



United Nations  
Educational, Scientific and  
Cultural Organization



# UNESCO'S STRATEGY FOR RESPONDING TO HIV AND AIDS



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February 2007

# ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral Therapy
DAC	Development Assistance Committee
DESD	UN Decade of Education for Sustainable Development
DFID	UK Department for International Development
EFA	Education for All
FRESH	Focusing Resources on Effective School Health
FTI	Fast Track Initiative
GTT	Global Task Team
HIV	Human Immunodeficiency Virus
IATT	Inter-Agency Task Team
ICT	Information and Communication Technology
IDP	Internally Displaced Person
IIEP	International Institute for Educational Planning
ILO	International Labour Organization
LIFE	Literacy Initiative for Empowerment
MDG	Millennium Development Goal
NGO	Non-Governmental Organization
OECD	Organisation for Economic Co-operation and Development
PRSP	Poverty Reduction Strategy Paper
TTISSA	Teacher Training Initiative for sub-Saharan Africa
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNIFEM	United Nations Development Fund for Women
UNLD	United Nations Literacy Decade
UNODC	United Nations Office on Drugs and Crime
USAID	United States Agency for International Development
WPHRE	World Programme for Human Rights Education
WFP	World Food Programme
WHO	World Health Organization

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# FOREWORD

In the 25 years since the acronym 'AIDS' first appeared, the world has witnessed major achievements in the response to the epidemic. There have been important scientific breakthroughs including, in particular, the development of antiretroviral therapy. There has also been an unprecedented level of resource mobilisation and many different constituencies have come together to coordinate and improve the effectiveness of the response.

Despite this progress, however, nearly 40 million people are living with HIV today and only one in ten people have access to treatment and prevention services. Young people between the ages of 15 and 24 comprise 50 percent of new infections, and young women and girls are increasingly and disproportionately vulnerable to HIV due to gender inequalities and traditional gender roles. At the same time, populations key to the dynamics of the epidemic — including sex workers and their clients, injecting drug users, men who have sex with men, and the incarcerated — continue to be woefully underserved by national responses.

There can be no room for complacency when it comes to HIV and AIDS. Strong action is required, particularly through massively expanded and intensified prevention efforts alongside activities to expand access to treatment, care and support. Otherwise, the epidemic will continue to spread and threaten hard-won development gains and future prospects for sustainable development.

The revised strategy described in this document explains how UNESCO undertakes its work in the context of a broader effort organised through UNAIDS to move towards universal access to comprehensive HIV prevention programmes, treatment, care and support. The new strategy builds on the two previous UNESCO strategies from 2001 and 2004, and ensures that UNESCO's response to HIV and AIDS continues to be informed by the epidemic's unfolding and dynamic character, changes in the international context shaping the overall response, and changes within UNESCO itself, not least the Education Sector reform.

The key aspect of the revised strategy is the clear articulation of core actions within UNESCO's response, flowing from the vision, goals, objectives and principles detailed in the strategy and the experience gained from UNESCO's longstanding work in this area. The revised strategy gives priority to fulfilling UNESCO's responsibilities under the UNAIDS division of labour, including as the lead organization for HIV prevention with young people in educational institutions, and the 2007-2010 UNAIDS Strategic Framework for support to countries' efforts to move towards universal access.

The pride of place that UNESCO gives to education is based on evidence that education contributes towards the knowledge and personal skills essential for the prevention of HIV, and protects individuals, families, communities, institutions and nations from the impact of AIDS. Education helps to overcome the conditions that facilitate the spread of HIV and can create the understanding and tolerance that contribute to reduced stigma and discrimination against vulnerable and marginalised communities and people living with HIV.

The importance attached to education on HIV and AIDS in the new strategy is reflected in the central role given to the UNAIDS Global Initiative on Education and HIV & AIDS, known as EDUCAIDS, an effort led by UNESCO. EDUCAIDS provides support for the implementation of comprehensive national education sector responses to the epidemic, and is one of three core Education for All (EFA) priorities endorsed by UNESCO's Executive Board. 30 countries are now participating in EDUCAIDS, with many more expressing interest in becoming involved. The full Committee of Cosponsoring Organisations of UNAIDS has endorsed EDUCAIDS, and it benefits from a broad-based and growing partnership of stakeholders in the education sector.

UNESCO's priority focus on education was reinforced by the UNAIDS division of labour, contained in the Global Task Team recommendations endorsed by UNESCO's Executive Board (174 EX/2006). In the period ahead, this focus, within the context of the drive towards universal access, is at the heart of UNESCO's strategy.

In addition to UNESCO's work at the programmatic level, we have made significant strides in making the UNESCO workplace a safer and more protective environment. The UNESCO workplace policy on HIV and AIDS has been updated and calls for continuously raising awareness among UNESCO personnel through training sessions devoted to the subject. UNESCO is also an active partner in the joint 'UN Cares' programme of the United Nations which aims to provide education, care and support for UN employees throughout the world.

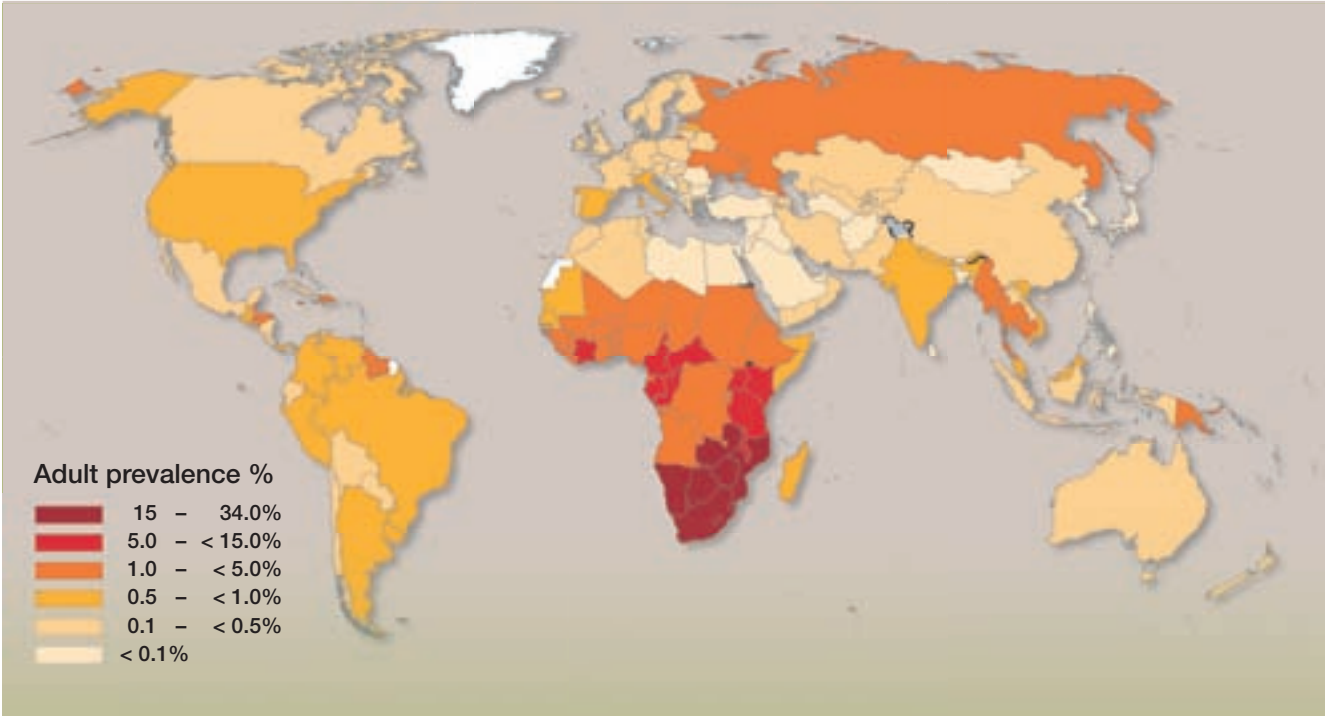
The strategy was revised through an extensive consultative process throughout UNESCO and provides the framework for guiding our actions in the years ahead. It is in this spirit of consultation and collaboration that I encourage all of you to contribute to UNESCO's efforts to prevent the further spread of HIV and to protect individuals, families, communities, institutions and nations from the impact of AIDS.



Koïchiro Matsuura  
Director-General  
UNESCO

# HIV AND AIDS IN CONTEXT

Map 1: A Global View of HIV Infection, 2005



Source: UNAIDS. *2006 Report on the Global AIDS Epidemic*. Geneva: UNAIDS, 2006. Accessed online 15 February 2007 at: [http://www.unaids.org/en/HIV\\_data/2006GlobalReport/default.asp](http://www.unaids.org/en/HIV_data/2006GlobalReport/default.asp)

A quarter of a century into the pandemic, HIV and AIDS are seen to be among the greatest threats to global stability and progress. The global AIDS epidemic continues to evolve, outpacing the response. At the end of 2006, an estimated 39.5 million people worldwide were living with HIV, the virus that causes AIDS, including 4.3 million newly infected in 2006 alone. In the same year, nearly 3 million people died from AIDS-related causes, contributing to the more than 20 million deaths since the first AIDS diagnosis in 1981. AIDS has also orphaned around 15 million currently living children, and rendered millions of others vulnerable.<sup>1</sup>

While the rate of new HIV infections is believed to have peaked globally in the late 1990s and to have since stabilised, the overall numbers of people living with HIV have continued to rise due to population growth and, more recently, the life-prolonging effects of antiretroviral therapy (ART).

In some regions of the world, the epidemic remains particularly severe. For example, HIV prevalence has reached 40 percent in some parts of Southern Africa while in Eastern Europe and Central Asia there are some indications that infection rates have risen by more than 50 percent since 2004.<sup>2</sup> In Eastern Africa, Latin America and the Caribbean, there are some signs of progress, while serious epidemics appear to be underway in particular countries (see Map 1).

Women are increasingly and disproportionately affected by AIDS (see Figure 1), driven largely by the highly disadvantaged social and economic status of women compared to men but also by women's biological and physiological vulnerability to HIV infection. In sub-Saharan Africa, for every ten adult men living with HIV, there are about 14 adult women who are infected with the virus.<sup>3</sup> Women are also far more likely to be the ones caring for people living with HIV. The 'feminisation' of the epidemic is particularly acute amongst young people in southern Africa, with studies suggesting young women are two to seven times more likely to be infected with HIV than young men.<sup>4</sup>

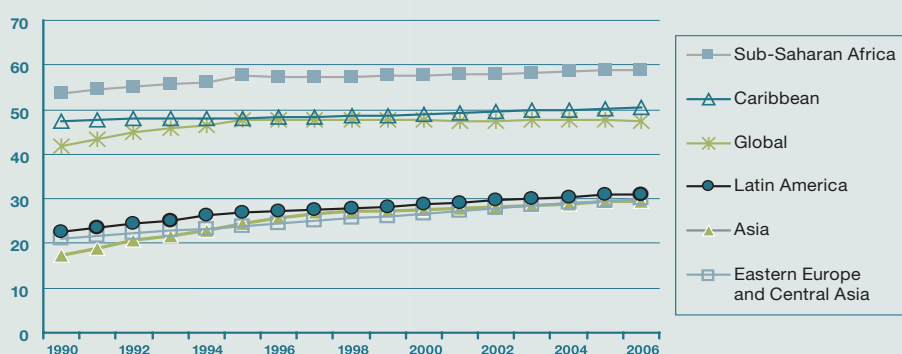
In many regions of the world, new HIV infections are heavily concentrated among young people aged 15 to

24. In 2006, young people accounted for 40 percent of new HIV infections among people aged 15 and above.<sup>5</sup> According to UNAIDS, the future course of the world's HIV epidemics hinges largely on the behaviours young people adopt or maintain and the social, cultural and other contextual factors that affect these decisions.

Promising developments have been seen in recent years in expanding access to treatment and care. The World Health Organization (WHO) estimates that more than 1.6 million people in low- and middle-income countries were accessing ART in June 2006, representing a fourfold increase since December 2003. Scale-up of treatment access in sub-Saharan Africa has been most dramatic, increasing from 100,000 people receiving treatment at the end of 2003 to over one million in June 2006. Latin America and the Caribbean have been most successful in reaching those in need of ART — here, estimated coverage is around 75 percent.<sup>6</sup> Coverage is lowest in the low- and middle-income countries of Europe and Central Asia, and North Africa and the Middle East at 13 percent and 5 percent, respectively.<sup>7</sup>

Despite progress in treatment access, unless strong action is taken, particularly in massively expanded and intensified prevention efforts, the epidemic will continue to spread and threaten hard-won development gains and future prospects for sustainable development. It is clear that stronger, more strategic, and coordinated responses are required if the world is to prevent the further spread of HIV and address the impact of AIDS.

**Figure 1: Percentage of Adults (15+) Living with HIV Who Are Female, 1990-2006**



Source: UNAIDS and WHO. *2006 AIDS Epidemic Update*. Geneva: UNAIDS, 2006. Accessed online 15 February 2007 at: [http://data.unaids.org/pub/EpiReport/2006/2006\\_EpiUpdate\\_en.pdf](http://data.unaids.org/pub/EpiReport/2006/2006_EpiUpdate_en.pdf)





## THE GLOBAL RESPONSE

**G**overnments across the world committed themselves to accelerating their responses to the epidemic at the 2001 United Nations General Assembly Special Session on HIV/AIDS (UNGASS), reaffirmed at the United Nations (UN) World Summit in 2005, and again at the June 2006 High-Level Meeting on AIDS. In the years following UNGASS, there has been strengthened action at all levels, with increased leadership and commitment, more resources, and intensified delivery of HIV prevention, treatment, care and support. Some countries have also reported achievements in establishing national human rights frameworks and in involving civil society in the development, implementation and evaluation of national responses.<sup>8</sup>

As part of this effort, and resulting from a March 2005 meeting in London called 'Making the Money Work', a Global Task Team (GTT) was established to improve AIDS coordination among multilateral institutions and international donors in recognition that the world must do more to tackle AIDS effectively in the years to come. One of the GTT recommendations in its June 2005 report<sup>9</sup> was the establishment of a UNAIDS division of labour, building on the comparative advantages and complementarities of UNAIDS Cosponsors to ensure effective support at the country level.

Responding to this recommendation, the UNAIDS Secretariat and Cosponsors developed a division of labour comprised of 17 technical support areas with a 'lead organization' for each and the involvement of 'main partners'.<sup>10</sup> As the UN specialised agency for education, UNESCO has been designated the lead organization for HIV prevention with young people in educational institutions. UNESCO's work

in other areas is also appreciated and acknowledged in the division of labour; UNESCO has been designated as a main partner in eight other technical support areas (see Table 1).

Further efforts are currently underway in the context of UN reform to strengthen the coherence and the coordination of UN system activities at the country level to reduce duplication and redundancies among UN agencies; alleviate the burdens on recipient and donor governments; and respond to the needs and priorities of the Member States the UN system services.<sup>12</sup> UNESCO endorses the concept of "One UN" at the country level and remains committed to supporting strengthened coordination, alignment and harmonisation to rapidly scale up the AIDS response in the context of UN reform, the "Three Ones" principles,<sup>13</sup> the Millennium Development Goals (MDGs), and the Paris Declaration on Aid Effectiveness (OECD Development Assistance Committee (DAC)).<sup>14</sup>

**Table 1: Technical Support Areas in which UNESCO is Identified as a Lead Organization and Main Partner<sup>11</sup>**

Technical Support Area	Lead Organization	Main Partners
HIV prevention with young people in educational institutions	<b>UNESCO</b>	ILO, UNFPA, UNICEF, WHO
HIV and AIDS, development, governance and mainstreaming, including instruments such as poverty reduction strategy papers (PRSPs), and enabling legislation, human rights and gender	<b>UNDP</b>	ILO, UNAIDS Secretariat, UNESCO, UNICEF, WHO, World Bank, UNHCR
Support to strategic, prioritised and costed national plans; financial management; human resources; capacity and infrastructure development; impact alleviation and sectoral work	<b>World Bank</b>	ILO, UNAIDS Secretariat, UNDP, UNESCO, UNICEF, WHO
HIV and AIDS workplace policy and programmes, private sector mobilisation	<b>ILO</b>	UNESCO, UNDP
Provision of information and education, condom programming, prevention for young people outside schools and prevention efforts targeting vulnerable groups (except injecting drug users, prisoners and refugee populations)	<b>UNFPA</b>	ILO, UNAIDS Secretariat, UNESCO, UNICEF, UNODC, WHO
Overall policy, monitoring and coordination on prevention	<b>UNAIDS Secretariat</b>	All UNAIDS Cosponsors
Dietary/nutrition support	<b>WFP</b>	UNESCO, UNICEF, WHO
Addressing HIV among displaced populations (refugees and internally displaced persons)	<b>UNHCR</b>	UNESCO, UNFPA, UNICEF, WFP, WHO, UNDP
Strategic information, knowledge sharing and accountability, coordination of national efforts, partnership building, advocacy, and monitoring and evaluation, including estimation of national prevalence and projection of demographic impact	<b>UNAIDS Secretariat</b>	ILO, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, UNODC, WFP, WHO, World Bank



## UNESCO'S CONTRIBUTION

Over the years, UNESCO's education, natural science, social and human sciences, culture and communication and information sectors, institutes, regional bureaux and field offices have intensified their actions, in collaboration with other partners, to respond to HIV and AIDS (see Annex 1). UNESCO is in a unique position to bring an inter-sectoral and interdisciplinary approach to the broader effort organized by UNAIDS to move towards universal access to comprehensive HIV prevention programmes, treatment, care and support.

As the UN specialised agency for education, UNESCO supports lifelong learning that builds and maintains essential skills, competencies, knowledge, behaviours and attitudes. This includes learning in formal educational settings (e.g., in schools, colleges, universities or other educational or training institutions); through non-formal educational activities aimed at, for example, developing adult literacy, basic education for out-of-school children and youth, life skills education and technical and vocational education and training; and through informal education through family and neighbours, work and play, the marketplace, the mass media and other resources found in the learners' environment.<sup>15</sup>

The priority that UNESCO has given to education is based on the evidence that education – especially education on prevention – contributes toward the knowledge and skills essential for the prevention of HIV and protects individuals, families, communities, institutions and nations from the impact of AIDS. Education also helps to overcome the conditions that facilitate the spread of HIV, including poverty, ill-health, gender inequality, violence and abuse, particularly against girls and women. Beyond this, education can create the conditions of understanding, respect and tolerance – all of which contribute to reduced stigma and discrimination against vulnerable and marginalised communities and people living with HIV.

AIDS is among the key factors exerting pressure on education systems, particularly in countries in transition and least developed countries, as well as on the abilities of learners to access and complete education. While progress has been made in recent years in efforts to achieve Education for All (EFA), about 77 million children are still not enrolled in primary school, 55 percent of them girls.<sup>16</sup> There is growing recognition that efforts aimed at achieving the EFA goal of universal primary education (EFA Goal 2) must be strongly linked with interventions supporting gender equality in education (EFA Goal 5); addressing the educational needs of young people and adults through appropriate learning and life skills programmes (EFA Goal 3); and reducing illiteracy, –particularly among women (EFA Goal 4).<sup>17</sup>

There is also growing recognition among partners that EFA cannot be achieved without a much stronger overarching focus on HIV and AIDS. As a result, the Working Group on EFA had a session in its July 2006 meeting to discuss strategies to scale up and enhance attention to HIV and AIDS within the EFA framework.<sup>18</sup> Ministers, top officials of multilateral and bilateral agencies, and leaders of civil society organizations reaffirmed the “central role of education in enabling individuals, communities and nations to respond effectively to the challenges of HIV and AIDS, and in enabling learners to protect themselves and others from HIV” at the High-Level Group on EFA in Cairo, Egypt in November 2006. Recognising that HIV and AIDS are “of importance globally”, they committed to a number of actions, including to “foster strategic cross-sectoral partnerships to strengthen and support a comprehensive education sector response.”<sup>19</sup>

UNESCO’s Executive Board has included EDUCAIDS, the UNESCO-led UNAIDS Global Initiative on Education and HIV & AIDS, as one of three core priority initiatives within EFA,<sup>20</sup> acknowledging the importance of comprehensive education sector engagement as part of the national response to HIV and AIDS. EDUCAIDS links with these core initiatives for maximum synergy and impact.

**EDUCAIDS is a multi-country UNAIDS initiative to support the implementation of comprehensive national education sector responses to the HIV and AIDS epidemic – led by UNESCO with the collaboration of key stakeholders and in full compliance with the agreed upon UNAIDS division of labour.**

Through EDUCAIDS, UNESCO and its partners support countries to implement comprehensive, scaled-up educational programmes on HIV and AIDS that cover: content, curriculum and learning materials; educator training and support; policy management and systems; and that ensure quality and the full utilisation of approaches and entry points, through both formal and non-formal education.<sup>21</sup> Its aims are promoted through greater collaboration among UNAIDS Cosponsors and key stakeholders, including national authorities, ministries (education, social welfare, health, labour and others), bilateral agencies and civil society groups at the country level.

Recent research through a ‘global readiness survey’<sup>22</sup> of national education sector capacity to respond to the epidemic, undertaken in over 70 countries, demonstrates that encouraging progress has been made, but much more is still required. For example, the study revealed that while nearly three-quarters of the participating ministries of education have dedicated HIV and AIDS management structures in place, only one-third have adopted a sector-specific HIV and AIDS policy. Moreover, national education

sector responses continue to emphasise HIV prevention, with comparatively little attention to issues of treatment, care and support, workplace issues, and management of the impact of HIV and AIDS.<sup>23</sup>

In order to achieve the maximum effectiveness of educational efforts on HIV and AIDS, holistic approaches are required along a continuum from prevention to treatment, care and support. Such an approach fits within the goal of universal access to comprehensive HIV prevention programmes, treatment, care and support endorsed by the United Nations World Summit in 2005, and also called for in the official communiqué of the annual 2005 summit of the Group of Eight (G8) industrialised countries.<sup>24</sup> At the core of universal access is clear recognition that prevention, treatment, care and support are mutually necessary and interdependent.

# STRATEGIC VISION



On 30 May 2006, on the eve of the High-Level Meeting on AIDS, UN staff members hold open red umbrellas to form the AIDS ribbon, in the North Garden at UNHQ. The red ribbon is the universal symbol of AIDS awareness.

**T**he strategy described here outlines how UNESCO intends to continue its contribution to the global response to HIV and AIDS. It is an operational tool for the Organization designed to provide direction, set priorities, and encourage appropriate resource allocation in light of the evolving epidemic and recent international developments. This strategy is not intended to exhaustively examine UNESCO's past work in this area as other recent resources are available documenting the diverse activities undertaken by UNESCO to reduce risk and vulnerability, improve care for the infected and affected, and build individual and institutional capacity for more effective responses to HIV and AIDS.<sup>25</sup>

**UNESCO's key strategic thrusts in the period ahead aim to build on past achievements outlined in UNESCO's previous strategies<sup>26</sup> and to fulfil UNESCO's responsibilities in the UNAIDS division of labour and the 2007-2010 Strategic Framework for UNAIDS support to countries' efforts to move towards universal access.<sup>27</sup> These include:**

- Giving priority to national education sector responses to HIV and AIDS at all levels, through all modalities, and across the continuum from prevention to treatment, care and support, as indicated in the UNAIDS division of labour and approved by UNESCO's Executive Board.
- Accelerating the implementation of EDUCAIDS as a means to foster comprehensive education sector engagement with the HIV and AIDS response at the national level. This includes scaled-up approaches addressing: quality education (including cross-cutting principles); content, curriculum and learning materials; educator training and support; policy, management and systems; and the full utilisation of relevant approaches and entry points.
- Harnessing UNESCO's multisectoral capacities in support of the Organization's response to the epidemic especially, but not only, its educational work (see Box 1).
- Supporting delivery of the "core business" of the joint UNAIDS programme by addressing interlinking challenges to universal access. This includes: moving from crisis management to a sustained strategic response; accelerating scale up; and repositioning the United Nations within a changing global environment.<sup>28</sup>
- Engaging with the UN reform process, particularly the establishment of a "One UN" at the country level, and ensuring the full establishment and implementation of Joint UN Teams on AIDS with Joint Programmes of Support aligned with national AIDS frameworks.
- Aligning all actions to contribute to other UN priorities in education, especially the EFA goals and the Dakar Framework for Action, the education-related MDGs, the United National Literacy Decade (UNLD), and the United Nations Decade of Education for Sustainable Development (DESD).

## **Box 1** Contribution to Universal Access by UNESCO Sectors

- **Education Sector** supports the establishment and intensification of comprehensive education sector responses to HIV and AIDS through EDUCAIDS and the UNAIDS Inter-Agency Task Team (IATT) on Education.
- **Natural Science Sector** supports scientific content that is accurate and up-to-date and engages institutions of higher learning to integrate HIV and AIDS in their scientific programmes.
- **Social and Human Sciences Sector** supports research and policy development addressing discrimination and human rights and the structural causes of vulnerability, particularly among young people.
- **Culture Sector** advocates for and supports the consideration of socio-cultural issues and the use of arts and creativity in HIV and AIDS responses.
- **Communication and Information Sector** builds the capacity of the media, communication and information professionals and vulnerable groups to produce, disseminate and use accurate content.
- **Bureau for Strategic Planning** supports the integration of gender equality and youth perspectives into all stages of the programme cycle, from conceptualisation to evaluation.

# PRINCIPLES

Informed by the global consensus on the need to move towards universal access and improve coordination and harmonisation of efforts resulting from the GTT recommendations and ongoing UN reform, UNESCO's work on HIV and AIDS is guided by the principles of coherence and focus, ownership and partnership, effectiveness, flexibility and sustained action.

- **Coherence and focus:** UNESCO will coordinate and focus its efforts in areas where it has a comparative advantage and can provide the most added value, in keeping with the agreed UNAIDS division of labour and other recommendations to improve coordination, coherence, efficiency and effectiveness. Actions to reduce vulnerability and to address stigma and discrimination are central to the success of responses and will continue to be prioritised, particularly in the poorest and most disadvantaged countries where the needs are greatest.
- **Ownership and partnership:** UNESCO programming will continue to be grounded in country-led processes aiming to achieve internationally-agreed development goals. This includes addressing the impact of the epidemic on individuals, communities and institutions in a broader development context and promoting interventions along a continuum of prevention, treatment, care and support. Support for partnership-building and coordination at the country level involving ministries of education and other government bodies, UNAIDS Cosponsors and other UN organizations, multilateral and bilateral agencies, civil society, the private sector, and networks of people living with HIV remains key to ensuring inclusive policy dialogue and programming aligned to national development priorities.
- **Effectiveness:** To promote efficient and effective responses, UNESCO will support approaches grounded upon available and emerging evidence, approaches that are holistic, rights-based, culturally-appropriate, age-specific, scientifically accurate, seek to meaningfully involve people with HIV and other key stakeholders, promote and foster gender equality, and build on the unique strengths and capacities of all UNESCO sectors.
- **Flexibility:** Flexibility and adaptation to meet different needs in different locations is essential to establishing strategic priorities. The importance of “knowing your epidemic” has been recently highlighted by UNAIDS,<sup>29</sup> and UNESCO's responses will continue to adjust actions in light of new evidence and support national responses that take account of the stage of the epidemic (see Figure 2 opposite) and local contexts. Regional strategies and country workplans must consider the epidemiological situation and emerging trends, local drivers of the epidemic, and country and regional policies and frameworks. Such efforts need to be at a scale capable of making a significant impact on the epidemic and its consequences.
- **Sustained action:** AIDS remains an exceptional crisis after the first 25 years of the epidemic and today's urgent action must continue. At the same time, AIDS must be recognised as a long-term emergency that will require decades of sustained strategic intervention, with concerted effort to mainstream it into the core business of all sectors.<sup>30</sup> Resources deployed today to scale up HIV prevention, treatment, care and support not only will respond to short-term needs but also will start to address many of the underlying problems that drive the AIDS epidemic.

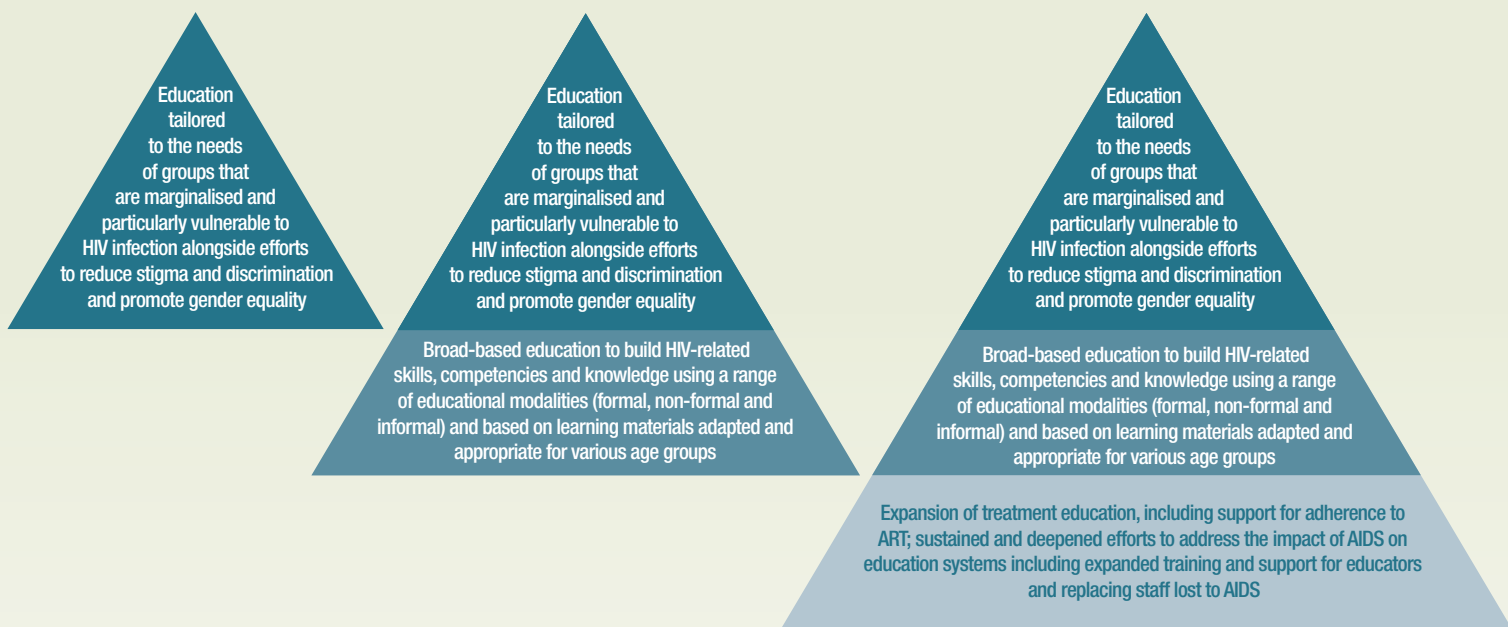


Figure 2: Education Sector Responses to HIV and AIDS Tailored to Epidemic Type

## Low

## Concentrated

## Generalised



**Note:** For the purpose of epidemiological surveillance, UNAIDS and WHO have categorised HIV epidemics as:

- **Low level:** HIV prevalence has not consistently exceeded 5% in any defined subpopulation (i.e. sex workers, injecting drug users and men who have sex with men);
- **Concentrated:** HIV prevalence is consistently >5% in at least one defined subpopulation and is <1% in pregnant women in urban areas; and
- **Generalised:** HIV prevalence is consistently >1% in pregnant women.

Source: UNAIDS and WHO. *Guidelines for Conducting HIV Sentinel Serosurveys among Pregnant Women and Other Groups*. UNAIDS/WHO Working Group on Global HIV/AIDS/STI Surveillance. Geneva: UNAIDS, 2003. Accessed online 15 February 2007 at: [http://data.unaids.org/Publications/IRC-pub06/JC954-ANC-Serosurveys\\_Guidelines\\_en.pdf](http://data.unaids.org/Publications/IRC-pub06/JC954-ANC-Serosurveys_Guidelines_en.pdf)

This basic, consensus typology has been in use for over a decade. Recently, UNAIDS has proposed the inclusion of a fourth category, *hyperendemic*, whereby HIV prevalence has spread to a level above 15% in the general population. See UNAIDS. Forthcoming 2007. *Practical Guidelines for Intensifying HIV Prevention*. Geneva: UNAIDS.





## GOAL AND OBJECTIVES

**U**NESCO's overarching goal is to support Member States to move towards universal access to comprehensive HIV prevention programmes, treatment, care and support. Education has been identified as a key element and an area of UNESCO's comparative advantage in efforts to scale up to universal access, and will remain a priority in UNESCO programming. UNESCO also recognises that universal access is a major milestone in efforts to achieve the MDG of halting and reversing the spread of HIV by 2015 and other MDGs, including those related to poverty eradication, child mortality, maternal health and environmental sustainability, as well as the two education-related goals.<sup>31</sup>



**Drawing on the strengths and resources of its sectors, institutes and field offices, UNESCO's objectives are to:**

- Strengthen the evidence base and improve the policy and programmatic responses of Member States through the documentation and dissemination of good practices and support for their use and application; the monitoring and evaluation of progress, trends and impact; and advocacy and technical assistance for evidence-informed responses to HIV and AIDS.
- Enhance the capacity of Member States to implement comprehensive and scaled-up responses to HIV and AIDS, particularly in the education sector, that are informed by available evidence, based on widespread consultation with key stakeholders, undertaken through strategic alliances and partnerships at all levels, and evaluated for impact.
- Promote full and effective multisectoral engagement and coordinated and harmonised AIDS responses by Member States within the framework of the agreed UNAIDS division of labour and other recommendations to improve harmonisation and alignment with national priorities.



## CORE ACTIONS WITHIN UNESCO'S RESPONSE

**“Action must not only be increased dramatically, but must also be strategic, focused and sustainable to ensure that the money reaches those who need it most.”**

**Dr. Peter Piot, UNAIDS Executive Director<sup>32</sup>**

**U**NESCO will continue to provide a normative, analytical and advocacy role and undertake operational programming supporting Member States to prevent new HIV infections and build the capacity of individuals, families, communities, institutions and nations to overcome the impact of AIDS. The five core actions identified in this strategy for UNESCO's response to HIV and AIDS are in line with the recent UNAIDS Policy Position Paper on *Intensifying HIV Prevention*;<sup>33</sup> respect the UNAIDS division of labour; reflect the priority UNESCO attributes to education sector responses to the epidemic; and build on UNESCO's comparative advantages and partnerships at country, regional and global levels.

## 1. Advocacy and Support for Evidence-Informed Policies and Practices

To date, AIDS has all too often been viewed as a public health issue rather than a development issue, to which national education sectors must comprehensively respond in order to deliver on their mandate.<sup>34</sup> UNESCO's credibility and close relationship with high-level education officials and its involvement in UNAIDS puts it in a favourable position to conduct advocacy at the country, regional and global level on the important role that education can play in national responses to HIV and AIDS.

This advocacy role is critical for better coordination within national responses and adequate resource mobilisation to address identified priorities. UNESCO seeks to ensure that education responses become increasingly important parts of country level strategies and actions and that they are reflected in

increased budgetary allocations for the education sector to take on this role. A key entry point for this is supporting the mainstreaming of HIV and AIDS in education sector policies and frameworks such as EFA-Fast Track Initiative (FTI) country plans and other national development frameworks such as PRSPs, the United Nations Development Assistance Framework (UNDAF), and national AIDS plans.

**“Nobody will come near me, have lunch with me, nobody wants to talk to me after school since they found out my mother is sick.”**  
**Child in India<sup>35</sup>**

UNESCO also recognises that there is an overarching need for strong political commitment at every level and broad social mobilisation to end stigma, silence and denial and to change the socio-cultural norms, beliefs, roles and practices that increase HIV vulnerability (see Box 2). To do so, UNESCO supports the development of evidence-informed policies and practices by synthesising lessons learned from prior experience and the application and use of strategic information. This includes media, communication and informa-

tion efforts to enhance the visibility of HIV- and AIDS-related issues, stimulate public discourse, and build ownership, participation and accountability for actions.

## Box 2 Advocacy for the Integration of Gender Issues in Policy and Programming

UNESCO recognises that gender roles and relations have a significant influence on the course and impact of the AIDS epidemic in every region of the world. Gender inequalities impact individuals' and communities' ability to prevent HIV infection; to access prevention, treatment, care and support services; and to effectively cope with the impact of AIDS. The increasing 'feminisation' of the epidemic requires interventions to address and rectify the gender dynamics underpinning the spread of HIV, and UNESCO supports a policy of zero tolerance for gender-based violence, sexual violence and sexual coercion.

UNESCO supports a gender equality and rights-based approach to planning, implementation, and the monitoring and evaluation of policies, programmes, research and other activities. This includes:

- addressing men's and women's gender and age-specific needs and vulnerabilities within specific social and cultural contexts;

- supporting transformative gender roles and gender-equitable relationships to shift gender power imbalances, promote responsibility, and reduce gender-related violence against women and girls;
- empowering women, girls and other vulnerable groups through initiatives that increase literacy, skills, and livelihoods opportunities;
- promoting respect for sexual diversity and non-discriminatory attitudes and behaviour against same-sex attracted individuals, individuals of different sexual orientation and transgendered individuals; and
- supporting the establishment and maintenance of political will and leadership necessary to create a policy environment amenable to the sustainable integration of gender equality considerations into HIV and AIDS policy and programming at all levels.

## UNESCO, working with its partners, will continue to:

- Advocate for comprehensive approaches that include prevention, treatment, care and support, workplace issues, and effective management of the response. All interventions at the country level will pay particular attention to addressing the needs of people most at risk and vulnerable to HIV infection and be flexible to adapt to changing national epidemics.
- Support the dissemination and use of strategic information and other evidence for policy and planning purposes, including through media, communication and information channels.
- Support Member States to integrate HIV and AIDS into national frameworks (e.g., EFA-FTI country plans, PRSPs, sectoral policies and plans) in order to ensure multisectoral engagement and long-term and sustainable commitment.
- Encourage Member States to promote sufficient coverage, intensity, quality, inclusiveness, impact and sustainability of the response through the development and implementation of policies, programmes and frameworks.

## 2. Policy and Programmatic Guidance

UNESCO will increase its policy and programmatic guidance to ministries, non-governmental organizations and other partners involved in education, science, culture, communication and information to support national responses to HIV and AIDS that are prioritised and formulated on the basis of the stage of the epidemic, evidence-informed and integrated into broader development frameworks.

This effort will be undertaken through:

- a) documentation of good practice and lessons learned to apply acquired knowledge to policy and programme design and implementation (see Box 3);
- b) prioritised research agendas that provide advice on new developments and key issues, strengthen the evidence base and identify key knowledge and practice gaps; and
- c) operational guidance for implementing actions (see Box 4, opposite).

### Box 3 HIV Testing and Related Human Rights Protections

According to UNAIDS, only 12 percent of people who want to know their HIV status are currently getting tested.<sup>36</sup> UNESCO supports the expansion and promotion of HIV testing as part of the commitment toward universal access to comprehensive HIV prevention programmes, treatment, care and support. This was recently confirmed at the UN General Assembly in November 2006 following up on the implementation of the Declaration of Commitment on HIV/AIDS.<sup>37</sup>

UNESCO recognises that important differences exist in terms of the context in which testing is offered, and the significance that this has on individual decisions to seek a test. In places where stigma and discrimination are significant, where there is pronounced gender inequality, and where access to treatment and other HIV services may be limited or absent, UNESCO encourages Member States to factor these circumstances into local and national strategies on HIV testing.

UNESCO also encourages that careful attention be given to essential pre-conditions for testing, including access to treatment and other HIV services, protection from discrimination and abuse as a result of HIV status, and assurances of protection for populations key to the dynamics of the epidemic, including injecting drug users, men who have sex with men, sex workers, women and other vulnerable populations. The full and proper realisation of 'informed consent', with individuals clearly understanding the implications of taking an HIV test, should be emphasised as part of pre-test counselling and as an ethical principle that must not be compromised.

The history of the epidemic has shown that the full protection of human rights is essential; peer pressure and other forms of coercion should not be used to push people into taking a test if they do not feel ready or fear the social consequences of a positive result. Concerns regarding the possible abuse and violation of rights for individuals as a result of breaches in confidentiality of their HIV status must also be treated very seriously.

## Box 4 Mainstreaming the Needs of Young People

As the lead organization for HIV prevention with young people in education institutions and a main partner in prevention for young people in out-of-school environments, UNESCO is committed to integrating the specific needs of youth in all stages of planning, implementing and evaluating HIV and AIDS policies and programmes. This includes:

- developing appropriate and up-to-date educational, information and advocacy tools in cooperation with young people and their organizations in order to facilitate access to clear, culturally appropriate and non-judgmental information and education for all young people;
- advocating for appropriate learning opportunities for young people (including HIV prevention, access to care and treatment education, life skills) by drawing on the potential of both formal and non-formal learning environments;
- mobilising partnerships with young people and youth and student organizations in order to involve and empower youth to make informed choices, take action and develop responsible attitudes and behaviours; and
- supporting initiatives fostering meaningful youth participation in HIV and AIDS policy and programming at all levels.

**Given UNESCO's commitment to and prioritisation of education sector responses to HIV and AIDS, a strategic area of action will be to support education sector HIV and AIDS policy development and implementation. This will include support for the development and implementation of:**

- policies that address the HIV epidemic's impact on the supply, demand, quality and outcomes of the sector;
- workplace and human resource policies to minimise sector vulnerability and susceptibility to HIV and AIDS, to protect employees' rights and to enforce non-discrimination policies that address recruitment, advancement, continued employment and benefits; and
- policies that address prevention, treatment, care and support, workplace issues, and overall management of the response (for work in this area, see Box 7, page 28).

UNESCO will also support the further integration of education sector responses in national policy frameworks and guidance, promoting the full engagement and commitment of the education sector in national responses to the epidemic.

UNESCO also recognises that no matter how good a policy is, a plan is still required to support its implementation and enforcement. UNESCO will promote the establishment of realistic, costed and prioritised education sector plans to respond to HIV and AIDS that are based on wide consultation with government, civil society, the private sector and other partners, and mainstreamed into existing processes.

**UNESCO, working with its partners, will maintain a focus on:**

- Supporting Member States to develop a holistic HIV and AIDS policy for education (addressing prevention, treatment, care and support, workplace issues, and management of the response) and to undertake its regular review and revision.
- Promoting the development of time-bound, prioritised and costed implementation plans based on consultative processes, to be used to mobilise resources and coordinate activities across all sectors.
- Building capacity at all levels with regard to information-based, evidence-informed policy development, decision-making and programming.

### 3. Technical Support and Capacity Enhancement

UNESCO will facilitate, through its network of institutes and regional, cluster and country offices and its partnership with other UNAIDS Cosponsors, civil society organizations and development partners, access to ongoing technical support and capacity-building for Member States in the implementation of comprehensive education sector responses to HIV and AIDS (for an example of UNESCO's support in this area, see Box 5).

UNESCO will also continue to identify and reinforce synergies with other initiatives and frameworks to ensure the solid base of human and institutional capacity at all levels, using all possible modalities and structures. This includes, for example, strengthening linkages with other initiatives such as the UN Decade of Education for Sustainable Development (DESD), the Teacher Training Initiative in sub-Saharan Africa (TTISSA), the Focusing Resources on Effective School Health (FRESH) partnership, the EFA-FTI Partnership and operational frameworks at the country level such as the "Three Ones", UNDAF and the UN Country and Regional Teams on HIV and AIDS (see Box 6, page 24).<sup>38</sup>

Equally important, UNESCO will reinforce its internal capacity by providing regular opportunities for knowledge and skills development, facilitating communication and coordination, and allocating sufficient resources (including human, material and financial) to programmes and interventions. UNESCO's HIV and AIDS Workplace Committee has been instrumental in developing a policy on HIV and AIDS in the workplace that provides an important framework for UNESCO's efforts to make its workplace a safer and more protective environment. The policy aims to ensure that all employees "are aware of HIV and AIDS and the ways of HIV transmission as well as its prevention; have sufficient access to HIV- and AIDS-related information, care and support; receive sufficient guarantees about confidentiality; are protected from discrimination on the basis of real or perceived HIV infection; and create a supportive work environment."<sup>39</sup> Orientation training sessions at UNESCO Headquarters on HIV and AIDS in the Workplace and UN-based training for field office staff support awareness-raising, skills development, and reduced stigma and discrimination related to HIV and AIDS. UNESCO is also an active partner in the 'UN Cares' programme of the United Nations which aims to provide education, care and support for UN employees throughout the world.

### Box 5 Addressing Stigma and Discrimination

There has been increasing awareness of the harmful effects of stigma and discrimination and how these can present powerful barriers to people accessing HIV prevention, treatment, care and support services. HIV-related stigma and discrimination build on and reinforce other forms of discrimination related to age, sexuality, gender, ethnicity and income. For example, injecting drug users, men who have sex with men, and sex workers often face social and economic discrimination, prejudice and human rights violations which further deepen their vulnerability to HIV.

Strategies to overcome stigma and discrimination must be a central aspect of responses to the

epidemic. UNESCO will incorporate awareness of stigma and discrimination as part of its technical support and capacity-building work and engage actively in identifying effective ways of meeting the challenge posed by it. This includes supporting Member States to avoid responses that unintentionally reinforce or contribute to stigma and discrimination. Education to enable individuals and communities to understand the forms that stigma and discrimination can take and to empower them with the knowledge and know-how to prevent it will be a critical element of UNESCO's support as will other initiatives identified in UNESCO's *Integrated Strategy to Combat Racism, Discrimination and Related Intolerance*.



**“High priority should be given to training teachers to teach about HIV and AIDS. Both in-service and pre-service teacher training should include compulsory HIV and AIDS components that are examinable. HIV and AIDS should not be taught in isolation but as part of a wider sexual reproductive health framework that is culturally appropriate and based on scientifically-accurate information rather than ideologically driven.”**

**Margaret Wembete, Founder/Chairperson, Kenya Network of HIV Positive Teachers (KENEPOTE) <sup>40</sup>**

**UNESCO, working with its partners, will intensify support for capacity development and enhancement at multiple levels:**

- At the individual level, as part of a continuum of lifelong learning, through support for the development of knowledge; the adoption of practices; and the promotion of attitudes that reduce vulnerability and promote inclusiveness and support for those affected or infected by HIV. This includes support to teachers and other educational staff to address HIV and AIDS in their own lives and in the lives of those they instruct and mentor.
- At the community level, through facilitation of information and communication exchange including the reinforcement of local capacity to effectively use information and communication tools; the development and enrichment of strategic partnerships; and coordination for the establishment of a seamless delivery of high-quality HIV and AIDS prevention, treatment, care and support services.
- At the systemic level, through furthering capacities in the collection, analysis, dissemination and use of evidence; developing and supporting the adaptation and use of normative guidance, standards, manuals and other implementation support tools; and encouraging the establishment of a comprehensive and holistic response agenda, including prevention, treatment, care and support, workplace issues, and management of the response.
- At the policy level, through support to ministries of education and their civil society counterparts in situational analysis and strategic planning, management and budgeting, and stakeholder coordination and consultation to ensure broad engagement and consensus.



## 4. Coordination and Harmonisation

UNESCO is strongly committed to the GTT recommendations, the UNAIDS division of labour and efforts underway in the context of UN reform to improve coordination, particularly within the multilateral system; to resolve areas of duplication and gaps in programming; to propose ways to streamline, simplify and harmonise procedures and practices to improve country effectiveness in the response to AIDS; and to support the scale-up of information and services across the continuum of prevention to treatment, care and support.<sup>41</sup>

UNESCO will also continue to provide leadership and effective coordination of global resources that can be brought to bear at the country level to assist Member States to address HIV and AIDS, utilising UNAIDS and other mechanisms. Through EDUCAIDS, UNESCO contributes to linking the work of many partners into a cohesive and coherent set of actions, programmes, and policies at the national level, supporting country assessments and plans for action (see Box 6).<sup>42</sup>

UNESCO will also expand support, through EDUCAIDS and other mechanisms, for coordination at the country level through partner engagement in analysis, planning, implementation and evaluation of activities. Clearly, improved coordination within the sector is necessary but insufficient — UNESCO will also support the improved integration of the education sector within the multisectoral efforts to address the challenges posed by HIV and AIDS.

### UNESCO, working with its partners, will continue to:

- Support alignment and harmonisation through its involvement as a founding Cosponsor of UNAIDS and with agreed frameworks such as UNAIDS' effort to move toward universal access to comprehensive HIV prevention programmes, treatment, care and support, UN reform, EFA and the MDGs.
- Encourage linkages and synergies with similar initiatives and reinforce strategic partnerships and alliances through, for example, UNESCO's coordination of the UNAIDS IATT on Education and participation in other UNAIDS IATTs and networks.
- Support coordination at the country level by working within agreed-upon mandates, such as the "Three Ones", UNDAF, and Joint Country or Regional Teams on HIV and AIDS, where established.
- Support *internal coordination* among UNESCO's education, natural science, social and human sciences, culture and communication and information sectors, institutes, and regional, cluster and country offices in the development, implementation, and evaluation of UNESCO's support to national responses as well as reinforce linkages across UNESCO's core EFA initiatives (EDUCAIDS, LIFE and TTISSA) in order to scale up and enhance the attention to HIV and AIDS within the EFA framework.

### Box 6

#### Maximising Opportunities for Synergy: EDUCAIDS and Other Key HIV & AIDS Initiatives

Because EDUCAIDS relies strongly on principles of joint action, UNESCO commissioned a review in 2006 to identify opportunities for collaboration and coordination (nationally and globally) between various initiatives that currently address HIV and AIDS in the education sector and the EDUCAIDS initiative.

The review found that EDUCAIDS complements the work of a number of other initiatives and that it can fill important gaps found in existing efforts. EDUCAIDS was also identified as an important framework to

move forward on collective priorities and areas of action. UNESCO remains committed to strengthening synergies and linkages between initiatives to maximise opportunities and impact at the country level.

Source: UNESCO. *Linking EDUCAIDS with other On-going Initiatives: An Overview of Opportunities - An Assessment of Challenges*. Paris, UNESCO, 2006. Accessed online 15 February 2007 at: <http://unesdoc.unesco.org/images/0014/001479/147916E.pdf>

## 5. Monitoring, Assessing and Evaluating Progress

UNESCO will continue to work with partners to monitor, assess and evaluate trends in the epidemic; the coverage, quality and effectiveness of programmes; progress toward agreed goals and commitments; and the impact of AIDS on individuals and systems. To the greatest extent possible, UNESCO will base its programming on assessments undertaken in consultation with country partners and other stakeholders to avoid duplication, promote coordination, and contribute to the implementation of holistic responses.

UNESCO will also enhance the capacity of Member States to monitor, assess and evaluate progress including, for example, building the capacity of education planners to predict and manage the impact of HIV and AIDS on education systems and sub-systems. This work will be undertaken within the framework of established monitoring mechanisms at the country level, within the context of the “Three Ones” and linking with established data systems and other efforts to compile data such as the annual EFA Global Monitoring Report.

### **Working with its partners, UNESCO will continue to:**

- Support the development, adaptation and use of tools to undertake situation analyses and needs assessments, and monitor and evaluate policy and practice.
- Work within the framework of agreed mechanisms so as not to duplicate efforts or add cumbersome processes but rather to ensure effective and efficient use of resources, rapid action and results-based management.
- Synthesise lessons learned and good policies and practices in monitoring and evaluation, knowledge-sharing and accountability so as to support evidence-informed policy development, planning and programme implementation.



# HOW UNESCO WILL IMPLEMENT THE STRATEGY

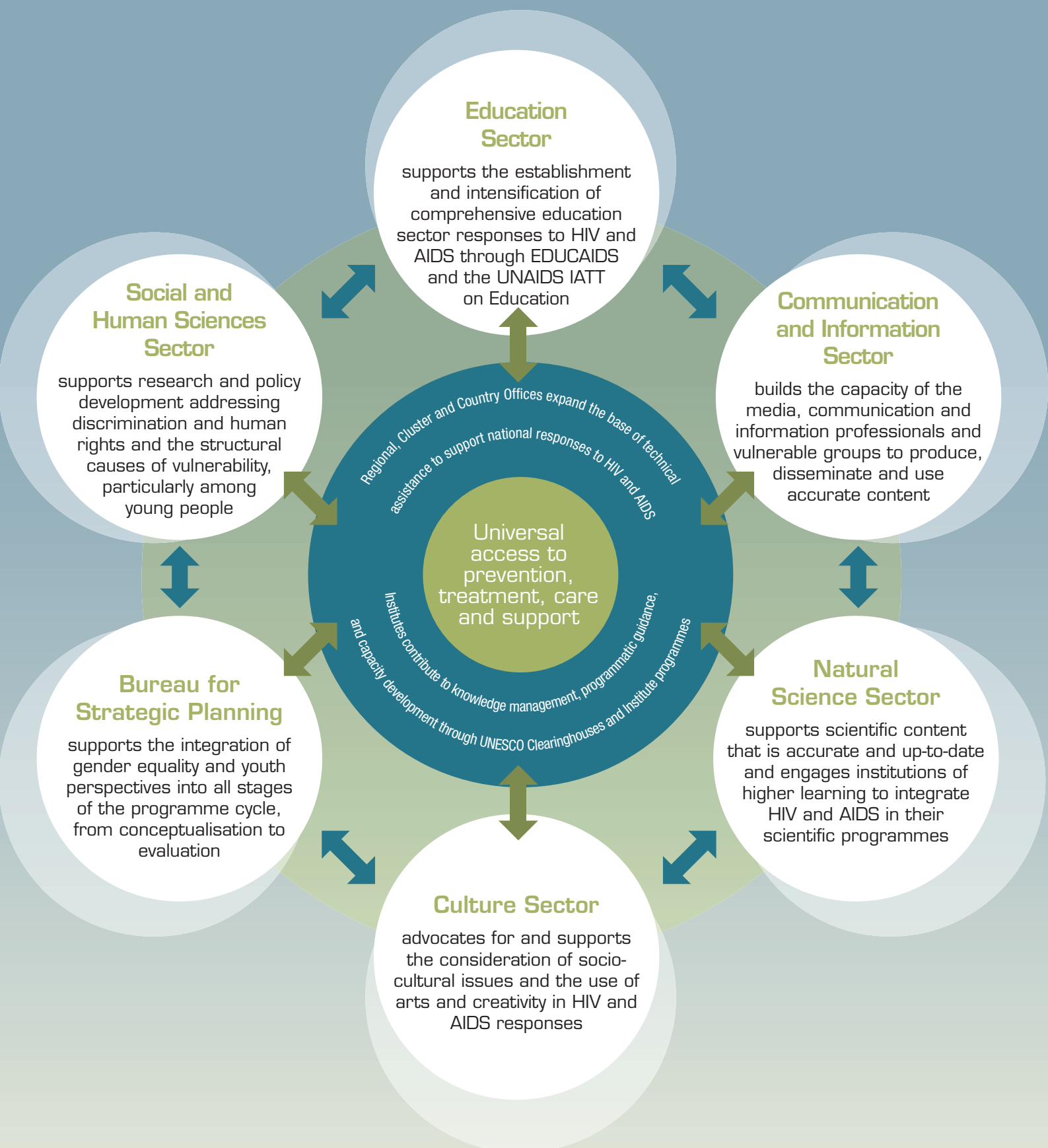
**U**NESCO's distinctive mix of competences in education, natural science, social and human sciences, culture, and communication and information gives it an interdisciplinary, organizational and technical capacity that is particularly suited to contributing to the achievement of universal access to comprehensive HIV prevention programmes, treatment, care and support. Every sector, institute, regional bureau, cluster and country office of UNESCO has contributed to and continues to strengthen the response on HIV and AIDS through strategic and complementary approaches (see Figure 3).

As education has been identified as key to the response and an area of UNESCO's comparative advantage, much of UNESCO's actions place special emphasis on addressing risk, vulnerability and system-strengthening through this means. Collaborations across sectors, institutes and field offices have ensured coordinated and holistic responses and will continue to be promoted. For example, the Culture Sector is working with the Education Sector, the Bureau for Strategic Planning, and field offices to ensure that cultural norms, beliefs, roles and practices are seen not only as an obstacles but also as valuable resources to be mobilised in response to the epidemic and that programmes are culturally appropriate.

**UNESCO has also put in place a number of internal mechanisms for intersectoral coordination and communication and for strengthening partnerships and wider coordination. These include:**

- The coordination of all of UNESCO's work on HIV and AIDS, a function based in the Education Sector, is overseen by the UNESCO Global Coordinator for HIV and AIDS with support from the UNESCO Focal Point on HIV and AIDS. The function ensures the global coherence of UNESCO's programme on HIV and AIDS and interagency coordination within the framework of UNAIDS.
- A Consultative Group on HIV and AIDS comprised of staff from all of UNESCO's sectors which meets monthly to coordinate and harmonise UNESCO's actions on HIV and AIDS. Sectoral HIV and AIDS focal points are responsible for ensuring two-way communication and coordination between sectors and with the coordination function of UNESCO. UNESCO has also recently strengthened regional HIV and AIDS focal points to promote collaboration and communication exchange with UNESCO field offices and among UNAIDS Cosponsors, civil society and others.

**Figure 3: How UNESCO Mainstreams HIV and AIDS in All its Sectors to Promote Universal Access to Prevention, Treatment, Care and Support**



## Box 7

### Examples of UNESCO Harnessing Inter-Agency Strengths to Ensure a Comprehensive Education Sector Response to HIV and AIDS

UNESCO collaborates with ILO on the development of workplace policies for the education sector with the aim of supporting countries to address HIV and AIDS as a workplace issue. Tripartite workshops in the Caribbean and in Southern Africa have led to the development of regional policies which have been published and distributed widely.<sup>43</sup>

UNESCO works with WHO on HIV and AIDS treatment education. The two agencies cosponsored a technical consultation<sup>44</sup> in November 2005, bringing together technical practitioners with experience in treatment education from government agencies, international and local NGOs, UN agencies and

networks of people living with HIV. Building on the Consultation, the two agencies signed a collaborative agreement in 2006 to formalise collaboration in this technical area.

Working with UNHCR, UNESCO is supporting educational responses to HIV and AIDS for refugees and internally displaced persons (IDPs). A recent discussion paper for decision-makers<sup>45</sup> and forthcoming guidance and materials support the formulation and implementation of educational policies and programmes to address the prevention, treatment, care and support needs of refugees and IDPs.

UNESCO's work is also undertaken in collaboration with other UN agencies through active involvement in the UNAIDS programme and through inter-agency partnerships on specific initiatives (see Box 7). UNAIDS IATTs have proved to be an important vehicle for implementation, building on the collective strengths of agencies on different issues such as: voluntary counselling and testing, prevention of mother-to-child transmission of HIV, and drug use, and key groups such as young people and children affected by AIDS.

The UNAIDS IATT on Education, established in 2002 and convened by UNESCO, continues to support accelerated and improved education sector responses to HIV and AIDS. The IATT recently commissioned an Education Sector Global HIV & AIDS Readiness Survey.<sup>46</sup> Ministries of Education in over 70 countries and civil society organizations in 18 countries analysed the impact of AIDS on education, identifying areas of progress

and weaknesses in their response to date. Ministries, development partners, and UNAIDS Cosponsors have indicated that the report is a useful baseline for monitoring and evaluation as well as for promoting comprehensive education sector responses to HIV and AIDS.

At the regional level, collaborative mechanisms have been established to assist countries in preparing and implementing HIV- and AIDS-related components of their national plans of action. In areas in which regional level UN HIV and AIDS teams are being established, UNESCO is committed to supporting the UN Regional and Country Teams to implement effective strategic programmes; to mobilise human, information and financial resources to enhance the UN system's contribution to the HIV and AIDS response; and to establish and strengthen strategic partnerships in support of UN Regional and Country Team actions.

At the country level, UNESCO works in partnership with ministries, civil society partners (including, for example, youth groups and NGOs), professional associations, research institutions, teachers and teacher training institutions, UNAIDS Cosponsors and other development partners. Country level Joint UN Teams on AIDS are the primary entry points for supporting the integration of HIV and AIDS activities into existing frameworks, such as UNDAF, and the “Three Ones.” They are also a logical intervention point for supporting coordination efforts, particularly for the implementation of EDUCAIDS (see Box 8). Another important dimension of UNESCO, and one of its comparative advantages, is the existence of mechanisms at country and local levels, namely the global network of national commissions for UNESCO as well as the network of associated NGOs and UNESCO clubs, that expand beyond the “national office” concept.



## Box 8 EDUCAIDS at the Country Level

The Joint UN Teams on AIDS play a significant role in assisting countries to determine priorities and strategies for tackling development challenges and present a logical intervention point for introducing EDUCAIDS.

Through mechanisms such as the Joint UN Team, UNESCO supports the development of a needs or gap analysis at the country level. The national HIV and AIDS team and/or national authorities set the priorities for meeting these needs or closing the gaps.

UNESCO then supports national partners, along with other identified partners, particularly those active at the country level (e.g., multilateral and bilateral

agencies, NGOs) to set in place the necessary actions to meet the priorities in a timely manner. There is no single ‘one size fits all’ approach for undertaking this process of gap analysis, prioritisation and action work planning. What is essential, however, is the commitment to work through an inclusive process, ensuring opportunities for building ownership and active involvement of key stakeholders in the education sector.

Source: UNESCO, *EDUCAIDS Framework for Action: Toward a Comprehensive Education Sector Response*, Paris, UNESCO, 2006. Accessed online 15 February 2007 at: <http://unesdoc.unesco.org/images/0014/001473/147360E.pdf>

# MONITORING AND EVALUATING UNESCO'S RESPONSE TO HIV AND AIDS

**R**egular monitoring and evaluation of efforts on HIV and AIDS are essential to track progress. Ongoing monitoring and evaluation are important to ensure that the strategy remains relevant as the epidemic and the response to it evolve. Before the advent of ART and progress in recent years to increase access to treatment, HIV and AIDS strategies were significantly different from what they are today, with different priorities based on the situation and context at the time. The world's response to HIV and AIDS is considerably different today than it was even a few years ago, in light of new prevention technologies, increased resources and greater commitment and leadership. All these shifting factors need to be taken into account and used to inform the development of and changes to a strategy.

Recent developments that have influenced the current UNESCO strategy on HIV and AIDS have been highlighted in this document, notably the move towards universal access to comprehensive HIV prevention programmes, treatment, care and support and the growing importance given to improving coordination and harmonisation among those involved in the response to the epidemic, as reflected in the Global Task Team recommendations and the recommendations for UN reform. As the evidence base expands on the most effective actions to address HIV and AIDS (for example, the critical importance of involving people with HIV and others who are particularly vulnerable to HIV), this must also be apparent in UNESCO's strategy. The promotion of emerging prevention technologies (i.e. male circumcision, pre-exposure prophylaxis and microbicides) also needs to be followed closely and, when conclusive evidence is available, used to inform UNESCO policy and practice.

The monitoring and evaluation of UNESCO's response will continue to be part of the broader evaluation processes and framework within UNAIDS to monitor, document and report on impact. UNESCO's medium-term strategy and biennium priorities are grounded in the agreed principal outcomes for UNAIDS joint programme support towards universal access to comprehensive HIV prevention programmes, treatment, care and support (see Box 9). UNESCO will continue to engage with UNAIDS Cosponsors and the Secretariat in efforts to develop coherent, comprehensive and multidisciplinary sets of key outputs to achieve these principal outcomes and to jointly budget, plan, programme, measure and report on progress at the end of each biennium.

Moreover, UNESCO's strategy on HIV and AIDS is situated as part of the Organization's three core EFA priorities, which are LIFE, TTISSA and EDUCAIDS. As such, UNESCO will continue to monitor and report regularly within UNESCO and externally on progress delivering on UNESCO's mandate.

## Box 9

### Principal Outcomes for 2008-2009 UNAIDS Unified Budget and Workplan for Joint Programme Support towards Universal Access to Comprehensive HIV Prevention Programmes, Treatment, Care and Support

1. Strengthened leadership and resource mobilisation for a broad-based AIDS response at all levels, including governments, civil society, people living with HIV, and other non-state partners.
2. Improved planning, financing, technical assistance and coordination at all levels for a sustainable multisectoral AIDS programmatic response, addressing the impact of the epidemic and integrated with national development efforts.
3. Strengthened evidence base and accountability of the AIDS response through greater availability and use of strategic information, including monitoring and evaluation, surveillance and resource tracking.
4. Enhanced human resource and system capacities at all levels of government, civil society and other non-state partners to implement comprehensive HIV and AIDS responses, including improved availability of and access to affordable HIV commodities.
5. Strengthened human rights-based and gender-responsive policies and approaches to reduce stigma and discrimination, increase knowledge of sero-status and improve equity in access to services in all settings.
6. Increased coverage and sustainability of programmes for those engaging in injecting drug use, sex between men and sex work.
7. Increased coverage and sustainability of programmes addressing the vulnerability of and impact on women and girls, young people, children and populations of humanitarian concern.





## CONCLUSION

In revising UNESCO's strategy for responding to HIV and AIDS, the aim has been to better position UNESCO to engage with the unfolding nature of the epidemic within dynamic international, regional and national contexts. The global AIDS epidemic continues to grow and evolve, and responses must keep pace by being informed by available evidence and approaches, based on widespread consultation with key stakeholders, and undertaken through strategic alliances and partnerships at all levels. Such efforts need to be at a scale capable of making a significant impact on the epidemic and its consequences.

There is both continuity and change in this process of revising UNESCO's Strategy. UNESCO's key strategic thrusts in the period ahead will build on past achievements outlined in the Organization's previous strategies while also aiming to fulfil its responsibilities in the UNAIDS division of labour and the 2007-2010 Strategic Framework for UNAIDS support to countries' efforts to move towards universal access. UNESCO also remains committed to efforts underway to support strengthened coordination, alignment and harmonisation to rapidly scale up the AIDS response, in the context of UN reform, the "Three Ones" principles, the MDG agenda and the Paris Declaration on Aid Effectiveness. UNESCO will also ensure internal synergies, aligning its actions on HIV and AIDS to contribute to other UN priorities in education, especially the EFA goals, the UNLD and the DESD.

The key aspect of the revised strategy is the clear articulation of the core actions within UNESCO's response, grounded upon the vision, goals, objectives and principles which give shape and meaning to those actions. This revised strategy gives pride of place to the Organization's responsibilities under the UNAIDS division of labour, namely, to act as the lead organization for HIV prevention with young people in educational institutions. UNESCO will continue to support, particu-

larly through EDUCAIDS, comprehensive education sector engagement with the HIV and AIDS response at the national level. This includes harnessing UNESCO's multisectoral capacities to use all educational modalities (formal, non-formal and informal) and all elements and components of the education system to address the epidemic in an efficient and effective way.

UNESCO will also continue to engage as a main partner in eight other technical support areas designated in the UNAIDS division of labour, within the overarching goal of supporting Member States to move towards universal access to comprehensive HIV prevention programmes, treatment, care and support. In all of its work, UNESCO will draw on the strengths and resources of its sectors, institutes and field offices to support advocacy for evidence-informed policies and practices; to provide policy and programmatic guidance, technical support and capacity enhancement; to promote effective coordination and harmonisation; and to monitor and evaluate progress.

This focus on stronger, more strategic, and coordinated responses to prevent the further spread of HIV and to protect individuals, families, communities, institutions and nations from the impact of AIDS is at the heart of UNESCO's strategy.

# ENDNOTES

- <sup>1</sup> UNAIDS and WHO. *2006 AIDS Epidemic Update*. Geneva: UNAIDS, 2006. Accessed online 15 February 2007 at: [http://data.unaids.org/pub/EpiReport/2006/2006\\_EpiUpdate\\_en.pdf](http://data.unaids.org/pub/EpiReport/2006/2006_EpiUpdate_en.pdf)
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- <sup>3</sup> Ibid, p. 8.
- <sup>4</sup> Glynn JR, Carael M, Auvert B, *et al.* Why Do Young Women Have a Much Higher Prevalence of HIV than Young Men? A Study in Kisumu, Kenya and Ndola, Zambia. *AIDS*, 2001,15 (Suppl. 4):S51-60; Gregson S, Garnett GP. Contrasting Gender Differentials in HIV-prevalence and Associated Mortality Increase in Eastern and Southern Africa: Artefact of Data or Natural Course of Epidemics. *AIDS*, 2000,14 (Suppl. 3):S85-S99; Macphail C, Williams B, Campbell C. Relative Risk of HIV Infection among Young Men and Women in a South African Township. *International Journal of STD and AIDS*, 2002,13:331-42.
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- <sup>6</sup> Coverage figures are calculated as the estimated number of people receiving ART divided by the estimated number of people needing ART in 2005 (or, for Latin America and the Caribbean, 345,000/460,000\*100). WHO/UNAIDS. *Progress in Scaling Up Access to HIV Treatment in Low and Middle-Income Countries*. June 2006 Fact Sheet. Geneva: WHO/UNAIDS, August 2006. Accessed online 15 February 2007 at: [www.who.int/hiv/toronto2006/FS\\_Treatment\\_en.pdf](http://www.who.int/hiv/toronto2006/FS_Treatment_en.pdf)
- <sup>7</sup> Ibid.
- <sup>8</sup> UNAIDS. *2006 Global Report on the AIDS Epidemic*. Geneva: UNAIDS, 2006, p. 52. Accessed online 15 February 2007 at: [http://www.unaids.org/en/HIV\\_data/2006GlobalReport](http://www.unaids.org/en/HIV_data/2006GlobalReport)
- <sup>9</sup> UNAIDS. *Global Task Team on Improving AIDS Coordination among Multilateral Institutions and International Donors*. Geneva: UNAIDS, 14 June 2005. Accessed online 15 February 2007 at: [http://data.unaids.org/Publications/IRC-pub06/JC1125-GlobalTaskTeamReport\\_en.pdf](http://data.unaids.org/Publications/IRC-pub06/JC1125-GlobalTaskTeamReport_en.pdf)
- <sup>10</sup> UNAIDS. *UNAIDS Technical Support Division of Labour: Summary & Rationale*. Geneva: UNAIDS, 2005. Accessed online 15 February 2007 at: [http://data.unaids.org/una-docs/JC1146-Division\\_of\\_labour.pdf](http://data.unaids.org/una-docs/JC1146-Division_of_labour.pdf) The Lead Organization is primarily responsible for coordinating the provision and/or facilitation of high quality technical support in the select area, while Main Partners are other members of the UNAIDS family providing technical support in this area.
- <sup>11</sup> All 17 areas of the UNAIDS Division of Labour can be found in Annex 2.
- <sup>12</sup> United Nations. *Delivering as One: Report of the Secretary-General's High Level Panel Report on UN System-Wide Coherence in the Areas of Development, Humanitarian Assistance and the Environment*. New York: UN, November 2006. Accessed online 15 February 2007 at: <http://www.un.org/events/panel/resources/pdfs/HLP-SWC-FinalReport.pdf>
- <sup>13</sup> One national AIDS coordinating authority, one national strategic plan for HIV and AIDS, and one monitoring and evaluation system. UNAIDS. *The "Three Ones" in Action: Where We Are and Where We Go from Here*. Geneva: UNAIDS, May 2005. Accessed online 15 February 2007 at: [http://data.unaids.org/publications/irc-pub06/jc935-3onesinaction\\_en.pdf](http://data.unaids.org/publications/irc-pub06/jc935-3onesinaction_en.pdf)
- <sup>14</sup> OECD/DAC. *Paris Declaration on Aid Effectiveness: Ownership, Harmonisation, Alignment, Results, and Mutual Accountability*. Paris: OECD/DAC, 2005. Accessed online 15 February 2007 at: <http://www.oecd.org/dataoecd/11/41/34428351.pdf>
- <sup>15</sup> This definition of formal, non-formal and informal education is drawn largely from UNESCO. *EFA Global Monitoring Report 2006: Literacy for Life*. Paris: UNESCO, 2005. Accessed online 15 February 2007 at: [http://portal.unesco.org/education/en/ev.php-URL\\_ID=43283&URL\\_DO=DO\\_TOPIC&URL\\_SECTION=201.html](http://portal.unesco.org/education/en/ev.php-URL_ID=43283&URL_DO=DO_TOPIC&URL_SECTION=201.html)
- <sup>16</sup> UNESCO. *EFA Global Monitoring Report 2007: Strong Foundations: Early Childhood Care and Education*. Paris: UNESCO, 2006. Accessed online 15 February 2007 at: <http://unesdoc.unesco.org/images/0014/001477/147794E.pdf>
- <sup>17</sup> World Education Forum. 2000. *The Dakar Framework for Action: Education for All: Meeting our Collective Commitments*. World Education Forum, 26-28 April 2000, Dakar, Senegal. Accessed online 15 February 2007 at: [http://www.unesco.org/education/efa/ed\\_for\\_all/dakfram\\_eng.shtml](http://www.unesco.org/education/efa/ed_for_all/dakfram_eng.shtml) Other EFA Goals are also relevant and include: (EFA Goal 1) expanding and improving comprehensive early childhood care and education, especially for the most vulnerable and disadvantaged children and (EFA Goal 6) improving all aspects of the quality of education and ensuring excellence of all so that recognised and measurable learning outcomes are achieved by all, especially in literacy, numeracy and essential life skills.
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- <sup>19</sup> UNESCO. *Final Communiqué of the Sixth Meeting of the High-Level Group on Education for All (EFA)*. 14-16 November 2006, Cairo, Egypt. Paris: UNESCO, November 2006. Accessed online 15 February 2007 at: <http://www.unesco.org/education/HLG2006/Communique22Nov.pdf>
- <sup>20</sup> The other two EFA initiatives are the Literacy Initiative for Empowerment (LIFE) and the Teacher Training Initiative for sub-Saharan Africa (TTISSA).
- <sup>21</sup> UNESCO. *EDUCAIDS: Toward a Comprehensive Education Sector Response. Framework for Action*. Paris: UNESCO, 2006. Accessed online 15 February 2007 at: <http://unesdoc.unesco.org/images/0014/001473/147360E.pdf>
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- <sup>23</sup> Ibid.
- <sup>24</sup> UK Foreign and Commonwealth Office (FCO), *Gleneagles Communiqué on Africa, Climate Change, Energy and Sustainable Development*. London: UK FCO, 2005. Accessed online 15 February 2007 at: [http://www.fco.gov.uk/Files/kfile/PostG8\\_Gleneagles\\_Communique,0.pdf](http://www.fco.gov.uk/Files/kfile/PostG8_Gleneagles_Communique,0.pdf)
- <sup>25</sup> For information on UNESCO's recent programmatic activities, see: UNESCO. *UNESCO's Response to HIV and AIDS*. Paris: UNESCO/ IIEP, 2005. Accessed online 15 February 2007 at: <http://unesdoc.unesco.org/images/0014/001414/141417e.pdf> For access to more than 100 recent resources on HIV and AIDS including policy

- documents, case studies, reports, tools, curricula and other materials produced by UNESCO's sectors, country and regional offices, and institutes, see: UNESCO. *UNESCO Library of Materials on HIV & AIDS CD-ROM*. Paris: UNESCO, 2006. For links to websites, publications, programmatic activities, and other HIV-related news and events undertaken by UNESCO's sectors, institutes, and offices, see: [www.unesco.org/aids](http://www.unesco.org/aids)
- <sup>26</sup> UNESCO. April 2004. *UNESCO's Strategy for HIV/AIDS Prevention Education*. Paris: UNESCO/International Institute of Educational Planning (IIEP). Accessed online 15 February 2007 at: <http://unesdoc.unesco.org/images/0013/001345/134572e.pdf> and UNESCO. April 2001. *UNESCO's Strategy for HIV/AIDS Preventive Education*. Paris: UNESCO, International Institute of Educational Planning (IIEP).
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- <sup>28</sup> These challenges are outlined in UNAIDS. 10 November 2006. Follow-up to the 2006 Political Declaration on HIV/AIDS. 2007-2010 Strategic Framework for UNAIDS Support to Countries' Efforts to Move towards Universal Access. 19<sup>th</sup> Meeting of the UNAIDS Programme Coordinating Board. 6-8 December, 2006, Lusaka, Zambia. Accessed online 15 February 2007 at: [http://data.unaids.org/pub/Report/2006/20061111\\_PCB\\_Strategic\\_Framework\\_2007\\_2010\\_en.pdf](http://data.unaids.org/pub/Report/2006/20061111_PCB_Strategic_Framework_2007_2010_en.pdf)
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- <sup>30</sup> Piot P. AIDS: From Crisis Management to Sustained Strategic Response. *Lancet*, 2006, 368 (9534):526-30. Accessed online 15 February 2007 at: [www.thelancet.com](http://www.thelancet.com)
- <sup>31</sup> For more information on the MDGs, see United Nations. Millennium Development Goals website: <http://www.un.org/millenniumgoals>
- <sup>32</sup> Dr. Peter Piot, UNAIDS Executive Director, *Press Release: Global AIDS Epidemic Continues to Grow*. Geneva: UNAIDS and WHO, 21 November, 2006. Accessed online 15 February 2007 at: [http://data.unaids.org/pub/PressRelease/2006/061121\\_2006\\_EPI\\_Update\\_en.pdf](http://data.unaids.org/pub/PressRelease/2006/061121_2006_EPI_Update_en.pdf)
- <sup>33</sup> UNAIDS. *Intensifying HIV Prevention: UNAIDS Policy Position Paper*. Geneva: UNAIDS, August 2005. Accessed online 15 February 2007 at: [http://data.unaids.org/publications/irc-pub06/jc1165-intensif\\_hiv-newstyle\\_en.pdf](http://data.unaids.org/publications/irc-pub06/jc1165-intensif_hiv-newstyle_en.pdf)
- <sup>34</sup> UNAIDS Inter-Agency Task Team (IATT) on Education. *Education Sector Global HIV & AIDS Readiness Survey 2004: Policy Implications for Education and Development*. Paris: UNESCO, 2006.
- <sup>35</sup> Child in India, as cited in: UNESCO. *HIV & AIDS and Safe, Secure and Supporting Learning Environments. Booklet 2, Good Policy and Practice in HIV & AIDS and Education series*. Paris, UNESCO, 2006. Accessed online 15 February 2007 at: <http://unesdoc.unesco.org/images/0014/001461/146122E.pdf>
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- <sup>37</sup> United Nations. 29 November 2006. *Draft Decision on International Voluntary HIV Counselling and Testing Day*. United Nations General Assembly Resolution A/61/L.40. 61<sup>st</sup> Session of the General Assembly, Agenda Item 46, Follow-Up to the Outcome of the 26<sup>th</sup> Special Session: Implementation of the Declaration of Commitment on HIV/AIDS.
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- <sup>40</sup> Margaret Wembete, Founder/Chairperson, Kenya Network of HIV Positive Teachers (KENEPOTE), presented at the 7<sup>th</sup> Working Group Meeting on EFA, 19-21 July 2006.
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# ANNEX 1: PROGRAMME AND POLICY MILESTONES IN UNESCO'S RESPONSE TO HIV AND AIDS

UNESCO establishes an AIDS prevention education programme with WHO, *The Global Programme on AIDS (GPA)*, in response to the Plan of Action drafted at the 40<sup>th</sup> Session of the International Conference on Education on "Education for the Prevention and Control of AIDS". Activities continue until 2000 and include international seminars, school health programmes, and the development of HIV and AIDS educational materials.

UNESCO's Section for Preventive Education develops a conceptual framework for identifying strategies and priority areas of prevention education.

UNESCO enters into a collaborative project with the World Foundation for AIDS Research and Prevention. Recognised by the Executive Board in its 141<sup>st</sup> Session, the Foundation appeals to private sources to develop a network of integrated research centres, particularly in Africa and Central America, and encourage cooperation between researchers in developed and developing countries.

1987

The 24<sup>th</sup> Session of the Organization's General Conference authorises UNESCO's Director-General to undertake HIV and AIDS activities under the regular programme, and to accord particular attention to strengthening coordination with other UN agencies. The Conference also encourages Member States to participate actively in education programmes and HIV prevention activities for young people, and invites Member States to make generous financial contributions to educational activities to prevent HIV and control AIDS.

1990

UNESCO's Director-General launches the Venice Appeal to collect funds to help strengthen national programmes related to HIV and AIDS. The initiative aims to strengthen scientific research, motivate civil society partners and other leaders to address the ethical and cultural dimensions of the AIDS epidemic, and to ensure schooling for children affected by AIDS.

1991

1993

UNESCO's Science Sector contributes to the advancement of research on HIV through its support to the *Man against Virus* scientific network.

UNESCO cooperation with WHO leads to the implementation of pilot school AIDS education projects in various regions, and the development of a resource package for curriculum planners, adapted to different socio-cultural contexts and translated into more than ten languages.



Over the years, UNESCO's sectors, institutes, regional bureaux and field offices have increasingly intensified their actions, in collaboration with other partners, to respond to HIV and AIDS:



UNESCO joins four other United Nations organizations and the World Bank as a founding member to form a joint and cosponsored programme on HIV/AIDS, called UNAIDS (10 organizations in total form UNAIDS by 2004).

With the launch of UNAIDS, UNESCO's actions become broader in scope—through the involvement of all its programme sectors—while focusing on the specific core objectives of the UNAIDS programme.

UNESCO establishes an HIV and AIDS Coordination Mechanism, including AIDS focal points within each of the five Programme Sectors. Overall coordination of UNESCO's response is delegated to the Assistant Director-General of the Natural Science Sector where the UNESCO-wide focal point for UNAIDS is located.

Cooperation with grass-roots women's organizations is prioritised, particularly in the least developed countries and in Africa due to women's increased vulnerability to HIV and AIDS. Emphasis is placed on the production and dissemination of teaching materials addressed to children and youth, especially girls and women.

1994-95

UNESCO establishes an interdisciplinary and inter-agency cooperation project, "Environment and Population Education and Information for Human Development" in the Approved Programme and Budget for 1994-1995 with three main fields of activity in the: 1) Refine the knowledge base and develop action frameworks to strengthen education, training and information activities; 2) Foster the development of new or re-oriented education, training and informational material to strengthen Member States' capacities and encourage behaviour change among selected target groups; and 3) Mobilise the support of decision-makers and opinion leaders at international, regional and national levels for programmes and activities.

1996

UNESCO identifies preventive education against drug abuse and AIDS as a Main Line of Action (29C/5). UNESCO's preventive educational programmes focuses on promoting the formulation of national plans of action in Latin America and the Caribbean and the Arab States, while in Africa and Asia stress is placed on the development of curriculum and teacher training programmes.

Cultural and media programmes are supported as a vehicle for spreading of preventive education messages.

1997

UNESCO launches with UNAIDS the project "A Cultural Approach to HIV/AIDS Prevention and Care".

1998

At its 154<sup>th</sup> Session, the Executive Board invites the Director-General to continue UNESCO's support to UNAIDS and to strengthen UNESCO's programmes of action contributing to the epidemic, in particular by taking steps to ensure that groups particularly affected by the epidemic benefit from research and means of prevention.

UNESCO reports on its programmes on prevention education to the 30<sup>th</sup> General Conference, including those aimed at: promoting girls' and women's education in Africa; addressing HIV and AIDS and drug abuse among youth; and mobilising action through regional seminars.



In April 2000, more than 1,100 participants from 164 countries gather in Dakar, Senegal, for the World Education Forum. UNESCO, Governments, NGOs, international agencies and partners adopt the Dakar Framework for Action, committing to work in partnership to achieve the EFA goals and targets, including to *“implement as a matter of urgency education programmes and actions to combat the HIV/AIDS pandemic”*.



UNESCO, UNICEF, WHO, the World Bank, Education International, Education Development Center and the Partnership for Child Development launch the FRESH partnership (Focusing Resources for Effective School Health). Convened by UNESCO, FRESH has a particular interest in school health as an entry point for work on HIV and AIDS. Through the FRESH framework, partners contribute to HIV prevention and related discrimination through integrating HIV into school health policies, skills-based health education, school-based health services, and initiatives related to water, sanitation and the environment.

The Approved Programme and Budget for 2000-2001 includes activities to mobilise decision-makers in ministries of education and health concerning the impact of AIDS on the demand, supply, and quality of education; to address HIV and drug abuse; and to establish, as a matter of urgency, effective educational and preventive programmes at the national level.

## 1999

A total of 32 UNESCO activities funded by UNAIDS Unified Budget and Workplan (UBW) amounts to US\$ 2.6 million.



UNESCO/UNAIDS launch a youth initiative on HIV & AIDS and human rights.

## 2000

UNESCO IIEP launches a programme, *HIV/AIDS Impact on Education*, to support country initiatives to a) Determine the impact of HIV and AIDS on education systems; and b) Establish measures to cope with the impact. Programme components include: information exchange through a multilingual, interactive website; technical assistance to measure impact and develop interventions; and capacity development of education systems to manage the impact of AIDS

At its 159<sup>th</sup> Session, UNESCO's Executive Board invites the Director-General to give very high priority to activities designed to meet countries' specific HIV prevention needs, with special emphasis on the countries hardest hit by the epidemic (159 EX/2000). The Board commits the Organization to develop a global UNESCO strategy on HIV and AIDS and to include it in the Organization's Medium Term Strategy and in the Programme for 2002-2003.

UNESCO strengthens the national research capacity in screening for the molecular basis of AIDS and HIV prevention through support of a UNESCO Chair and the award of fellowships to young scientists from developing and least developed countries, and the further development of the network of AIDS research centres.



UNESCO's Director of IIEP is appointed UNESCO's Global Coordinator on HIV and AIDS. The Coordination function moves from the Natural Science Sector to the Education Sector in IIEP.

UNESCO launches the Families First Africa initiative jointly with the Italian Government and three research institutions to develop a paediatric vaccine to eliminate mother-to-child transmission of HIV.

UNESCO's HIV and AIDS in the Workplace Committee is established to advise the Director of Human Resource Management on the development, implementation and monitoring of workplace programmes and policies on HIV and AIDS.

UNESCO publishes a series of handbooks on culturally appropriate responses to HIV and AIDS.

UNESCO takes on the rotational Chair of the Coordinating Committee of the Cosponsoring Organizations of UNAIDS.

UNESCO develops a strategy paper, *UNESCO's Strategy for HIV/AIDS Prevention Education*, to serve as the foundation for UNESCO's programme for 2001-2005.

UNESCO and UNDP host a side event at the XIII International AIDS Conference in Barcelona including two sessions: «The impact of HIV/AIDS on education - do we know enough?» and «Approaching and Managing HIV/AIDS in the Education Sector».

UNESCO/UNAIDS Small Grants Facility established to support the implementation of youth projects addressing HIV-related stigma and discrimination.

Regional HIV and AIDS focal point meetings are held to build capacity and strengthen collaboration across countries and sectors on HIV and AIDS.

UNESCO establishes Clearinghouses on: the Impact of HIV/AIDS on Education (at IIEP) and Curriculum for HIV/AIDS Preventive Education (at IBE).

## 2001

## 2002

## 2003

UNESCO develops a five-year strategic plan of action, endorsed by UNESCO's Executive Board.

Establishment of the UNAIDS Inter-Agency Task Team on Education; UNESCO is identified as the Convenor.

UNESCO identifies 5 strategic thrusts for its HIV/AIDS programme: 1) Improving understanding of the problem through data, research, assessment and sharing of good practice; 2) Promoting changes in all learning environments, both formal and nonformal, so that they reach out to attract learners in non-discriminatory and supportive ways; 3) Curbing the pandemic through preventive education that emphasises life skills and other approaches such as school health and that focuses on teachers, curriculum and youth involvement; 4) Mobilising networks for wider reach and improved social dialogue, in particular with youth networks, teachers and educators, administrators, planners, UNITWIN UNESCO Chairs/Programme networks, Associated Schools Project Networks (ASP-net), etc.; and 5) Maintaining global clearinghouses related to the impact of HIV and AIDS on education.

UNESCO continues to support countries most affected by the pandemic to improve access to scientific knowledge on HIV and AIDS in order to strengthen national efforts aimed at securing treatment for all.



UNESCO's Director-General designates Lady Cristina Owen-Jones as UNESCO's Goodwill Ambassador for HIV/AIDS prevention education.

Regional HIV and AIDS focal point meetings are held to build capacity and strengthen collaboration across countries and sectors on HIV and AIDS.

UNESCO and the OPEC Fund for International Development sign an agreement to launch a joint HIV and AIDS initiative in 12 Asian and Arab countries. The project aims to reduce HIV infection among young people by integrating prevention awareness into national education programmes.

UNESCO launches the Literacy Initiative for Empowerment (LIFE) which advocates for literacy in an integrated approach to development, including HIV prevention.

UNESCO expands an ICT programme using online information, media campaigns, and youth information centres to support behaviour change and expand HIV prevention information and services.



UNESCO organises events at the XIV International AIDS Conference in Bangkok, including a satellite session in partnership with the Government of Norway on *Combating Stigma and Discrimination: The Role of Religious Leaders*.

UNESCO's Executive Board (171 EX/Decisions) endorses EDUCAIDS, LIFE and TTISSA as the programmatic core of UNESCO's response to EFA at the country level.

UNESCO continues to support capacity development for media professionals to report on HIV and AIDS through regional workshops and the development of resource books and guidelines.

EDUCAIDS, the Global Initiative on HIV & AIDS on Education, is launched by UNAIDS and led by UNESCO.



UNAIDS launches an initiative to scale up HIV prevention, treatment, care and support with the aim of coming as close as possible to the goal of universal access by 2010. As a UNAIDS Cosponsor, UNESCO contributes to the initiative by supporting comprehensive education sector responses to HIV and AIDS which address the full continuum from prevention to care and support.

## 2004

UNESCO undertakes an external evaluation of its activities related to HIV and AIDS to determine the mandate, strategies and objectives of UNESCO's action and their relevance to local needs; the results, impact, sustainability and added value to principal beneficiaries and users; and the effectiveness of external and internal coordination and partnership.



UNESCO publishes *UNESCO's Response to HIV and AIDS* which illustrates the breadth of activities that UNESCO undertakes to prevent the spread of HIV, and to mitigate the impact of AIDS on families, communities and nations.

UNESCO signs a collaborative agreement with ILO to support the development of HIV and AIDS workplace policies in the education sector. Tripartite workshops are held in the Caribbean and in Southern Africa and lead to the development of workplace policies for the education sector, supporting countries to address HIV and AIDS as a workplace issue.



UNESCO holds a Technical Consultation with WHO on Treatment Education and, the following year, signs a collaborative agreement to formalise collaboration in this technical area.

UNESCO launches orientation sessions on *HIV & AIDS in the UNESCO Workplace* for UNESCO staff for all UNESCO employees to build basic knowledge on HIV and AIDS and to develop a culture of solidarity and care that supports the overall well-being of all personnel.



UNESCO develops its second strategy paper, *UNESCO's Strategy for HIV/AIDS Prevention Education*, to guide its actions in the area of HIV and AIDS for the coming years.

UNESCO signs a collaborative agreement with L'Oréal to launch the programme, *Hairdressers of the World against AIDS*, aimed at raising awareness of HIV and AIDS by offering prevention courses to hairdressers-in-training.



UNESCO organises events at the XVI International AIDS Conference in Toronto, including Skills Building Sessions (in French and English) with WHO on *Scaling Up HIV Treatment Education and Preparedness in Support of Universal Access to Treatment, Prevention and Care*; a Poster Presentation on *Promoting the Use of Quality Socio-cultural Research in the Response to HIV/AIDS in the Asia-Pacific*; a 48 hour film festival on HIV and AIDS in collaboration with MTV; and, on behalf of the UNAIDS IATT on Education: a Bridging Session on *Leadership in Girls' Education: An Essential Component in HIV Prevention*, a Skills Building Session on *Using Evidence to Influence and Strengthen HIV and AIDS Policies and Practices*, and an oral presentation on *Assessing Global Readiness of the Education Sector to Manage and Mitigate HIV and AIDS Impact*. UNESCO also launches at the event a CD-ROM containing more than 100 recent resources on HIV and AIDS produced by UNESCO's sectors, country and regional offices, and institutes (2000 copies are distributed).

UNESCO signs an agreement with the Global Business Coalition on HIV/AIDS (GBC) to reinforce mobilisation on HIV and AIDS. One outcome was a side event at the 2006 High-Level Meeting on AIDS on *UN and Private Sector Collaboration Towards Universal Access: Expanding Partnerships*, cosponsored with the UNAIDS Secretariat, the UN Foundation, ILO and GBC.

UNESCO launches a high-priority Initiative on Teacher Training in sub-Saharan Africa (TTISSA) for 2006-2015. This Initiative aims to increase the number of teachers and improve the quality of teaching by assisting the continent's 46 sub-Saharan countries to restructure national teacher policies and teacher education.

UNESCO updates a specific policy on HIV and AIDS in the Workplace to ensure that all employees: are aware of HIV and AIDS and modes of HIV transmission and prevention; have sufficient access to HIV- and AIDS-related information, care and support; receive sufficient guarantees about confidentiality; are protected from discrimination on the basis of real or perceived HIV infection; and create a supportive work environment.

# 2006

In its 174<sup>th</sup> Session, UNESCO's Executive Board endorses the GTT recommendations on Improving AIDS Coordination among Multilateral Institutions and International Donors. The Board also requests that UNESCO assume the leading role for HIV prevention for young people as outlined in the UNAIDS technical support division of labour, and ensure that UNESCO's activities at the country level are in line with the GTT recommendations.

UNESCO installs preventive commodity vending machines at UNESCO Headquarters to facilitate access to these life-saving items.



UNESCO develops a *Framework for Action* that explains how EDUCAIDS works at the country level and defines a comprehensive education sector response to HIV and AIDS. The Framework is developed following extensive country, regional and global consultations within UNESCO and with EDUCAIDS partners.

UNESCO supports *HIV- and AIDS-related sessions* at the Seventh Working Group meeting on EFA in Paris, France and the Sixth High-Level Group meeting in Cairo, Egypt.

UNESCO develops guidelines on language and content in HIV- and AIDS-related materials. The guidelines support a harmonised use of language and content that reflect a comprehensive, inclusive, and sensitive approach to the epidemic.



# ANNEX 2: UNAIDS TECHNICAL SUPPORT DIVISION OF LABOUR

Technical support areas	Lead Organizations	Main Partners
<b>1. STRATEGIC PLANNING, GOVERNANCE AND FINANCIAL MANAGEMENT</b>		
HIV/AIDS, development, governance and mainstreaming, including instruments such as PRSPs, and enabling legislation, human rights and gender	UNDP	ILO, UNAIDS Secretariat, UNESCO, UNICEF, WHO, World Bank, UNFPA; UNHCR
Support to strategic, prioritized and costed national plans; financial management; human resources; capacity and infrastructure development; impact alleviation and sectoral work	World Bank	ILO, UNAIDS Secretariat, UNDP, UNESCO, UNICEF, WHO
Procurement and supply management, including training	UNICEF	UNDP, UNFPA, WHO, World Bank
HIV/AIDS workplace policy and programmes, private-sector mobilization	ILO	UNESCO, UNDP
<b>2. SCALING UP INTERVENTIONS</b>		
<i>Prevention</i>		
Prevention of HIV transmission in healthcare settings, blood safety, counselling and testing, sexually-transmitted infection diagnosis and treatment, and linkage of HIV prevention with AIDS treatment services	WHO	UNICEF, UNFPA, ILO
Provision of information and education, condom programming, prevention for young people outside schools and prevention efforts targeting vulnerable groups (except injecting drug users, prisoners and refugee populations)	UNFPA	ILO, UNAIDS Secretariat, UNESCO, UNICEF, UNODC, WHO
Prevention of mother-to-child transmission (PMTCT)	UNICEF, WHO	UNFPA, WFP
Prevention for young people in education institutions	UNESCO	ILO, UNFPA, UNICEF, WHO, WFP
Prevention of transmission of HIV among injecting drug users and in prisons	UNODC	UNDP, UNICEF, WHO, ILO
Overall policy, monitoring and coordination on prevention	UNAIDS Secretariat	All Cosponsors
<i>Treatment, care and support</i>		
Antiretroviral treatment and monitoring, prophylaxis and treatment for opportunistic infections (adults and children)	WHO	UNICEF
Care and support for people living with HIV, orphans and vulnerable children, and affected households.	UNICEF	WFP, WHO, ILO
Dietary/nutrition support	WFP	UNESCO, UNICEF, WHO
<i>Addressing HIV in emergency, reconstruction and security settings</i>		
Strengthening HIV/AIDS response in context of security, uniformed services and humanitarian crises	UNAIDS Secretariat	UNHCR, UNICEF, WFP, WHO, UNFPA
Addressing HIV among displaced populations (refugees and IDPs)	UNHCR	UNESCO, UNFPA, UNICEF, WFP, WHO, UNDP
<b>3. MONITORING AND EVALUATION, STRATEGIC INFORMATION, KNOWLEDGE SHARING AND ACCOUNTABILITY</b>		
Strategic information, knowledge sharing and accountability, coordination of national efforts, partnership building, advocacy, and monitoring and evaluation, including estimation of national prevalence and projection of demographic impact	UNAIDS Secretariat	ILO, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, UNODC, WFP, WHO, World Bank
Establishment and implementation of surveillance for HIV, through sentinel/population-based surveys	WHO	UNAIDS Secretariat

This strategy was developed by a team led by Mark Richmond, UNESCO Global Coordinator on HIV and AIDS, a.i., with Chris Castle and Justine Sass in the Section on HIV and AIDS, Division for the Coordination of UN Priorities in Education, and is based on widespread consultation with the Consultative Group on HIV and AIDS, UNESCO's education, natural science, social and human sciences, culture and communication and information sectors, institutes, and regional, cluster and country offices.

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Rural women and adolescent girls in Upper Egypt await the opening of the renovated rural health unit in Shousha village. Fifty percent of Egyptian women marry before the age of 21 and give birth before the age of 22. The TAHSEEN Project builds intergenerational dialogue by training key community and religious leaders to deliver consistent and accurate family planning and reproductive health messages.

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Adolescents participate in a Sports for Life Training of Trainers Workshop in Ethiopia. Here, participants play «The Game», the final competition where participants are game pieces on a board game. During this game, the entire

Sports for Life program is reviewed in a fun environment where participants work in small teams and compete answering questions, showing team spirit and completing soccer challenges. Sports for Life (SFL) is an international health program using sports to involve youth and young adults in reproductive health and HIV/AIDS prevention and care activities.

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Nike and Rimini of 96.9 COOL FM, Abuja, Nigeria, discuss the stigmatisation of HIV victims on the radio.

### p.32

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In the rural district of Josini, South Africa, a mother caring for 5 HIV positive children speaks about her issues and problems with several «Community Carers.» The Oxfam Australia funded program Sibambisene («we are working together») trains these «Community Carers» to go into the rural communities of the KwaZulu-Natal province and educate, support, and help guide families who are affected by and infected with HIV/AIDS.

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