to all pupils at primary school level.
8.4 Are counselling services, offered by trained counsellors, available at most or all schools at the following levels?	In this context, counselling services refer to psychological support services as opposed to services such as career counseling.

Section 9: Partnerships

Question	Explanation
9.1 Has an effort been made to identify possible partners for the fight against HIV/AIDS within the education sector?	Possible partners include non-governmental organisations, other ministries or departments, faith-based organisations, private sector organisations etc.

Section 11: Self assessment and prioritization

11. 2 Rank the following priority areas in order of importance for <u>funding</u> from 1 to 9, where 1 = most important and 9 = least important (refer to the Guide for an example - the priority areas relate to Sections 2 to 11 above).

Explanation

Decide which of the priority areas is **most** important to your ministry in terms of funding and give that a value of **1**. Then decide which is the **second most** important priority for funding and give that a value of **2**. Continue until all **9** areas have been ranked in terms of importance.

An example is shown below:

11.2.1 Ministry of Education HIV/AIDS structures (Section 2)	9
11.2.2 Enabling environment for an effective response to HIV/AIDS (Section 3)	6
11.2.3 HIV/AIDS mainstreaming (Section 4)	7
11.2.4 Human resources adaptation to the last of the l	2
11.2.5 Workplace HIV/AIL	5
11.2.6 HIV/AIDS and the c (Section 7)	1
11.2.7 Responses aimed at the infected and affected (Section 8)	4
11.2.8 Partnership development in response to HIV/AIDS (Section 9)	8

Contact Details

Please Email the completed form to info@eduAction.co.za.

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Thank you for the time taken to complete the form and for your assistance with this important project.