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GOOD POLICY AND PRACTICE
IN HIV & AIDS AND EDUCATION

BOOKLET

6

Pre-service Teacher Training



GOOD POLICY AND PRACTICE IN HIV & AIDS AND EDUCATION

Booklet 6

PRE-SERVICE TEACHER TRAINING

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ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
AusAid	Australian Government Overseas Aid Programme
DoE	Department of Education
EDUCAIDS	UNAIDS Global Initiative on Education and HIV & AIDS
EFA	Education for All
EI	Education International
ESP	Education Sector Plan
ESSP	Education Sector Support Plan
FLEHI	Family Life and Emerging Health Issues
HIV	Human Immunodeficiency Virus
IATT	Inter-Agency Task Team
IBE	International Bureau of Education
ICHA	Curriculum Development Department of the Inter-departmental Committee for HIV/AIDS, Cambodia
IEC	Information, Education and Communication
IIEP	International Institute for Educational Planning
ILO	International Labour Organization
INSET	In-service teacher training
InWent	Capacity Building International
MDG	Millennium Development Goal
MoE	Ministry of Education
MoEYS	Ministry of Education, Youth and Sport
NGO	Non-Governmental Organization
NSP	National Sector Plan
PPAE	Participatory Process Assessment and Evaluation
PRESET	Pre-service teacher training
PRONESA	Programa Nacional de Educación en Sexualidad y Amor (Ecuador)
SPW	Students' Partnership Worldwide
SRH	Sexual and Reproductive Health
STI	Sexually Transmitted Infection
TfaC	Theatre for a Change
TTC	Teacher training college
TTISSA	Teacher Training Initiative in sub-Saharan Africa (UNESCO)
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNATU	Uganda National Teachers' Union
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
UWC	University of the Western Cape, South Africa
VCT	Voluntary Counselling and Testing
WHO	World Health Organization

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FOREWORD

The impact of HIV and AIDS on education systems and classrooms around the world is increasingly recognized as a significant barrier to development, including efforts to achieve Education for All (EFA) and the six goals set at the World Education Forum in Dakar in April 2000. In order to continue progress towards the six EFA goals, increased commitment and action are needed to develop and implement comprehensive strategies that take into account the impact of HIV and AIDS on learners, educators, educational institutions and the education sector as a whole. Furthermore, broader international development goals related to poverty reduction, access to health services and educational expansion, such as those articulated in the Millennium Development Goals (MDGs), will not be met without fully acknowledging and responding to the HIV and AIDS pandemic.

Although there is a need for enhanced evidence-based information on successful HIV and AIDS education interventions, much has already been learned about good practices and policies in the education sector's response to the pandemic. This series of publications on *Good Policy and Practice in HIV & AIDS and Education* aims to further expand our knowledge by presenting ideas, key findings and programmatic examples. These findings and examples are a key resource for decision-makers, programme developers and implementers in the education sector, in the context of HIV and AIDS. This booklet is specifically focused on the role which teacher training institutions, teacher trainers and teachers play in the response to HIV and AIDS. Teacher training – both pre-service and in-service – provides a strategic entry-point for developing the knowledge, skills and values which teachers need to respond to HIV and AIDS in their own lives, in the classroom and in the community. Teachers are the backbone of education and have the capacity to provide hundreds of learners with essential HIV prevention knowledge and skills on a daily basis.

The series of booklets takes into consideration an understanding that the education system reaches beyond the traditional classroom into homes, communities, religious centres and other learning contexts, and thus addresses educational practices in formal and non-formal learning environments. This review is by no means exhaustive, and the examples included are intended to help inspire innovative approaches that capitalize on existing resources, expertise and experience.

We hope that users will find this booklet and others in the series to be useful tools. We welcome any feedback and encourage users to contribute to the development of the series by sharing their input and experiences. For more information on UNESCO's response to HIV and AIDS, please refer to our website: www.unesco.org/aids

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UNESCO GOOD POLICY AND PRACTICE IN HIV & AIDS AND EDUCATION SERIES

This booklet is the sixth in a series of publications addressing key themes in UNESCO’s work on HIV & AIDS and the education sector. It addresses pre-service teacher training. It also includes a bibliography, a list of practical tools and resources, and sources of additional information.

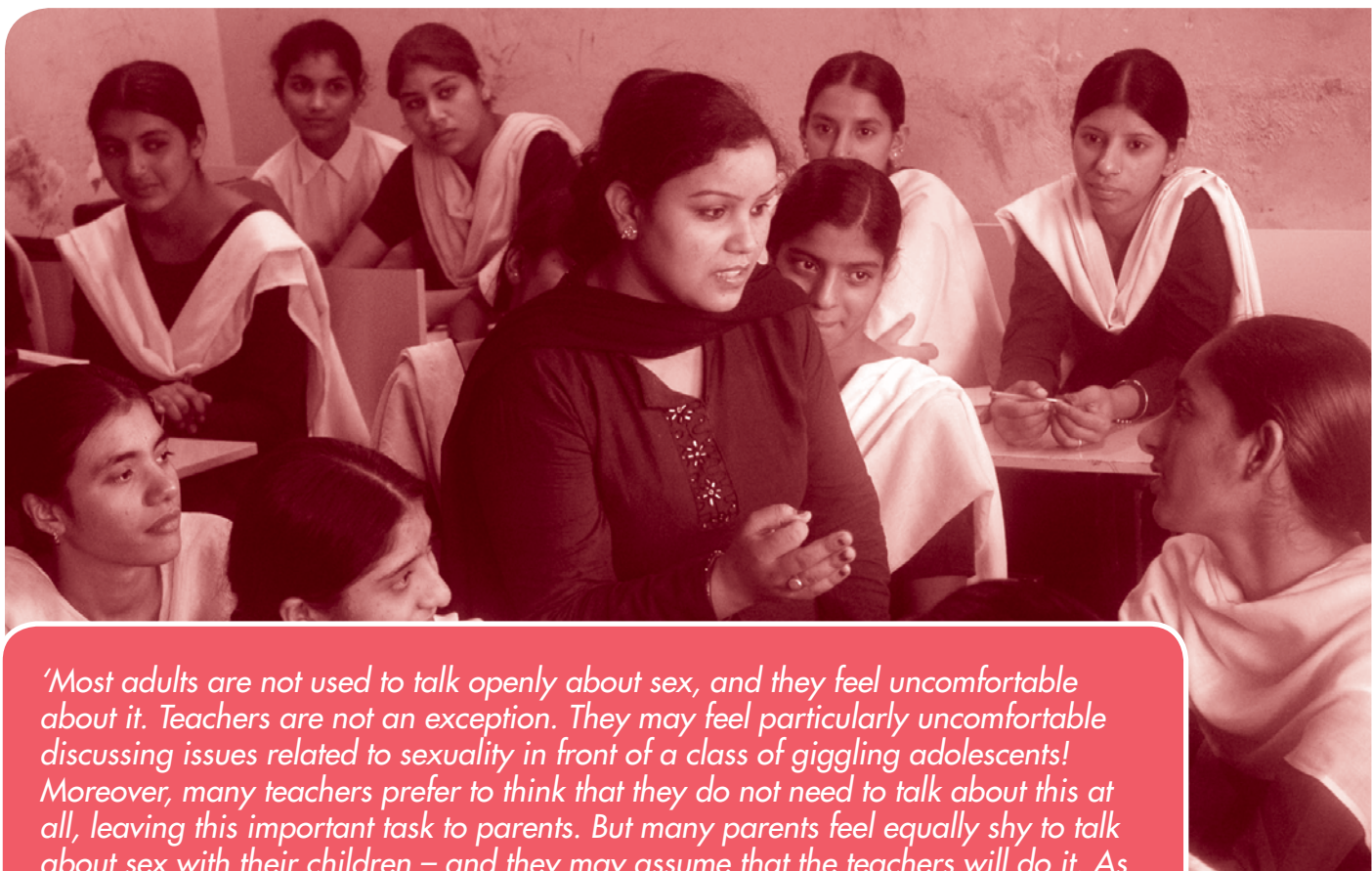
Booklet 1 provides an overview of why HIV and AIDS are important issues for the education sector, identifies weaknesses in current policy and programming responses, and highlights evidence gaps. Booklet 2 discusses issues affecting learners in the context of HIV and AIDS, including rights and access to education, protection, knowledge and skills, and care and support. Booklet 3 addresses issues affecting educators in the context of HIV and AIDS, including training, conduct, and care and support. Booklet 4 concentrates on the role and importance of strategic partnerships in developing education sector responses to HIV and AIDS, while Booklet 5 focuses on the topic of effective learning using illustrative examples.

The booklets are based on a review of published and unpublished literature, programme activities (primarily but not exclusively UNESCO activities) and case studies. They are not intended to provide a comprehensive overview or scientific analysis of experience. Rather the aim is to draw on available knowledge and experience to highlight issues and lessons learned and to suggest policy and programming strategies and actions to address the impact of HIV and AIDS on learners and educators.

Booklet 6

PRE-SERVICE TEACHER TRAINING AND HIV & AIDS

1. INTRODUCTION



'Most adults are not used to talk openly about sex, and they feel uncomfortable about it. Teachers are not an exception. They may feel particularly uncomfortable discussing issues related to sexuality in front of a class of giggling adolescents! Moreover, many teachers prefer to think that they do not need to talk about this at all, leaving this important task to parents. But many parents feel equally shy to talk about sex with their children – and they may assume that the teachers will do it. As you can see, an information and knowledge vacuum is easily created.'

Pakistan, Female, 22 years old¹

Pre-service teacher training has a key role in preparing future teachers to deliver effective sexuality education and HIV prevention education to children and young people in education institutions. At the same time, it has the power to protect student teachers from HIV infection by changing their own knowledge levels, attitudes and behaviours, and to mitigate the impact of HIV and AIDS on people who are directly or indirectly affected by the epidemic.

Whilst comprehensive responses to HIV and AIDS in the education sector are growing in coverage and strength, the most visible efforts to improve the quality of HIV education have focused mainly on improving school-based learning materials and training teachers already in schools. In other areas, particularly in high-burden countries, policies and programming also cover orphans and vulnerable children affected by HIV; prevention, care, treatment and support for teachers and other personnel; parent/community initiatives and an array of learner-led and focused programmes in HIV peer education and social mobilisation.

Rationale

Why focus on pre-service teacher training? As this booklet spells out, pre-service teacher training on HIV and AIDS is a complex field. At the same time, it is key to accessing and strengthening the education sector response at a number of levels. These could be summarised as follows:

- Pre-service teacher training on HIV and AIDS should form part of a comprehensive education sector response to HIV and AIDS;
- Pre-service training is a golden opportunity to address both the *personal* and *professional* needs of trainee teachers. Many of them are young people who need better HIV prevention education as well as being important social role models for the learners and communities they serve;
- Policy-level change in the form and content of pre-service teacher training promotes institution-level

¹ Response to a UNESCO survey of HIV prevention needs of young people presented at the International AIDS Conference, AIDS 2010, Vienna, July 2010.

change and fosters greater commitment to the education sector response;

- Ensuring that HIV and AIDS are part of the formal pre-service training of teachers brings with it the potential benefits of evaluation, resources and accreditation;
- Teacher training institutions – and teacher trainers in particular – need to improve their skills base in HIV and AIDS and develop new professional career paths for specialist teachers;
- Teachers skilled in HIV and AIDS education strengthen the education sector response to the epidemic as well as the national multi-sectoral response;
- Investing in pre-service teacher training fulfils a strategic *institutional need* for a skilled cadre of professionals at training institutions, capable of supporting the education sector response and teachers based in the field.

These motivations are explored in greater detail in Section 1.2

Purpose of the booklet

This booklet aims to do the following:

- introduce the key issues, opportunities and challenges of pre-service teacher training on HIV and AIDS;
- provide an overview of institutional and programmatic responses to these challenges, illustrated with case study examples;
- highlight key factors that support effective responses at national and international level;
- summarize the key issues to consider when developing or strengthening pre-service teacher training for HIV education;
- identify some useful resources for a range of users.

Methodology

The evidence for good policy and practice in pre-service teacher training is emerging and uneven. Given the nature and scale of the challenges facing the education sector as a whole, there has been a slow response within pre-service teacher training. This booklet highlights good policy and practice that show promise, despite the difficulties faced by people on the front lines. Case

studies provide a glimpse into how countries with high rates of HIV are working with young teachers to prepare them for the difficult but vital task they face in the years ahead. Many of the available examples are from high prevalence contexts and will need adaptation for use in other epidemic settings.

This booklet was prepared after a review of relevant books, toolkits and guides in the secondary literature in 2009/2010. In addition, the writing team searched websites and augmented these searches through a series of interviews conducted with key UNESCO staff working on related issues in education, teacher training and HIV & AIDS. These interviews generated a volume of reports, bibliographies and documents for review.

This booklet focuses first on reviewing key aspects of teacher training and HIV & AIDS, including an analysis of the advantages and disadvantages of pre- and in-service training. It then proceeds to build a case for more attention to, and further development of, pre-service training. The second half of the booklet focuses on the sources of evidence on good practice that are currently available.

1.1 Teacher training – the broader picture

The purpose of teacher training is to equip individuals with the personal and professional skills needed in schools and other learning contexts. Teachers are required to deliver content knowledge, develop skills and foster attitudes that will enable learners to reach their potential. Pre-service and in-service teacher training form a continuum of professional development and may take place over a number of years, in a range of different settings and with differing purposes. As a set of linked processes it is helpful to think about what opportunities the two approaches offer for strengthening teacher training overall, and specifically how they can be used to address the need for better quality HIV prevention education².

The third booklet in this series, on educator development and support, outlined a number of the issues which are treated in greater detail in the chapters that follow, as well as some of the initiatives recently developed in the field³.

² This section relies heavily on *Teacher Training and Support in the Context of HIV and AIDS in East and Southern Africa Rapid Literature Review & Support to EDUCAIDS Country Implementation*, Paris: UNESCO, 2008. Unpublished.

³ UNESCO, *Good Policy and Practice in HIV and AIDS and Education – Educator Development and Support, Booklet 3*, Paris: UNESCO, 2008. <http://unesdoc.unesco.org/images/0014/001463/146308e.pdf>



Pre-service teacher training

Pre-service teacher training is the training that occurs before teachers enter the profession and/or take up employment in a range of different education institutions. It is a complex field and the overview presented here serves primarily as a context in which to address HIV and AIDS.

Pre-service teacher training takes different forms in a range of different institutional settings, public and private, including teacher training colleges (TTCs), universities, specialist institutes or other training providers. It may also be delivered through different modalities (including residential training and distance education) using various technologies (e.g. print, radio, internet, etc.)

In most countries, teachers have some form of pre-service training but the period of training may differ widely, as may the content, structure and modalities of training. The traditional model of lengthy periods spent in face-to-face lectures in a single institutional setting and focused on theoretical and academic knowledge has in many cases been superseded by distance education, mixed mode learning and/or academic training combined with practical experience⁴. In some cases, pre-service training has been drastically shortened to enable governments to keep up with the demand for teachers in countries experiencing a rapid increase in enrolments. Notwithstanding these variations, pre-service teacher training offers a key opportunity to provide the core knowledge, skills and attitudes that are needed to serve the interests of the children, young people and other learners in the education system.

Pre-service teacher training is organized in many different ways, ranging from academic programmes at undergraduate and graduate level that take three to four

years to complete to shorter courses, such as a one-year diploma or a six-month fast-track course. There may also be instances where teachers need a professional qualification before entering service, in addition to an academic qualification.

The professional qualification required at different levels in education also varies. For example, primary and secondary school teachers may spend different amounts of time in pre-service training, which takes place in completely separate institutions with different entrance requirements and status. In many parts of the world, secondary school teachers have a higher status, better pay and more stringent entrance requirements to the profession than primary school teachers. On the other hand, teachers (or programme implementers) in non-formal education may follow quite a different route in terms of professional training and accreditation.

Taking account of all these variations, it is nevertheless a characteristic of all courses that trainee teachers should master academic content and develop skills in pedagogical methods and classroom management.

The challenge of making teacher training responsive to HIV and AIDS lies partly in finding the most effective entry-points at institutional level, in the teacher training curriculum and the professional life cycle of teachers. Pre-service teacher training has advantages and disadvantages as an entry-point. If considered primarily from an educational viewpoint, pre-service training has many potential advantages which support the arguments for using it as a more strategic platform for HIV integration:

- *Policy* – pre-service programmes are supported by national and/or institutional policies which specify, assess and accredit the structure and content of the training programme/curriculum;
- *Institutional linkages* – institution-based training confers formal recognition and status, resources and portability of qualifications and skills within and across education systems;
- *Continuity* – an institutional base gives the training programme continuity and sustainability;
- *Duration* – whether delivered through distance education or face-to-face, pre-service training offers a space for sustained and intensive interaction with trainees;
- *Relevance* – teacher trainees are better prepared to respond to the needs of a world affected by AIDS, in the classroom, in the community and their own lives;
- *Curriculum change* – promoting greater responsiveness to HIV and AIDS in teacher training opens up

⁴ For a global perspective on major new trends in teacher training, see IIEP (2007) Schwillie, J and Dembele M, *Global Perspectives on Teacher Learning*, UNESCO, Paris. <http://unesdoc.unesco.org/images/0015/001502/150261e.pdf>

opportunities for curriculum change in the school system;

- *Capacity-building* – teacher trainers have the opportunity to gain new knowledge and skills at both personal and professional levels;
- *Commitment* – engagement with HIV and AIDS demonstrates a greater commitment to the national response, the education sector response to AIDS and better overall sexual and reproductive health, the needs of trainees and the wider social remit of training institutions.

Conversely, traditional models of pre-service training can be criticised for their rigid, costly, time-consuming structure and an inability to keep pace with the demands of curriculum change and new needs at school and classroom level⁵. At institutional level, the time needed to make additions or changes to the curriculum can be protracted and complex. For example, universities typically expect a new programme to have the approval of a senate or other high-level academic management structure, a process which takes many months⁶. Scale is another constraint on institution-based pre-service training. For example, face-to-face residential teacher training is often on a much smaller scale than distance education programmes which can reach thousands of trainees in multiple locations. Overall, there is still ongoing debate on the merits of pre-service teacher training especially in resource-poor settings where teacher supply and demand is a key issue in strategies to achieve good quality mass education⁷.

In-service teacher training

This is the training of practising teachers as part of a process of professional development or for the purpose of updating their curriculum knowledge, improving their pedagogical skills and/or implementing a new programme at institutional level. Pre- and in-service training are increasingly part of a continuum of professional development in which teachers engage throughout their careers.

As later sections of this booklet show, though many of the initiatives focused on HIV and AIDS in teacher training

have used in-service training as their entry-point, there is increasing evidence of change in policy and programming which promotes curriculum integration of HIV and AIDS at the pre-service level.

There are several reasons why in-service training has been the preferred entry-point.

- *Speed and impact* – in-service programmes can be more rapidly organised and have an immediate impact on trainees who are already working in the classroom;
- *Scale* – short programmes can be done at scale, reaching large numbers of teachers;
- *Flexibility and innovation* – the availability of different modalities (face-to-face, distance education, computer-based, mixed mode, etc.) provides a range of teaching and learning technologies and methodologies and creates space for innovation;
- *Cost-effectiveness* – it is arguably more cost-effective than pre-service training which typically involves smaller numbers of trainees and may be restricted to institutional settings⁸;
- *Responsiveness and flexibility* – it is not dependent on lengthy or cumbersome policy change, nor is it tied to an institutional timetable, evaluation and accreditation systems, and it can therefore be delivered by a range of providers including specialised NGOs and private sector training providers.

On the downside, there are many reasons why in-service training has not been an effective answer to the challenge of rapidly delivering the skills and resources which teachers need in the classroom in response to HIV and AIDS. It is important to note that these limitations are not specific to HIV and AIDS and may apply to any in-service training programme. For example:

- *Short-term needs* – training may be tied to external funding and external service delivery as an add-on. It may be narrowly defined by the provider in terms of methodology and materials, as well as being short-lived and unsustainable⁹;
- *Quality* – training is often delivered as a one-off workshop, or at best a series of short workshops with little follow-up support, supervision or evaluation¹⁰. Skills transfer and continuity are therefore limited,

⁵ See: Schwille, J and Dembélé (2007), M, *Global Perspectives on teacher learning, improving policy and practice*, IIEP, Paris, for a recent synthesis of debates on teacher education.

⁶ See: Association of African Universities, *An HIV/AIDS Toolkit for African Universities, Module 7*, Accra, 2004. <http://www.aau.org/sites/default/files/Module07.pdf>

⁷ See: UNESCO-BREDA (2009), *Universal Primary Education in Africa: The Teacher Challenge*, Dakar: UNESCO. <http://unesdoc.unesco.org/images/0018/001866/186643e.pdf>

⁸ On costing teacher education, see: Lewin, K. M and Stuart, J. S (2003) *Researching teacher education: new perspectives on practice, performance and policy: multi-site teacher education research project (MUSTER) synthesis report*, cited in Schwille and Dembélé (2007).

⁹ "Most HIV and AIDS-related teacher training programmes are delivered in in-service settings – merely as ad hoc responses – and by various stakeholders – public and private – who tend to have their own approach, methodologies and materials." UNESCO, 2008

¹⁰ See: Kelly, M, *Teacher formation and development in the context of HIV/AIDS, Module 4.2*, IIEP, Paris. http://www.iiep.unesco.org/fileadmin/user_upload/Cap_Dev_Training/pdf/4_2.pdf

particularly where trainees have been inappropriately selected;

- *Complex and sensitive issues* – short-term training, often relying on a cascade approach, does not always allow adequate time for working through complex and sensitive issues;
- *Pedagogical approaches* – Short-term training does not provide enough time to work on interactive methods and approaches which allow for more attention to issues such as values, emotions and care and support.
- *Linkages* – unless it is part of a national response, it may not serve national or local needs.

From this outline of some of the dynamics in the field of pre- and in-service training, it is evident that it is a complex field, even without HIV and AIDS-specific issues. These complexities are a challenge for curriculum developers, whether they are concerned with mathematics, science or languages. In the case of HIV and AIDS in the education sector, it may be necessary to advocate strongly to bring about change at institutional level and to mobilise the necessary support for integration of HIV and AIDS in the curriculum. The next section explores the role of teacher training in the response to HIV and AIDS and particularly the arguments in favour of a stronger role for teacher training.

1.2 Pre-service teacher training on HIV and AIDS – an entry-point for change

Why should there be a stronger focus on pre-service teacher training in the education sector response to HIV and AIDS? Is this necessary even in low prevalence countries? Should all teachers be HIV-competent or only those responsible for delivering HIV education, school health, sexuality education or Life Skills Education programmes? These are some of the important policy and programmatic questions which need to be addressed in advocacy with teacher training institutions, decision-makers, implementers and trainee teachers. The extent to which teacher training professionals and their institutions demonstrate a willingness to respond depends on a number of factors, not least of which is leadership and an understanding of the education sector's contribution to the response to AIDS.

Strengthen the education sector response to HIV and AIDS

Pre-service teacher training will further strengthen a comprehensive education sector response to HIV and AIDS as is the case of any high quality training enabling teachers to be responsive to the needs of children and young people. In a high-prevalence context, HIV and AIDS have been a reality in classrooms and schools for

more than 20 years and pre-service teacher training has a responsibility to prepare teachers for this reality.

Improve the quality of teachers

Many countries face the ongoing challenge of delivering good quality pre- and in-service teacher training to respond effectively to the constantly changing needs of the curriculum, learners and school communities. This challenge persists whether the issue is improved learning outcomes in mathematics, languages or HIV prevention and sexuality education. Strengthening pre-service teacher training will have overall benefits for all aspects of teaching and learning across the education system. Similar arguments have often been made about the way in which developing new skills to respond to HIV and AIDS in the health sector are a means of strengthening the sector as a whole.

"In our project in Zambia, we trained experienced teachers based in schools. This was three years ago. However many have either retired or been transferred. It is difficult to know if they were able to improve the skills of other teachers who are in their school and who did not attend the training but I doubt it. It's also not likely that they will carry on with his work in their new school as there are lots of ways in which the teacher needs to be supported to do this work which is not JUST about her skills. Like the attitude of the head and other colleagues. The only way this programme will work is if we get it institutionalized, into the teacher training colleges."

Personal communication, former Project Manager, Young, Happy, Healthy and Safe, October 2009

Improve the quality of teacher trainers

Reaching teacher trainees also has to involve building the knowledge and skills of teacher trainers. They are gatekeepers, as well as role models and a source of intellectual leadership for trainee teachers. Effective interventions will give teacher trainers access to new content knowledge, research skills, teaching

methodologies and the opportunity to make a much greater impact on generations of new teachers entering the profession.

Develop new knowledge and teaching skills

Pre-service teacher training is an important bridge between good policy on HIV education and its implementation. It is at this stage that critical work can be done to form the attitudes, knowledge and capacity of future teachers. This is the foundation stage that enables new teachers to work confidently with school-based learning materials on HIV and AIDS and to use and adapt pedagogical approaches such as life skills teaching and learning and to implement methods of assessment. Being able to conduct participatory sessions, listen to learners, be flexible and creative, and adapt curricula can be critical components of effective teaching and learning on HIV and AIDS. It is possible to foster teaching behaviours at this stage that are more difficult to promote after teachers have started classroom teaching and developed habits that are difficult to change. Pre-service training is also an opportunity to identify and support student teachers with a particular talent and enthusiasm for leading school-based responses to HIV.

A continuum of professional development

Existing in-service training on HIV and AIDS needs to be linked to pre-service training as part of a continuum. Ideally this means a longer-term and better supported training environment which combines robust pre-service training with continuous professional development, related to teachers' needs at classroom level and their own professional development plans.



Minimum standards for teacher training on HIV

Teachers will have differing needs depending on the teaching and learning contexts in which they work. To respond appropriately, pre-service training has to lead by setting minimum standards for the profession, which are lacking in most cases. This could entail (i) a minimum package for all teachers; (ii) higher level package for those with a special interest in the area; and/or (iii) career development opportunities for those who have specific responsibility for sexuality, life skills and HIV education programmes.

Personal and professional competence

In short-term in-service training, trainers and teachers are primarily concerned with professional competence. Pre-service teacher training offers the opportunity for developing both *personal and professional skills* to respond to HIV and AIDS. The end product is a teacher who is HIV-competent in his or her own life, as a person, as an employee, and as a family and community member.

Support and referral centres

In the same way that many schools operate as 'health promoting schools', teacher training institutions can develop features that student teachers experience and then emulate when they are deployed to schools. Examples include:

- By creating an atmosphere of support and openness around HIV and AIDS, training institutions can provide much needed support to employees, students and their communities;
- Larger training institutions (particularly universities) have the capacity to offer a range of prevention, treatment, care and support services internally or in partnership with government and/or NGOs;
- Training institutions can link with service providers such as health centres that offer access to condoms and sexually transmitted infection (STI) treatments or voluntary counselling and testing (VCT);
- Training institutions can link with supportive networks such as teachers' unions and organisations representing teachers and other people living with HIV;
- Co-curricular outreach activities such as art, drama and sports projects can reinforce messages about prevention, stigma reduction and a range of other issues.

Centres of excellence

In the same way as schools pride themselves on a reputation for science or the arts, teacher training institutions can develop as centres of excellence in HIV

and AIDS. Leading research institutions provide ample evidence of the valuable national and international recognition, talent and resources they can attract as a result of engaging with and investing in the response to AIDS. These centres can act as a major resource for schools, communities and teachers themselves.

Sexual health

Pre-service training provides a space to raise awareness among trainee teachers about the impact of HIV and AIDS on their own lives. Student teachers arrive on training programmes when they are young, often away from home and their families for the first time, and subject to a number of pressures, including sexual debut and/or risk-taking. This combination of factors makes them vulnerable to HIV infection, in addition to other STIs and unintended pregnancy. Institutions which integrate the sexual health of their trainees as part of a well-rounded training programme can maximise the opportunity to develop better prevention knowledge and skills amongst young adults. This could be especially valuable for young people who are not yet sexually active.

Know Your Epidemic

The UNAIDS Inter-Agency Task Team (IATT) on Education has developed recommendations for the education sector response linked to HIV prevalence levels in low, concentrated, generalised and hyper-endemic epidemics, including specific actions concerning teacher training¹¹. These underline the imperative to work from an evidence base and to respond appropriately to the epidemic setting.

Sexuality Education

HIV education should ideally be situated within a broader framework of education on relationships and sexuality, but this is not yet a requirement in many parts of the world. The implication for many teachers is that they are faced with teaching a challenging set of topics without a framework, guidelines or – sometimes – a curriculum. The *International Technical Guidance on Sexuality Education*¹² is aimed at HIV prevention education for children and young people, using sexuality education as a platform. This voluntary Guidance is evidence-based

and age-appropriate, and recognises that the qualities of the educator can have a significant impact on the effectiveness of the curriculum that is delivered. Capable and motivated educators are a requirement as is specialised training that addresses personal values in addition to the content of a curriculum. Ongoing management support and supervision are also recommended.

These are some of the motivations that need to be part of an advocacy effort aimed at institutions, leaders and trainee teachers. The Section that follows examines in more detail the range of challenges, issues and opportunities which arise in the context of pre-service training. At present, it is fair to say that the response by pre-service teacher training institutions and programmes has been markedly slower and less visible than for in-service training. It is important to consider the reasons for this difference, in order to develop the stronger response in pre-service training that is so urgently required.

Recommendations for the education sector response in low HIV prevalence settings

Low prevalence: HIV prevalence among the general population is less than 1%. HIV prevalence has not spread significantly in any sub-group. Risk is diffuse (low levels of partner exchange or of non-sterile injecting equipment) or the virus has only recently been introduced.

- Integrating HIV and AIDS information and skills across school and teacher curricula to ensure that young people are aware of their sexual and reproductive health (SRH) rights and to empower them to make good choices about their health.

(UNAIDS/IATT 2009)

Recommendations for the education sector response in high prevalence settings

Generalised epidemic: 1-15% of pregnant women attending antenatal clinics are HIV-positive [and] HIV is present among the general population and spreading widely

- Ensuring that, in teacher training on HIV prevention, teachers are made aware of their own vulnerability and that teachers are provided with the knowledge and skills to adopt risk-reductive behaviours.

(UNAIDS/IATT 2009)

¹¹ UNESCO (2009), *A Strategic Approach: HIV & AIDS and Education*, <http://unesdoc.unesco.org/images/0016/001627/162723E.pdf>

¹² See: UNESCO (2009), *International Technical Guidance on Sexuality Education: An evidence-informed approach for schools, teachers and health educators*, UNESCO, Paris. <http://unesdoc.unesco.org/images/0018/001832/183281e.pdf>

2. ISSUES, CHALLENGES AND OPPORTUNITIES IN PRE-SERVICE TEACHER TRAINING AND HIV & AIDS

This section examines a number of key issues and challenges underpinning pre-service teacher training in HIV and AIDS, along with certain opportunities for its development. These issues and challenges explain why the response in pre-service teacher training has been slow even in countries where better trained teachers would make a major difference to the course of the epidemic.¹³ This section is organised into three broad areas:

- The personal level
- The institutional level
- The policy/system level

2.1 The Personal Level

Discomfort in teaching sexuality, values, relationships and HIV

Many individuals – including trainee teachers – face personal difficulty and embarrassment in communicating openly and effectively about HIV, sexuality, relationships and other inter-personal behavioural and social issues. Personal sensitivities contribute to teachers' reluctance to deal with sexuality. Many teacher trainees in their roles as parents or community members will not talk about these issues within their own families and will feel equally inhibited in trying to do so with groups of learners. This tendency underlines the need for HIV prevention education which goes beyond basic biology and prevention and explains why sexuality and relationships are equally important.

"In so many countries, teachers just leave the book on the table rather than teach the subject..."

Participant, UNAIDS IATT on Education Web Forum, 2009

Culture, religion and community attitudes may create resistance to dealing with the subject, especially in mixed classes or with children or young people of the opposite sex. There may be taboos that prohibit open discussion on sex and sexuality, particularly with young people.

Sexual practices are deeply personal and underpinned by gender-based attitudes, social norms and tensions that are hard to overcome, despite the need to do so¹⁴.

Even where training and support for teachers is at a high level and includes opportunities for integrating their own perceptions and experiences, the difficulty of overcoming social norms must not be under-estimated¹⁵. Selecting teachers with the skills and values needed to deliver an HIV prevention curriculum effectively is complex and challenging.

"The position I occupy is surrounded with conflicting social constructions of masculinity and femininity. As a Mosotho woman [in Lesotho], I am expected to be submissive, unquestioning and sexually innocent. However as a science teacher, I am expected to be knowledgeable, powerful and able to make decisions in any situation. These positions I occupy have an important bearing on my teacher self and how I handle boys and girls in my lessons."

Khau and Pithouse (2008)

Some teachers are also conscious of the discrepancy between their personal way of living and what they are expected to teach to their pupils. Others who know or suspect that they themselves are HIV-positive, or that somebody in their family is, may be reluctant to deal with an issue that is so close to home.

A lack of the necessary knowledge is a key barrier in whether a teacher has the capacity to address uncomfortable questions coming from learners on sexuality, reproductive health, gender or related topics. At another level, unless it is clear they have parental and community support, they may also fear being criticised or censured for openly discussing topics which parents consider a family responsibility. This may be especially so where religious or cultural norms support sex segregated education.

¹³ See: Actionaid (2003), *The sound of silence. Difficulties in communicating on HIV/AIDS in schools*. London: ActionAid. <http://www.actionaid.org/docs/hivsoundofsilence.pdf>

¹⁴ The most recent and comprehensive treatment of teachers and HIV & AIDS notes the widespread neglect of teacher training and the paucity of evidence, particularly on the role of teacher training colleges. See Clarke, D (2008) *Heroes and Villains: teachers in the education response to HIV*, UNESCO: Paris,

¹⁵ See: UNESCO (2009), *International Technical Guidance on Sexuality Education; An evidence-informed approach for schools, teachers and health educators*, UNESCO, Paris. <http://unesdoc.unesco.org/images/0018/001832/183281e.pdf>

Generational differences

The issue of personal discomfort may be more relevant to older teachers and teacher trainers than to young people and student teachers, most of whom have grown up in the era of HIV and AIDS.

"The biggest challenge in Pakistan regarding HIV and AIDS education, particularly in schools and colleges, is the cultural taboo to talk about such issues. Myself being a teacher educator at Aga Khan University,[1] find it extremely difficult to even discuss the common mode of HIV infection at teacher training programmes."

Senior Instructor, Aga Khan University, Institute for Educational Development

"My experience as a teacher and facilitator in Zimbabwe is that, especially by the time they get to teachers' colleges, young people are bored stiff with HIV education because it usually goes on telling them what they already know. Nor are they trained to develop the life skills required in their pupils/ students to put any worthwhile knowledge into practice. I think all teacher trainees should first be trained in life skills for their own benefit and related to their own lives. This will also enable them to teach life skills at schools, although in many places using participatory methodologies is a problem too great."

Richard Mabala, participant, UNAIDS IATT on Education Web Forum, 2009

Lack of interest

Whatever their academic level, it is unlikely that many students have experience of good HIV prevention education. If they had HIV prevention education at school, it is likely it was taught in a didactic and academic way, with insufficient class time for debate and discussion and consequently unlikely to have had much impact on their behaviour and choices.



"The BA (education) students are reluctant to discuss HIV and gender issues and seem bored and tormented by the daily song of HIV and AIDS."

"We have learned this stuff in high school. Things like definition, transmission and prevention. They were all taught in school and they are repeated here. We just repeat them here for exams."

Student teacher in Nzioka and Ramos, 2008

Risk behaviours

Many younger student teachers are away from home for the first time, without parental and family supervision or support. It is a period of transition into adult life, with many social and psychological changes and the peer pressure on first year students to be sexually active can be intense. Student life may also involve use of alcohol or drugs, and new sexual behaviours. Sexual violence, particularly rape, is a frequent concern among women students. In some settings, poverty and transactional sex also play a powerful role. Where access to prevention education, condoms, health services or support is limited, the vulnerability of young men and women to STI infection (including HIV) or unintended pregnancy is increased.

Instead of promoting and supporting HIV prevention, modelling the best features of a healthy environment, some institutional settings can in fact have the opposite effect. Both students who choose to be sexually active and those who choose not to need to be supported by education and programming.



“When I was coming to college, my mother had only ten thousand shillings (approximately 5 US dollars) and that is what she gave me. She told me that if she got any more money she would send it to me, but she was unable to... I am not alone in this situation and this is how we young girls end up in relationships with men.”

Female first year student, TTC, Uganda¹⁶

2.2 The Institutional Level

Failure to implement national and institutional policy

Where there are national-level policies, commentators report that there is a lack of awareness of the policies; and inadequate time and resources are spent on developing policies that are meaningful and actionable at college or programme level. A study of HIV and gender pre-service teacher training curriculum and practices in **Kenya, Uganda** and **Tanzania** found a wide gap between good policy and actual practice. (Farah, *et al*, 2009)

This example from Kenya is a call to action:

“In Kenya, there is an education sector policy. The policy is clear on what all learning institutions should do. For example, all TTC[s] are supposed to use the policy to come up with their own institutional HIV and AIDS policy. Not all colleges have these policies in place and that means they have not conceptualized HIV and AIDS. This leaves them at the mercy of NGOs [that] conduct ad hoc training on various aspects of HIV and AIDS education. The lack of systematic implementation of the education sector policy means teacher educators, as well as student teachers, are not well prepared to handle HIV and AIDS in their classes....”

Discussant, IIEP and UNAIDS IATT web forum report, 2009

¹⁶ Katahoire, C and Kirumira, E, (2008), *The Impact of HIV and AIDS on Higher Education Institutions in Uganda*, Paris : IIEP-UNESCO <http://www.aidsportal.org/repos/ImpactHIVHigherEducationInstUganda08.pdf>

Integrating HIV and AIDS in the training curriculum

The key issues facing those developing a curriculum for pre-service teacher training are negotiating the space, time and priority for HIV prevention education in the formal training curriculum and co-curricular activities necessary to produce teachers who are 'HIV aware, HIV competent and HIV safe' (C. Coombe, 2004).

"It is difficult to incorporate HIV and AIDS issues into compulsory school and college subjects because [the] curriculum is overloaded..."

UNESCO Almaty

If student teachers are to receive both an appropriate level of prevention education and better training on HIV and AIDS, it is necessary to make space in the curriculum. Training curricula are notoriously overcrowded and, understandably, priority is given to topics that feature most highly in the assessment of the student teachers. These priorities usually mirror the priorities of the school curriculum.

"In Cameroon, the (training) curriculum provides no place for HIV/AIDS education. HIV and AIDS is just a topic [within] health and environmental education. For this reason, very little importance is accorded to the formation of teachers to give effective training to the children."

Participant from Cameroon, IIEP and UNAIDS IATT on Education Web Forum, 2009

"HIV and AIDS should be taught as a stand-alone examinable subject for it to be taught comprehensively... This is the way to go in our overcrowded examination-driven curriculum where what is valued is tested and thus gets taught!"

Researcher in Kenya, IIEP and UNAIDS IATT on Education Web Forum, 2009

Many resist this notion. For example, the teachers' union in Uganda does not want another component relating to survival skills on the curriculum as an examinable subject in a system they regard as overly 'examination driven', at the expense of education quality.

General Secretary, Uganda National Teachers' Union (UNATU)

In order for HIV and AIDS to receive the visibility it needs as a subject, either it has to become an examinable part of the training curriculum or alternative assessments should be designed that carry equal status.

The integration of HIV and AIDS in a limited number of selected and relevant subjects (already existing) can also be an option. It might be easier than creating a new stand-alone subject. The choice of the option regarding the mode of integration depends on the structure of the national curriculum and this should be carefully examined.

Lack of training and support for teacher trainers

To reach teacher trainees successfully, any intervention needs well-trained and supported teacher trainers, able to tailor the curriculum to the needs of the students and to the social and epidemiological context in which the learning takes place. Teacher trainers need to demonstrate how to adapt a curriculum in this way, as this skill will enable students to engage learners in their turn, ensuring that they take away real life lessons that are genuinely protective and long-lasting.

To respond to this expanded role, teacher trainers require specialized training, mentoring and support in order to conduct their training in a way that strengthens the linkage with continuous professional development throughout their students' careers. A well-functioning professional development system depends on mechanisms, capacity, resources and above all a commitment to continuous learning both within and outside the classroom.

“Unless we are consciously aware of what is driving our behaviour in the classroom we are all too likely to revert to the ways of teachers who taught us.”

Allender and Allender, 2006, in Khau and Pithouse, 2008

Inadequate access to support

Problems are not restricted to the development and delivery of the curriculum. Limited access to services such as counselling or free condoms and inadequate funding for college-based initiatives make it harder for students and staff to get the level of support they need.

“Counselling facilities in teacher training colleges are generally inadequate and ineffective. Funding for college-based HIV initiatives is inadequate. The MoE did not allow condom distribution in institutions of higher learning.”

Participants, Stakeholders' consultation on HIV and AIDS education in teacher training colleges in Zambia, 2009



Demand/support from school managers

Factors which will ultimately determine whether newly deployed trainees make good use of their skills include the level of demand and support from head teachers/principals, school supervisors and inspectors as well as attitudes of parents, school management committees and parent-teacher associations, who may agree to the inclusion of HIV and AIDS in the curriculum but oppose the discussion of sexuality and other important issues.

2.3 Policy/system level

Teacher supply and demand

Many education systems in developing countries are experiencing rapid growth in enrolment, particularly in response to MDG targets and the availability of free or universal primary education policies. Growing enrolments means increased demand for teachers¹⁷, sometimes at the expense of high quality pre-service teacher training, including training on HIV and AIDS. These problems are exacerbated when training time is shortened to 'fast track' student teachers to the classroom.

The challenge facing governments in meeting the need for teachers is acute in many countries: 1.6 million more teachers are needed for sub-Saharan Africa alone to achieve a classroom ration of 40:1. (UNESCO & EI, 2006). Attempts to solve the numbers crisis can exacerbate the problem of teacher shortages, for example, by:

- Contracting primary school leavers or unqualified adults in the community with little or no training or qualifications as 'contract, volunteer or non-professional teachers';
- Deploying unqualified, under-qualified or poorly qualified teachers to rural areas;
- Increasing class sizes, which make teaching more stressful and less rewarding for teachers who may consequently choose to retire early.

The impact of the epidemic has also been significant in terms of teacher morbidity and supply (absenteeism, attrition, incapacity) in some countries. (Nzioka C., 2008).¹⁸

Lack of coherent policy on teachers and teacher training

This issue has been highlighted in the African context but may also apply to other regions. The Teacher Education Policy Forum for sub-Saharan Africa, focusing on the processes of teacher policy development, noted the following:

- Teacher policies are all too often developed without sufficient discussion with stakeholders such as teacher training institutions;
- More often than not, there is no teacher policy: UNESCO's Teacher Training Initiative in Sub-Saharan Africa (TTISSA) has identified approximately 26 countries in sub-Saharan Africa that do not appear to have any national teacher policy or plan;
- Where it exists, teacher policy is often fragmented.

For impact, a more coherent policy and regulatory framework, which prioritises HIV and AIDS training for teachers, is vital.

Political will

Developing or adopting new curricula for schools and teacher training purposes often depends on a high level of political will, particularly where the changes generate resistance from some stakeholders. For example, in 2007, 11 states in India stopped the implementation of the countrywide school-based Adolescence Education Programme¹⁹ after various objections. After a process of complex negotiation and revisions, the curriculum has been re-issued and is now being implemented across India. At another level, non-government organisations in India are also making inroads at community level, working directly with young people to change attitudes to sexuality and develop the skills necessary to advocate for stronger sexual and reproductive rights, services and education, including HIV prevention education²⁰.

Need for a stronger evidence base

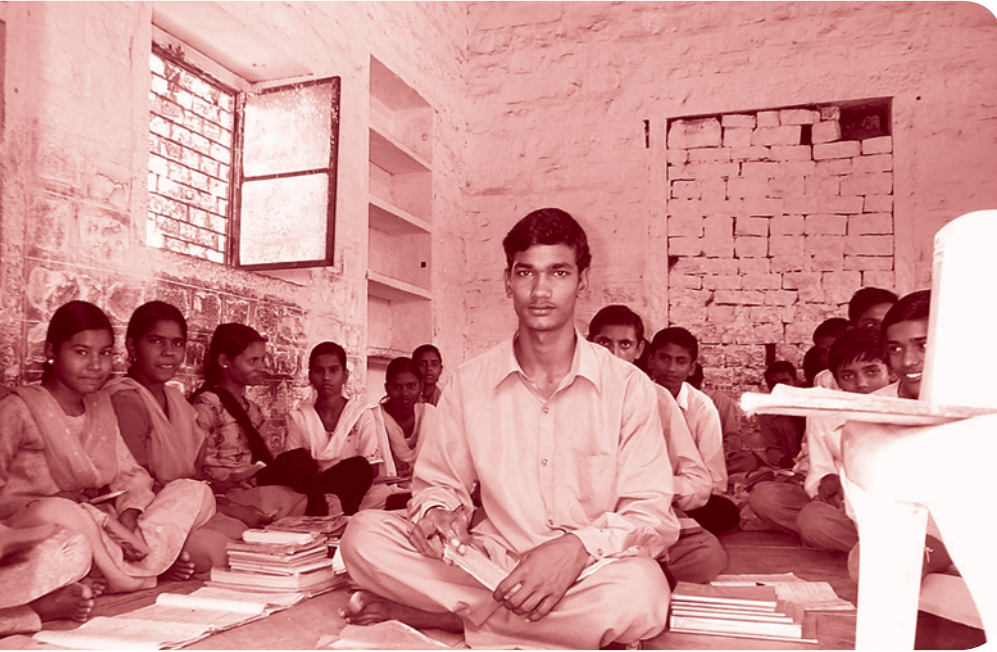
To date, there has been little evaluation of pre-service teacher training in HIV and AIDS and, in particular, the type of training that has the greatest impact. A stocktaking

¹⁷ See UNESCO (2009), *Universal Primary Education in Africa; The Teacher Challenge*, *ibid*.

¹⁸ See also Shisana, O *et al*, *The Health of Our Educators – A focus on HIV/AIDS in South African public schools*, HSRC, Pretoria, 2005.

¹⁹ For full details of the report, see <http://www.bharatiyashiksha.com/?p=63> and <http://ipsnews.net/news.asp?idnews=39071>

²⁰ See for example, the YP Foundation (India). <http://www.theyfoundation.org/> and TARSHI, http://www.tarshi.net/downloads/review_of_sexuality_education_curriculum.pdf



course or module on HIV and AIDS in pre-service programmes may be hard to find. Teacher trainers will need access to materials, training, support and time to do research in order to produce high quality graduates. Where institutions are relatively autonomous, as in the case of universities, opportunities exist to partner with international development agencies and other donors (see examples highlighted in this booklet). Elsewhere, teacher training policy-makers in government must take the lead in mobilising the necessary resources as a way of providing incentives for institutions and trainee teachers needing HIV competence.

report commissioned by the IATT on Education highlighted this situation.

*“more research is needed into how teacher training can be made more effective [that] training for teacher trainers is a key programmatic gap, [and] teacher-training institutes have not received adequate attention”.*²¹

A stronger evidence base would undoubtedly contribute to the professionalization within the education mainstream of education on HIV and AIDS, reproductive health, human sexuality, STIs and life-skills. This will enable educators to engage with these issues with greater confidence and provide governments and institutions with a sound rationale for investing their resources.

Resource mobilisation

Curriculum change at institutional level requires time, expertise and resources. In many institutions, even the basic teaching and learning materials needed to offer a

Leadership

It is now well established that successful responses to HIV and AIDS in the education sector demonstrate and depend on leadership at many levels. Heads of universities, principals of colleges, academic managers (deans, heads of department), student organisation leaders, trade union representatives or trainee teachers can all contribute to giving HIV and AIDS greater priority in pre-service training. So, for example, if trainee teachers see the possibility of developing better skills in HIV through community outreach, they should be supported. At a higher level, those in decision-making positions in government and at institution level have a responsibility to advocate for HIV and AIDS as a necessary area of competence, especially in high prevalence countries but also in countries where stigma, discrimination and other violations of rights are evident both in education and in the wider society. In the African context, organisations of teachers living with HIV have shown the importance of involving people living with HIV (particularly women) at a leadership level²².

Despite many constraints, there is a growing trend in innovation and support for positive changes in pre-service teacher training. The following section identifies elements of good practice at various levels and across a range of country and regional settings.

²¹ UNESCO (2008), *Draft Stocktaking Report: Education Sector Responses to HIV and AIDS*, Paris: UNESCO. Unpublished.

²² See ActionAid, (2008). *TIWOLOKE. HIV and AIDS in the education workplace*. London: ActionAid.

3. GOOD POLICY AND PRACTICE IN PRE-SERVICE TEACHER TRAINING AND HIV & AIDS

In this section, the factors that support effective HIV education in terms of protecting student teachers and training them as effective teachers are examined:

1. The policy environment ;
2. Models of curriculum reform;
3. Capacity-building and support for teacher trainers;
4. Quality assurance, monitoring and evaluation;
5. Supportive partnerships.

3.1 The policy environment

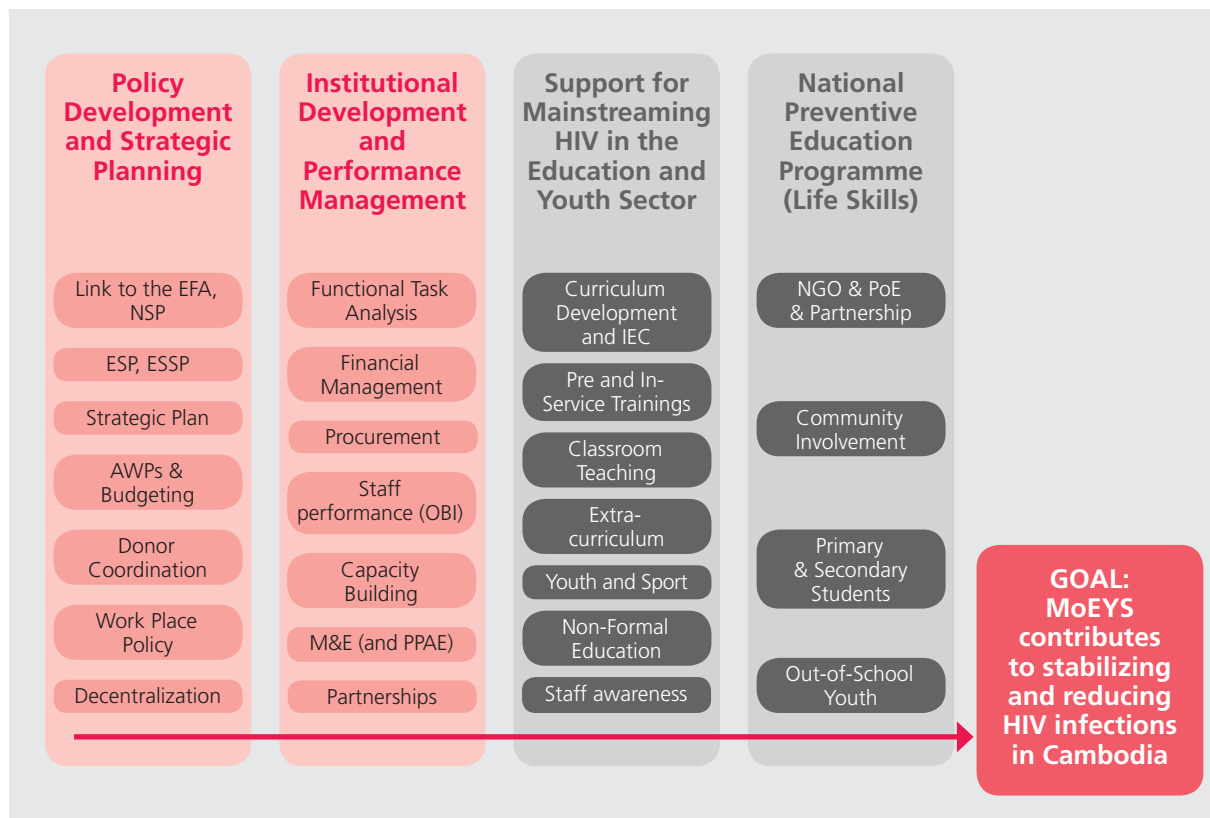
Strengthening pre-service teacher training in HIV and AIDS requires a dynamic relationship between policy provisions at different levels:

- policy and curriculum reform;
- materials development;
- institution-level implementation;
- teaching and learning in the classroom.

The following examples illustrate the links between these levels and the promising results of effective institutional policies.

In **Cambodia**, the Ministry of Education, Youth and Sport has established a *legal framework* for responding to HIV and AIDS. ICHA (the Curriculum Development Department of the Inter-departmental Committee for HIV/AIDS, Cambodia), has the following programmes in place: a National Plan of Education for All 2003–2015; an Education Sector Strategic Plan 2006–2010/ 2008-2012; an Education Sector Support Programme 2006–2010; a school health policy; a life skills education policy; a curriculum development policy (2005–2009); a workplace policy; and a youth policy (being developed at present). Pre-service training is included within one of the four pillars in the figure below, though no specific details are provided on the content or structure of the programme.

Figure: The 4 Pillars of ICHA



In **Papua New Guinea**, stakeholders singled out the *HIV and AIDS Policy* as well as the HIV and AIDS/STI Implementation Plan as models of good practice and highlighted the participatory processes through which they were developed. The integration of HIV and AIDS in the curriculum is a considerable achievement. 2008 was the first year in which HIV and AIDS were an integral part of the curriculum from Grades 5 to 12, and in the second year all student teachers went through a 36-hour course on HIV and AIDS as part of their pre-service training. Messaging on HIV and AIDS is comprehensive, focusing on many of the factors that put children and young people at risk of HIV, and does not shy away from addressing issues such as sexuality and condoms. The sector also stands out for its efforts in coordinating with partners (AusAID, 2008).

In **Kenya**, Highridge Teacher Training College pioneered an example of institution-led policy development in Africa. In 2000, the college established an HIV and AIDS Sensitization Programme (HASP) to educate and protect student teachers by providing the knowledge, attitudes, skills and values that influence behaviour change. HASP developed into an information-sharing forum for tutors and students.

Based on inputs from a wide range of government and other stakeholders, the institutional policy framework outlined a comprehensive response, including teaching and learning.

The College HIV and AIDS curriculum will be effectively integrated into everyday activities of the College through:

- An induction programme for staff that will include a model of HIV and AIDS and STI to raise awareness.
- Integration and infusion of HIV and AIDS syllabus into all the subjects and activities.
- Creation of a College Health Club, which emphasizes personal hygiene and campaigns against HIV and AIDS and drug abuse.
- Introduction of HIV and AIDS information corners and notice boards.
- Commitment to the HIV and AIDS strategy through non-discrimination and support for people with HIV and AIDS; facilitating mutual trust between the college employees and students.

(Ojuando, 2003)

During 2005-2007, the **Russian Federation** and **Belarus**, supported by UNESCO, developed and adopted national concept papers on HIV and AIDS prevention education which provided a legal framework for the national education sector to integrate HIV and AIDS into the secondary and vocational training school

curriculum, as well as programmes at high school. The concept papers include minimum requirements for comprehensive prevention education to be scientifically correct, age-appropriate, and gender-sensitive. Special provisions were also made to involve parents and peer-educators and ensure pre- and in-service teacher training and support.

In **Latin America**, pre-service teacher training on HIV is supported by political commitment at the regional level on scaling-up the implementation of sexuality education programmes, which provide important entry-points into the training curriculum. The Mexico Ministerial Declaration²³ clearly identified the need to ensure that teachers charged with delivering sexuality education in the formal school setting are adequately trained and supported throughout their careers and also included a timeframe for action.

“Review, update and reinforce the training of educational personnel, from teaching colleges to in-service training for existing teachers. By the year 2015, all teacher-training programs, under the jurisdiction of the Ministries of Education, for both formal and non-formal education will include the new comprehensive sexuality education curricula.”

(Mexico Ministerial Declaration Educating to Prevent, August 2008, article 3.5)

Based on this declaration, UNESCO has been supporting and monitoring progress towards implementation in the region. Of five countries reviewed in the region (Colombia, Uruguay, Peru, Guatemala and Cuba), Uruguay has gone the furthest in developing processes around pre-service training that are linked to the real performance demands of school programmes.

3.2 Models of curriculum reform

Changes in curriculum may be due to a number of different factors in any education system (e.g. politics, new technology, emergencies, health risks, etc.) The following examples outline some loosely defined models of curriculum reform focused on HIV and AIDS which have developed in different contexts, and highlights their key characteristics.

²³ See: <http://new.paho.org/hq/dmdocuments/2009/Mexico%20City%20Ministerial%20Declaration%20Educating%20to%20Prevent-Eng.pdf>

Standard-setting

In **South Africa** in 2003, the curriculum working group of the Higher Education HIV and AIDS (HEAIDS) programme began a collaborative process with a forum representing heads of South Africa's faculties of education in higher education. Their aim was to integrate HIV and AIDS into pre-service teacher training curricula. Previously the national effort had focused largely on in-service settings. The collaboration produced a framework document outlining the motivation, structure and content of a compulsory module for inclusion in all pre-service education curricula. In 2010, the HEAIDS programme published the key outcomes of this development process which is amongst the most systematic attempts, at a national level, to integrate HIV education into the pre-service curriculum^{24,25}. A pilot pre-service teacher training module was ultimately implemented in 27 pre-service and in-service teacher education programmes on 25 sites in 21 higher education institutions. A total of 6,485 pre-service and in-service teachers benefited from the module offered in 23 programmes in 2008, and a further four programmes in 2009.²⁶

The recommendations emanating from this evaluation of a pilot project are instructive, with specific relevance to high prevalence epidemic contexts²⁷.

Key recommendations are summarised below:

- Provide student teachers with opportunities for experiential learning in communities affected by HIV/AIDS;
 - HIV and AIDS content should have dedicated space in the teacher education curriculum;
 - Avoid making HIV and AIDS the sole responsibility of the teacher responsible for a subject/disciplinary area like Life Skills;
 - Encourage continuous professional development;
 - Use research on school based practice to reinforce delivery of the curriculum.
- Make specific adaptations to the curriculum and materials depending on the level of education and the target audience;
 - Include counselling skills development to equip teachers to handle complex and sensitive HIV/AIDS issues;
 - Support students on teaching practice and in schools/communities where they might experience resistance to implementation of HIV/AIDS teaching;
 - Use strategies to facilitate the confidential sharing of personal experience;
 - Integrate the teacher education component with other co-curricular activities (including peer education);

At the regional level in **Southern Africa**, a pre-service teacher education manual has been developed and is being tested by UNESCO with the support of the Virginio Bruni Tedeschi Foundation²⁸. This is part of a two-year project 'Building Knowledge, Skills and Hope: HIV and AIDS Education for African Children', which aims to strengthen the impact of HIV education in Southern Africa, the region hardest hit by HIV and AIDS, with a particular focus on **Angola, Lesotho, Swaziland and Namibia**. The project arose out of a study that highlighted the lack of a model framework and materials for pre-service teacher training materials in this area. The framework sets out detailed teaching and training objectives for five modules on life skills, and adolescent and reproductive health. The HIV and AIDS components are embedded in the curriculum and supported by other related components.

Each module includes training materials to be used by teacher educators and students. The modules (approximately 50 hours of study overall) also include reflective self-study material and assignments. These are designed for use in an institutional setting with open-ended learning and reflection over the three-year period of pre-service teacher education. Details of the module objectives are provided in Annex 1.

²⁴ HEAIDS, *Being a teacher in the context of the HIV and AIDS pandemic*, Pretoria, 2010.

<http://www.he aids.org.za/resources/HEAIDS%20Conference/Being%20a%20teacher%20in%20the%20context%20of%20the%20HIV%20and%20AIDS%20pandemic.pdf>

²⁵ HEAIDS, *HIV and AIDS and Teacher Education: evaluation report of a pilot project in South African Higher Education Institutions*, Pretoria, 2010.

<http://www.he aids.org.za/resources/HEAIDS%20Conference/HIV%20and%20AIDS%20in%20Teacher%20Education.pdf>

²⁶ *ibid*, p viii

²⁷ *ibid*, p 92

²⁸ UNESCO (2009), *Draft Preset RH/HIV Teacher Training Manual for Lesotho and Namibia*, unpublished.

Curriculum support materials in Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan

Over the past four years, UNESCO has been cooperating with the national education authorities, curriculum developers and teacher training institutes and NGOs in the Central Asia region. A number of curriculum development guidance papers (2006) and resource materials (2007) on HIV and AIDS prevention education were developed and made available for pre- and in-service teacher training in Kazakhstan, Kyrgyzstan, and Tajikistan. The *Guidance on Integration of HIV Prevention Education into Secondary and Vocational Training School Curriculum* developed by *Education for All in Kazakhstan*, provides recommendations on integration of HIV and AIDS-related issues within the curriculum, along with learning objectives, and tips on ways to address these issues through extra-curricular activities. The Guide also includes lesson examples.

Currently, UNESCO is collaborating with the national ministries of education in **Kazakhstan, Kyrgyzstan, Uzbekistan and Tajikistan** to adopt a CD-based interactive course for teachers on *Building knowledge about HIV and AIDS*.

Based on EDUCAIDS, this cost-effective training resource will become available for student teachers and teachers delivering prevention education across all secondary, vocational training and high schools by mid-2011.

*A Guide for Teacher Training College Instructors. Kazakhstan, 2006*²⁹

*A Guide on Integration of HIV Prevention Education into Secondary and Vocational Training School Curriculum. Kazakhstan, 2007*³⁰

Curriculum reform defined by needs

In **Viet Nam**, the MoE is working with Save the Children to conduct a needs assessment among project high schools, aimed at developing teaching guidelines for reproductive health and HIV & AIDS. In addition, the partners will review the current textbook on reproductive health and HIV & AIDS for students in teacher training colleges and universities and provide them with more training on life skills and teaching methods for reproductive health and HIV education. The textbook will be used in training, as well as allowing students to learn independently about sexuality³¹.

In the **Russian Federation**, in recognition of the need for pre-service teacher training in HIV prevention education, the Tula Teacher Training State University has introduced a training course on HIV and AIDS prevention among adolescents and young people. The 72-hour course gives students a variety of opportunities for face to face instruction (20 hours in classroom), study (36 hours for self-study) and practice (16 hours of teaching in schools)³².

Participatory process

Since 2007 in **Papua New Guinea**, HIV and AIDS has been a compulsory part of pre-service primary training, with a 36-hour course delivered by trained lecturers, distinguished by its participatory nature. The HIV & AIDS and reproductive health pre-service course is included in the National Teacher Education Curriculum Guidelines, approved by the Teacher Education Board of Studies and signed by the Secretary of Education. Secondary pre-service teacher training is the responsibility of the universities. Significantly, all 11 teacher training institutions were involved in writing teaching materials

and the design of M&E tools, processes which developed a strong sense of ownership and commitment.

Every lecturer in the country was also trained on HIV and reproductive health for at least two days to ensure there was widespread understanding and support for the new course. Many of the new teaching and learning strategies were tested in remote schools, using many of the teacher education strategies with primary teachers in these districts. Baseline data were also collected from current student teachers.

Programme design

Intervention in the development of teacher training curriculum can take different forms. In schematic form, interventions in the training curriculum could include any one of the following or a combination of different options:

- *Core/foundation course* (all students regardless of specialisation)
- *Integrated/infused content* (delivered across the training curriculum)
- *Stand-alone course(s)* (basic through to advanced levels)
- *Elective module(s)*
- *Research*
- *Projects/workshops*
- *Co-curricula activities* (including peer education)
- *Course work and practical experience*
- *Supervised practical training*

²⁹ http://www.unesco.kz/publications/hiv aids/Teacher_Manual_kz_ru_scr.pdf

³⁰ http://www.unesco.kz/publications/hiv aids/Information_Kit_kz_ru.pdf

³¹ Details provided by Hoang Thuy Lan, local consultant, September 2009.

³² <http://www.ifap.ru/library/book322.pdf>

A combination of options may be necessary, depending on the initial level of expertise of the trainees and the level of specialisation they need to achieve. Teachers planning to pursue a career in HIV Education, Sexuality Education, Life Skills Education, School Health or Counselling will need higher levels of specialisation and greater depth of training. At this point, the literature provides no specific guidance on which programme designs deliver the best results. However, many experts in the field have argued in favour of formally recognised and examinable programmes at school level in order to improve the quality of teaching and learning outcomes.

■ Design from the classroom upwards

Designing pre-service training programmes should take into consideration the requirements of the curriculum which teachers are expected to deliver at various levels in the education system, depending on whether HIV-related content is integrated or a 'stand-alone' subject.

Primary level teacher – an 'all rounder' who is responsible for all aspects of the curriculum. In many instances, HIV education will be included in some form of Life Skills Education.

Secondary level teacher – a teacher who has a disciplinary background and may be expected to integrate HIV related content into his/her subject/learning area (e.g. science, biology, economics, etc)

Specialist teacher – a teacher responsible for HIV Education, Sexuality Education, Life Skills Education, School Health or Counselling who is expected to have advanced competence. These subjects are taught as 'stand-alone' components in the curriculum.

More and better research is urgently needed in the following areas related to programme design and impacts:

- Factors that can predict the efficacy and long-term impact of pre-service teacher education on preventing HIV and AIDS and/or mitigating its impact in areas of low and high prevalence;
- Training approaches (length, level, etc.) and modes of delivery that lead to effective learning and successful skills outcomes for teachers;
- The effect of refresher courses and in-service training on teachers' HIV & AIDS-related knowledge, attitudes and skills ;
- Relevant indicators to monitor and evaluate teacher education programmes on HIV and AIDS. (UNESCO, 2008h).

Sexuality education as a platform

Though sexuality education (which includes HIV-related content and skills) has been formally incorporated into the national curriculum in **Mexico** since the early 1970s, gaps in the preparation of teachers to deliver related material effectively have long been identified. There are no specific programmes to train teachers in sexuality education at the "Normales" (teacher training colleges) and teachers are expected to deal with the content as part of subjects related to adolescent development, biology and other subjects. A recent project (Curricular Adjustment and Strengthening of Teacher Competencies in Comprehensive Sexuality Education), implemented by the Ministry of Public Education with support from a national NGO network aimed at breaching the gap in pre-service training for sexuality education, using a train-the-trainer approach over a 40-hour course. Participants discussed topics related to sexuality education and gender, methodological issues related to comprehensive approaches, sexuality in childhood and adolescence, risk and preventive behaviours, ethics and sexual rights. At the same time, they were encouraged to identify relevant content to be introduced as curricula are reviewed. The utilization of the perspective of experienced teachers in initial teacher training, through the development of collaborative curricular "maps" developed at the grass roots level, has served to both ensure an injection of "reality" into pre-service training and an ongoing validation of the work of teachers already in service. Almost 200 trainers have been reached to date, with support from UNESCO and UNFPA to the Ministry of Public Education.

Over the past several years, the Ministry of Education in **Uruguay** has been actively seeking ways to create and take advantage of opportunities to strengthen sexuality education content in pre-service teacher training. Examples include numerous information and awareness-raising seminars with education students to discuss the aspects of the national sexuality education programme, including sexuality, gender, human rights, HIV, bioethics, sexualization and development. With changes in the national integrated teacher training system introduced in 2008, the Ministry of Education took the important step of integrating various sexuality education components in a cross-cutting format, as well as establishing a mandatory 30-hour seminar on sexuality education for primary school teachers, and another optional seminar for more advanced students. Work with professionals in the teacher training institutes and centres has also been expanded, with workshops and seminars providing opportunities for in-depth exploration of specific topics and methodological issues. Targeted research within teacher training institutes has explored student attitudes and expectations regarding their preparedness to deliver quality sexuality education in schools. Finally, a select group of experienced teachers has been formed

to monitor and lobby for ongoing efforts to improve the quality of teacher training and performance, with a specific focus on sexuality education.



Cuba's Ministries of Education and Higher Education have long assumed responsibility for ensuring that sexuality education is a component of the education that all Cubans receive. This ensures that by the time students reach university level, they are well prepared to address relevant issues in their studies and in their own lives. Sexuality education issues are well integrated into social sciences curricula, and since 2003 the Department of University Extension has implemented a programme focused on promotion of HIV/STI prevention in the university setting. This programme includes content related to self-esteem, gender, violence, sexual diversity and sexual and reproductive rights. Two universities in Havana implement a programme developed by CENESEX, the national sexuality education centre, aimed at promoting respect for sexual orientation and gender identity. Within teacher training programmes, sexuality education components have been mandatory since the 1980s, and include subjects related to pedagogy, psychology, school health, teaching methods, research methodologies and the history of education. The curriculum for Year 3 includes a subject more specifically focused on health and sexuality, and is based on weekly reflections and debate among student teachers.

Multiple options (compulsory/specialist)

In **Mongolia**, a UNFPA-supported initiative has provided all students with a core compulsory curriculum as well as a specialist component for those who elect to teach HIV or the broader specialism of adolescent sexuality and reproductive health, an option exercised by only the most motivated students. Under the aegis of the Ministry of Education, Culture and Science, the following activities were implemented:

- In 2008, a compulsory course of 32 hours (one credit hour) started for all students of the teacher training institutions and colleges. This covers reproductive health and sexuality, and also STI and HIV issues.
- The expansion of the health education course to 16 hours of lectures, including not only sexuality and HIV education but other comprehensive health education topics, reached hundreds of students through lectures during the 2004/2005 academic year.
- A 64-hour elective course on adolescent sexuality and reproductive health, including STI and HIV prevention was introduced in the 2001/2002 academic year in the Biology Department of the Mongolian State University of Education, reaching 600 students in 2009 (UNESCO Beijing).

3.3 Capacity-building and support for teacher trainers

Well-trained and supported teacher trainers are key to the success of any reform at institutional level. They are decision-makers and implementers, as well as intellectual role models for their students. The 'e-learning' example in this section, implemented by German NGO InWent in collaboration with University of the Western Cape, South Africa, has a number of interesting features which are highlighted below.

Firstly, it puts the focus on supporting and developing the capacity of *teacher educators and curriculum developers* through a multi-country initiative (**Malawi, Tanzania, Namibia and South Africa**).

Secondly, it takes place over a relatively long period and combines face-to-face workshops with web-based learning and support, an innovative modality for developing countries.

Thirdly, it includes a personal development component and requires that participants undertake practice as part of the initial workshop. It also sets up a support structure at country level – a community of practice – for the participants to use and contribute to, and it uses follow-up mentoring to support participants as they consolidate action plans developed during the training.

A detailed description of the structure of the course has been included in Annex 2 to illustrate its main features.



An e-learning, blended learning course: HIV and AIDS for teacher educators and curriculum development experts in sub-Saharan Africa³³

Since 2006, the University of the Western Cape's HIV and AIDS Programme, in partnership with InWent gGmbH (Germany), has been running a blended learning course, *Teaching and the AIDS Pandemic*, specifically for lecturers and tutors from teacher training institutions in sub-Saharan Africa. Over 120 teacher educators from Malawi, Tanzania, South Africa, Namibia, Kenya, Rwanda, Kenya and Zambia have completed the course to date. Participants begin the course with a 10-day intensive face-to-face interaction period at the University of the Western Cape followed by nine months of tutored on-line work. Importantly, their 10 days in South Africa include a two-day experiential workshop on gender roles as they relate to HIV risk and prevention. The overall course includes four modules and carries 60 post-graduate university credits (600 hours) that are recognised toward further study in each of the participating countries. The course begins by re-framing the AIDS pandemic as more about the H in HIV (the Human) than the V (the virus), a shift from the dominant narrative of AIDS for nearly three decades. Re-framing the pandemic requires participants to

re-frame their own personal, professional and curricular responses to AIDS as they collectively gain a new sense of the problem and discover their own roles as part of the solution. This course is a long-term investment, as concerned since its planning phase with what happens after participants complete the course as with the course itself. To this end, a network of past course participants and interested others has been developing since 2006, supported by an interactive on-line alumni site referred to as the Alumni Forum. The on-line site supports monthly topical discussions in which all alumni can participate; spaces for working group discussions; uploading of relevant documents to share with others; and locations for specific discussions and topics. This expanding community of practice among teacher educators has grown to over 200 active members. In addition to the course and the Alumni Forum, the project has been working to build local capacity among teacher educators in Malawi, Tanzania, Namibia and South Africa to help guide and develop the response to the pandemic by their education sectors. Alumni of the course are taking real ownership of the response to the pandemic and are becoming leaders in their countries, with the formation of national chapters of NTERA (Network of Teacher Educators Responding to AIDS), a name given to the emerging communities of practice.

Young people lead

Teacher trainers are not the only cohort that can provide a lead on excellence in HIV and AIDS training. Student teachers can also be leaders and initiators. The Teacher AIDS Action Programme (TAAP) in **Zambia** is a youth-led nationwide intervention reaching out annually to approximately 5,000 teacher trainees in 13 government-owned education colleges in all nine Zambian provinces. The initiative is implemented by Students Partnership

Worldwide (SPW) Zambia, in collaboration with the Zambian Ministry of Education. From 2006–2009, this intervention has centred on three core objectives as follows:

1. To bring about behavioural change among student (trainee) teachers on SRH issues and life skills.
2. To build capacity of student (trainee) teachers to implement school based HIV and AIDS activities.

³³ Developed by InWent (Bonn) and the University of the Western Cape (South Africa). Accredited by the University of the Western Cape. http://www.ibe.unesco.org/fileadmin/user_upload/HIV_and_AIDS/publications/breakingthesilence_WesternCape_univ.pdf

3. To increase the number of schools mainstreaming HIV and AIDS activities.

The student (trainee) teachers are reached by Zambian peer educators (trained for over a month by SPW using its established best practice methodology). These peer educators are placed in the education colleges for a period of 12 months, working with student teachers, using a non-formal learner-centred pedagogy.

The project was first initiated in 2005 by the Zambian Ministry of Education, which identified the need for an HIV and AIDS and SRH-related intervention targeting student teachers to accompany and build on activities that were already taking place in schools. (FHI, 2009).

The power of co-curricular activities

Curriculum interventions are always strengthened by complementary support from co-curricular activities. In the example highlighted in this section, an international NGO worked with student teachers in co-curricular time focused on changing sexual behaviour, minimizing their risk of infection and using theatre and drama as a tool to engage, educate and protect children and young people.

Theatre for a Change uses interactive theatre methodologies to address SRH; gender, relationships and sexuality; behavioural patterns and communication skills. Over 5,000 teachers have been trained in **Malawi, Ghana, Togo** and **Burkina Faso** since 2003. In Malawi, Theatre for a Change has a core team of facilitators linked to teacher training colleges. Over the next four years, they will train an estimated 7,200 pre-service teachers to protect themselves, and the children they teach, from HIV infection³⁴.

3.4 Quality assurance, monitoring and evaluation

A lack of accountability for performance in teaching pre-service training in HIV is one of the weaknesses identified by many commentators. Some teacher training institutions have responded, developing tools to focus on quality, including checklists, assessment tasks and questionnaires that assist teacher trainers with the task of monitoring and evaluating their own work and the work of their students.

Two examples, one from Africa and the other from Asia-Pacific, illustrate possible strategies in this area.

In **Nigeria**, the National Commission for Colleges of Education³⁵, in collaboration with Action Health, published Quality Assurance Tools for Colleges of Education in Nigeria to monitor and evaluate their Family Life and Emerging Health Issues curriculum (FLEHI). The tools are designed to assist lecturers with the successful implementation of the FLEHI course; and to provide teacher trainers with tools for monitoring and evaluating the FLEHI course at National Commission of Education (NCE) level. There are five instruments:

1. The pre- and post-test attitude inventory, which measures attitudes of student teachers to school-based delivery of the FLEHI curriculum in school in respect of: teaching and learning strategies; planning tools; limitations in delivery; and activities to enhance delivery and assessment of FLEHI teaching and learning.
2. An instrument to test the ability of the teacher trainers to implement the FLEHI curriculum.
3. A lesson observation schedule to assess student teachers' perceptions of the quality of delivery of the FLEHI curriculum by teacher trainers.
4. A knowledge inventory for student teachers.
5. A tool to assess the preparedness of teacher training institutions to implement the FLEHI curriculum.

In **Papua New Guinea**, detailed assessment tasks and evaluation criteria were developed to help teacher trainers, specifically to assess components of pre-service teacher HIV training. Students are asked ³⁶ to connect what they have been learning with the context in which they live, a characteristic of highly effective participatory learning. A few examples are highlighted below.

- Use the HIV and AIDS policy and syllabus to prepare a ten-step plan for implementing this subject and policy at a remote rural primary school (i.e. how to work well with the community).
- Reflect on sexuality and sex in your own culture and how this affects education in primary schools (positive and negative, barriers and opportunities).
- Debate a controversial topic in a small group (research your point of view, prepare in detail and argue persuasively). Assess through observation.
- Design a one-week in-service programme about either HIV and AIDS and STIs, Personal Development, Health or Life Skills for a remote primary school.
- Write a bank of five lesson plans for Grade 8 Personal Development on safe sex, avoiding risk and sexuality or Grade 7 Personal Development on puberty or Grade 5 Health on HIV and AIDS and STIs. (AusAid/PNG DoE, 2009).

³⁴ <http://www.tfacafrica.com/>

³⁵ <http://www.actionhealthinc.org/publications/docs/FLEHICurriculum-TrainingGuideForCollegesOfEducation2009.pdf>

³⁶ A more detailed list is provided in Annex 3

3.5 Supportive partnerships

Partners – including teacher unions, donors, NGOs, professional and community organisations – can contribute to the success of pre-service HIV education initiatives in a number of ways. Teacher unions have the capacity to popularise and mobilise support where it counts most – in the school and classroom. On the other hand, NGOs have the advantage of flexibility and learning methodologies which provide valuable alternatives to traditional approaches followed by colleges and schools.

Teachers' unions

Teachers' unions can play an important role in creating an environment which enhances the status and visibility of a comprehensive approach to HIV and AIDS in the pre-service training curriculum and in teacher training institutions. In addition, they can help to minimize the adverse effects of HIV and AIDS on teachers and the detrimental impact of HIV and AIDS on the wider education sector.

Eighty teachers' unions in 49 countries participate in the EFAIDS Programme³⁷, implemented by Education International and its partners in **Africa, Latin America and Asia**. In the EFAIDS Programme, teachers' unions go beyond training on HIV, and work also to research, advocate and campaign for improvements on a whole range of AIDS-related themes. Working within their own context, teachers' unions are learning the best ways to respond to and prevent AIDS-related discrimination. Teachers' unions are proving vital to supporting teachers living with HIV, partnering with networks of HIV-positive teachers or establishing dedicated networks within unions where possible.

Donors

Between 2005 and 2007, UNESCO's partnership with the OPEC Fund for International Development³⁸ and Ministries of Education in **Asia** resulted in the adaptation and dissemination of guidelines and capacity-building on HIV and AIDS to a number of countries including, Bangladesh, China and Kazakhstan. Overall, more than a thousand teacher trainers from six countries were trained³⁹.

³⁷ <http://www.ei-ie.org/ef aids/en/index.php>

³⁸ Organisation of Petroleum Exporting Countries

³⁹ UNESCO, OPEC Fund/UNESCO *Project on Mitigation of HIV/AIDS Crisis in Asia through Education, Final Narrative Report*, Paris, December 2007.

RECOMMENDATIONS

This section summarizes the lessons learned, including challenges and factors that contribute to effective pre-service teacher training on HIV and AIDS education.

Though many countries have made major progress towards mainstreaming HIV and AIDS education into the school curriculum over the past few years, the following actions will contribute to a stronger education sector response and a stronger response in the classroom.

Contribute to stronger national responses

- Ensure that pre-service teacher training on HIV and AIDS is mainstreamed in education sector policies, workplace policies, strategic plans and other national level education and multi-sectoral commitments;
- Prioritise pre-service and in-service teacher training on HIV and AIDS in national teacher training policy;
- Lobby government decision-makers in the area of teacher training policy and institution-level managers to act on existing national commitments;
- Establish and re-enforce policy-level linkages between in-service and pre-service teacher training;
- Involve teachers, teacher unions, people living with HIV and AIDS (especially teachers) and other key stakeholders in setting national standards for teacher training curricula on HIV and AIDS;
- Make HIV and AIDS examinable in the training curriculum for all new teachers (especially in high prevalence epidemic contexts);
- Build capacity and provide support to teacher trainers on HIV and AIDS, at national level;
- Mobilise the learning and teaching resources needed by teacher training institutions to produce high quality graduates;
- Create and support career paths and other incentives for new teacher trainees in key subjects which deliver HIV & AIDS-related content knowledge and skills, including HIV prevention education, sexuality education, counselling, Life Skills Education, school health and peer education related to SRH;
- Create alternative learning pathways in the curriculum for teachers in other disciplines or those with differing needs (low and concentrated epidemic settings).

Contribute to stronger institutional responses

- Advocate for a stronger role for pre-service training institutions in teacher training, development and support;
- Prioritise a learning and teaching environment committed to non-discrimination, and care and support for people living with HIV and their families;
- Motivate for and develop the leadership role of college principals and programme leaders;
- Mobilise support for coordination between all institutions, as well as in-service training providers;
- Encourage and support stronger linkages between training institutions, teacher trade unions, civil society organisations (CSOs) and organisations of people living with HIV (particularly teachers);
- Ensure that teacher trainers are well-trained and supported with good quality, accurate and appropriate materials;
- Promote the use of participatory methods and reflection on personal values, fears and gender issues;
- Mobilise internal resources and external partners to support teacher trainers and trainee teachers to access skills-building courses and resources;
- Link curriculum interventions with co-curricular activities including peer education, practical experience, school-based campaigns, etc.;
- Encourage teacher trainers and students to conduct research to inform the process of curriculum development and reform;
- Facilitate access to HIV education, prevention and care services that will prevent and protect staff and students from HIV and mitigate its impact;
- Use curriculum and other interventions to eradicate stigma and encourage disclosure as well as adherence to positive health and dignity;
- Ensure that a code of ethics is understood and enforced, to minimize sexual relationships between student teachers and teacher trainers.

Contribute to stronger curriculum responses

- Provide policy and institutional support for curriculum reform;
- Develop clear national standards that link pre- and in-service training;
- Make clear linkages to the school curriculum that are relevant to the context, gender-sensitive and comprehensive;
- Include content knowledge and skills that are both personal and professional;
- Ensure assessment policy and practice are sensitive to the requirements of different classroom settings;
- Create multiple entry-points and learning pathways to accommodate trainees with different needs in terms of programme design (core courses, specialised options, etc.);
- Encourage trainee teachers to develop school-based co-curricular linkages and engage children and young people in curriculum development;
- Develop monitoring and evaluation systems that check and support the work of the teacher trainers;
- A particular attention should be put on sensitive issues linked to sexuality, changes occurring at puberty, gender, feelings and relations.

“The struggle against HIV and AIDS is the greatest challenge of our age. Success in overcoming the AIDS pandemic demands exceptional personal, moral and social commitment on everybody’s part; teachers are no exception. Their professional life centres around young people who constitute the generation that provides hope for tomorrow but are also the generation most at risk of HIV infection today. Because of this, a great deal is expected of teachers. The future of millions of people depends in a real way on their dedicated response to all that the AIDS pandemic represents. To generate this commitment, teacher preparation and development programmes need to form prospective teachers so that they will become technically expert HIV and AIDS pedagogues who are personally dedicated to rolling back the pandemic and ushering in a world free from HIV and AIDS.”

Kelly, UNESCO 2009

Many countries have made great progress towards mainstreaming HIV and AIDS education into the school curriculum over the past few years. However, the major focus has been on the learner, with the result that training and ongoing support for teachers have not received the necessary attention. Pre-service teacher training can equip teachers with the skills, personal motivation and values to deliver new curricula in a new way which can successfully fill the knowledge gap on HIV and sexuality that is all too common for young people.

With a deeper focus on knowledge, values, skills and personal development, along with appropriate support for those infected with or affected by HIV and AIDS, student teachers are able to undergo personal transformations that are carried over into the classroom. The result is a cadre of more sensitive and skilled teachers, well-rounded educators who are able to respond to the many demands made on them in a world with HIV and AIDS, in the process raising the quality of education in general, not only in the field of HIV.

ANNEX 1

EXCERPTED FROM UNESCO (2009), DRAFT PRESET RH/HIV TEACHER TRAINING MANUAL FOR LESOTHO AND NAMIBIA, UNPUBLISHED.

Module 1: Planning and teaching adolescent and reproductive health (12–15 hrs)

By the end of this module, all participants should have the following:

- The capacity to plan, teach and assess life skills, adolescent reproductive health, STI and HIV teaching and response.
- The ability to explain the importance of assessment in life skills, adolescent reproductive health, STI and HIV prevention education.
- The capacity to write units of work, weekly plans and lesson plans.
- Knowledge of the importance of a life skills-based approach.
- The ability to work sensitively and constructively with local communities, religious and faith-based organizations.
- The ability to list possible areas of resistance to the teaching of these topics and demonstrate how to overcome them.

Module 2: Relationships, reproduction and family planning (9–10 hrs)

By the end of this module, all participants should have the following:

- The ability to elaborate key relationship and reproduction themes.
- The capacity, knowledge and skills to teach reproduction and family planning confidently in the context of human relationships.
- Knowledge of a range of teaching and learning activities for reproduction and family planning.
- Confidence in the use of words and phrases about relationships, reproduction and family planning.
- The ability to discuss and understand the importance of teaching this topic to young people.
- The capacity to explain issues that affect the teaching of this topic.

Module 3: Adolescence, human sexuality and reproductive health (12–15 hrs)

By the end of this module, all participants should have the following:

- An ability to reflect on their own values and relationships and understand the need to be open-minded and tolerant.
- The capacity to practise a range of appropriate teaching and learning activities for adolescence, puberty and sexuality.
- An understanding of the changes (physical, emotional, social and cultural) that young people experience.
- An understanding of the importance of building self-esteem in children, and techniques for doing so.
- An understanding of the importance of self-esteem in relation to HIV and AIDS prevention.
- Confidence in using words and phrases about adolescence, puberty and sexuality.
- The ability to explain the importance of teaching this topic to young people.
- The capacity to talk with children about adolescence, body change and sexuality in a relevant, respectful and caring way.
- The ability to discuss issues involved in the teaching of adolescence, puberty and sexuality, including gender issues, values, assertiveness and self-esteem.

Module 4: STIs, HIV and AIDS (12–15 hrs)

By the end of this module, all participants should have the following:

- The ability to elaborate the learning outcomes for STIs, HIV and AIDS.
- Sufficient knowledge and skills to teach this topic confidently.
- Access to a range of teaching and learning activities for this topic.
- Confidence in the use of words and phrases about STIs, HIV and AIDS.
- An understanding of the importance of teaching and discussing this topic and related life skills to young people.

- The ability to explain issues that affect the teaching of this topic, including gender.
- The development of a caring, loving and tolerant attitude to people living with STIs, HIV and AIDS.
- The capacity to discuss and demonstrate the correct use of the condom and Femidom.
- The ability to discuss the impact of the HIV and AIDS epidemic on the education sector. The capacity to operationalize the education sector policy on HIV and AIDS.

Module 5: HIV prevention, treatment, care and support (2 hrs)

By the end of this module, all participants should have the following:

- Sufficient knowledge and skills to teach this topic confidently.
- The ability to practise a range of teaching and learning activities for this topic.
- The capacity to discuss and understand the importance of teaching this topic and life skills to young people.
- The ability to show a caring, loving and tolerant attitude to people living with HIV and AIDS.

ANNEX 2

EXCERPTED FROM INWENT/UNIVERSITY OF THE WESTERN CAPE, SOUTH AFRICA, E-LEARNING/BLENDED COURSE FOR TEACHER EDUCATORS AND CURRICULUM DEVELOPERS

Module 1: Reframing the AIDS pandemic

- Unit 1: Course introduction, face-to-face session, UWC, Cape Town.
- Unit 2: HIV and AIDS: the starting point.
- Unit 3: The AIDS pandemic in context: gender, culture and identity.

Objectives:

- To consolidate and extend participants' knowledge of the epidemic.
- To understand the consequences for themselves, their family, friends, community and society.
- To start rethinking their own role and agency as teacher educators in the pandemic.
- To apply new methods and tools to their own teaching practice (story telling, searching the world wide web etc.)
- To achieve basic competency in using the e-learning platform.

Module 2: Schools, teachers and teaching in the age of AIDS

- Unit 4: AIDS and education
- Unit 5: Being a good teacher
- Unit 6: School case study, visit 1

Objectives

- To understand the impact of the pandemic on all aspects of the education system.
- To learn to use a case study approach.
- To reflect critically on and change their own practice based on their findings in their case study school.
- To reflect personally on their own change during the module.
- To share good practice with fellow participants and so build a community of practice.
- To apply new methods and tools to their own teaching practice (e.g. case study approach).
- To understand the qualities of a good teacher and how to impart these to their own students.

Module 3: Developing AIDS-competent curricula and teachers

- Unit 7: Teaching and the curriculum I
- Unit 8: Teaching and the curriculum II (School case study, visit 2)
- Unit 9: Life skills education

Objectives

- To understand the core components of an effective HIV and AIDS curriculum.
- To plan an appropriate curriculum.
- To understand appropriate learner-centred methods for teaching HIV and AIDS related content.
- To understand the concept and core components of life skills education.
- To apply new methods and tools to their own teaching practice.
- To extend their basic research skills.
- To know how to teach in large classes.
- To demonstrate that they can apply what they learn in the module to changing their own teaching practice.

Module 4: Building responses to AIDS in schools and communities

- Unit 10: Developing schools as centres of care and support for vulnerable children
- Unit 11: Developing health promoting schools
- Unit 12: Becoming a truly reflective practitioner: my way forward

Objectives

- Understand the risk and protective factors for children growing up in a time of AIDS.
- Understand how schools need to respond better to the needs of vulnerable children in the context of AIDS.
- Understand the implications of this new role of schools for teacher education.
- Conduct a case study.
- Understand the concept and importance of health promoting schools.

- Acquire the skills to implement the health promoting schools strategy.
- Create action plans to change teaching practice in their own institutions in relation to AIDS.
- Introduce participants to the alumni network.

ANNEX 3

EXCERPTED FROM – PAPUA NEW GUINEA EXAMPLE⁴⁰

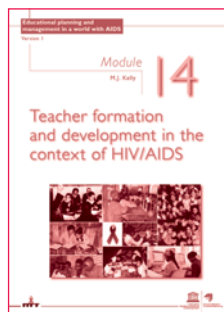
Assessment criteria

- Use the HIV and AIDS policy and syllabus to prepare a ten-step plan for implementing this subject and policy at a remote rural primary school (i.e. how to work well with the community).
- Reflect on sexuality and sex in your own culture and how this affects education in primary schools (positive and negative, barriers and opportunities).
- Debate a controversial topic in a small group (research your point of view, prepare in detail and argue persuasively). Assess through observation.
- Design a one-week in-service programme about either HIV and AIDS and STIs or Personal Development or Health or Life Skills for a remote primary school.
- Write a bank of five lesson plans for Grade 8 Personal Development on safe sex, avoiding risk and sexuality or Grade 7 Personal Development on puberty or Grade 5 Health on HIV and AIDS and STIs.
- Develop a resource pack for upper primary teachers on STIs and HIV and AIDS including basic facts, a lesson plan and three games.
- Conduct and evaluate a community awareness HIV and AIDS or reproductive health project for local community groups.
- Construct models (e.g. showing the immune system, showing physical changes in puberty).
- Interview a relevant person about HIV and AIDS and their experiences (e.g. church leader, community leader, PLWHA, NGO worker, health worker, youth, peer educators). Report this in writing.
- Use newspaper articles about either HIV and AIDS or gender issues to develop a bank of exercises and activities.
- Carry out field research and write this up in a report (e.g. on knowledge of STIs or attitudes towards people living with HIV and AIDS).
- Plan a learning resource/carousel for a Grade 5 session on puberty.
- Design a test or quiz (with answers!) on Personal Development or HIV and AIDS and STIs or Puberty for a Grade 5–8 class.
- Write a yearly programme and termly overview for Personal Development or Health.
- Write a Pupil Resource Book for one Grade 5–8 class using the Personal Development and Health outcomes for that grade.
- Write a portfolio of case studies that illustrate risk for young people or HIV and AIDS stigma or Positive Living. Include clear behavioural messages.
- List the advantages and disadvantages of ten teaching and learning strategies for Personal Development.
- Write essays on set themes e.g. the HIV and AIDS epidemic in Papua New Guinea and its effects on education; or the challenge of teaching about sex in schools.
- Using the latest NACS data on STI and HIV infections, prepare a report on the epidemic in Papua New Guinea and a set of questions you could ask a class about the data and graphs.
- Keep a reflective weekly journal through the course reflecting on what you have learnt any changes you have noticed in yourself and your increasing knowledge and skills.
- Write a story/case study of a person living with HIV and AIDS that illustrates important behavioural messages such as no stigma and positive living. (AusAid/PNG DoE, 2009).

⁴⁰ Full details are contained in the teachers' guide: <http://www.education.gov.pg/quicklinks/hiv aids/lecturers-guide-4th-edition-2009-inside-pages-final.pdf>

RESOURCES

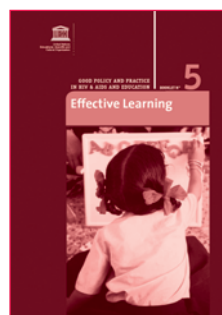
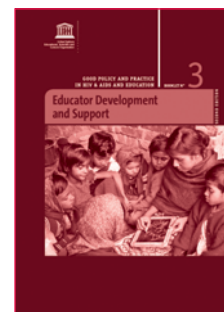
Teacher formation and development in the context of HIV and AIDS (UNESCO IIEP/ESART, 2007). This is a self-completion training module and part of the series *Educational Planning and Management in a World with AIDS*. It covers the topic of preparing educators to address HIV and AIDS, clarifying the difference between ‘teacher formation and development’ and ‘teacher training’. It emphasizes the educator’s role as a positive agent of social change. It is useful for education planners in ministries of education, programme managers and teacher training institutions.



Teacher training manual on HIV and AIDS preventative education in the school setting (UNESCO Bangkok, 2005). This was developed as part of a project entitled, *Strengthening and Expanding the Provision of HIV and AIDS Life Skills and Preventive Education in Teacher Training Colleges*. The target audience of the manual is teachers and teacher trainers involved in pre-service and in-service teacher training. The manual was piloted and peer-reviewed by participants from 13 countries in the Asia-Pacific region. The result is a generic manual that can be adapted, translated and modified to suit the different needs and cultural and social environments of different countries. The manual includes the following components:

- *Basics of growing up – understanding adolescence and adolescent sexuality*
- *Unplanned pregnancy and STIs*
- *Basic facts about HIV and AIDS*
- *The HIV and AIDS epidemic and its impact*
- *HIV and AIDS, drugs and substance abuse*
- *HIV and AIDS and human rights*
- *Care and support for PLWHIV*
- *Working together in the community to combat HIV and AIDS*
- *The integration of HIV and AIDS preventative education within the school curriculum*
- *Learner-centred strategies and life skills techniques*
- *Assessment tools for use in HIV and AIDS prevention education.*

Good policy and practice in HIV and AIDS and education: Educator development and support (UNESCO 2nd edition, 2008). This booklet addresses issues affecting educators in the context of HIV and AIDS, including training, conduct, care and support. The booklet brings together a variety of programmatic and policy experiences from different regions, highlights lessons learned and provides evidence and ideas for action. Improved training of educators, supportive work environments and workplace policies, educator access to services and support, and the need to tackle stigma and discrimination are among the issues addressed.



Good policy and practice in HIV and AIDS and education: Effective learning (UNESCO 2nd edition, 2008). This booklet addresses issues affecting learner development. It includes annotated lists of resources on curriculum, training, teaching and lesson planning guidelines and manuals; teaching and learning methods and activities; materials development; learning materials and other resources for educators.

Building knowledge about HIV and AIDS: an interactive course for educators (UNESCO Bangkok, 2008). This is a self-access e-learning course primarily designed for people who are involved in educating young people, in both formal and non-formal educational settings. This e-learning course has been designed to inform, engage and challenge educators, as a very user-friendly and interactive learning resource for learners with basic English proficiency and computer ability. The course consists of five modules with the following subjects: *the basic science of HIV and AIDS; HIV prevention and risk reduction for young people; the global impact of HIV and AIDS over 30 years; living positively with HIV; and HIV & AIDS education in and beyond the school setting.* <http://www.unescobkk.org/hiv-AIDS/e-course/>



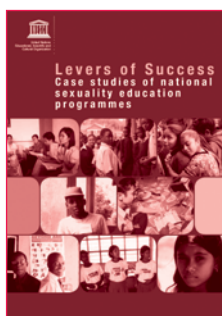
International Technical Guidance on Sexuality Education (UNESCO, 2009).

An evidence-informed approach for schools, teachers and health educators, UNESCO, Paris. Published in partnership with UNAIDS, UNFPA, UNICEF and WHO, this two-volume set of standards is based on a rigorous review of evidence on sexuality education programmes. It is aimed at education and health sector decision-makers and professionals and is designed to support education, health and other relevant authorities in the development and implementation of school-based sexuality education programmes and materials. Volume 1 focuses on the rationale for sexuality education, presenting the evidence base and provides sound technical advice on the evidence base for sexuality education, characteristics of effective programmes and Good practice in educational institutions. Volume 2 presents a framework of topics and learning objectives to be covered in a 'basic minimum package' on sexuality education for children and young people from 5 to 18+.



Levers of Success: Case studies of national sexuality education programmes (UNESCO, 2010).

This set of case studies explores the variety of factors that have contributed to the successful development and implementation of sexuality education programmes in six different countries: China, Jamaica, Kenya, Mexico, Nigeria and Viet Nam. The 'levers of success' include a number of factors related to teacher training.



In **Ghana**, a national HIV and AIDS curriculum known as the 'Window of Hope' was developed (2004). A manual on the curriculum was produced for student teachers enrolled in Ghana's TTCs. The guide provides teachers with information to use in teaching HIV and AIDS issues in the classroom and to protect themselves from infection. It was produced by the *World Education Strengthening HIV and AIDS Partnerships in Education II (SHAPE II)* project, in partnership with the *Ministry of Education/GES* and *USAID*.

In **Ecuador**, the *National Program of Education on Sexuality (PRONESA)* is currently working on the development of educational packages on *Comprehensive Sexuality Education* for different levels of education. Each of these packages includes a component for the prevention of HIV and AIDS with a gender and intercultural approach. They were planned for use in Ecuador's educational institutions from April 2010 after a process of education and training of teachers in the proper handling of the material. All these processes will be supported and complemented by the work of Inter-Institutional Support Committee (CAI) and specialists in the field of HIV and AIDS (Magaly Robalino Campos, UNESCO Quito).

In **Ethiopia**, teacher training in HIV and AIDS are currently being supported by several UN agencies, NGOs and faith-based organizations (FBOs), such as the International Red Cross, PACT Ethiopia, the International Organisation for Migration, UNICEF, Pathfinder (in collaboration with teachers' unions) and the UNESCO International Institute for Capacity Building in Africa (IICBA). IICBA, with financial assistance from USAID, has attempted to enhance HIV and AIDS awareness by developing learning materials in Amharic, and HIV & AIDS preventive education videos on HIV and AIDS for Ethiopian teachers. IICBA is also producing videos on HIV and AIDS for children and adults and for TTCs throughout Africa (Nzioka and Ramos, 2008).

Transforming Education for Girls in **Nigeria** and **Tanzania** (TEGINT) is a five-year project in partnership with Maarifa ni Ugungo in Tanzania, Community Action for Popular Participation (CAPP) in Nigeria, and the Institute of Education, with the technical support of ActionAid International and the financial support of Comic Relief. The project has a teacher training component including aspects of HIV and AIDS. See: <http://www.actionaid.org/main.aspx?PageID=1419>

In **Namibia**, a range of resources exist which can be used or further adapted for use by teacher educators and students teachers. Of particular note are the following which are being reviewed by the EDUCAIDS/Virginio

Bruni Tedeschi Foundation project in order to expand on their potential:

- *Window of Hope* is implemented across the country in primary schools as a life skills intervention. It is facilitated by trained teachers during after-school clubs and targets children aged 10–14. Since 2004 all primary and combined schools in Namibia have been required to offer the programme as a voluntary after-school activity.
- Ombetja Yehinga – *The Red Ribbon: HIV and AIDS Teacher Training Programme* (Ministry of Basic Education, Sport and Culture; National Institute for Educational Development; Kunene Regional Council 2001). This manual supports the delivery of the Red Ribbon Training Programme and can be used as a stand-alone document. It is comprehensive in terms of sex education and promotes games-based discussions with learners. It includes condom demonstrations, including female condoms, and addresses issues of treatment, care and support. It provides guidance on how to infuse the content (e.g. into mathematics or literature). It is based on local culture and language, including dialects, as well as referring to local epidemiological contexts.

The Window of Hope programme has been adapted for **Sierra Leone**.

Our future – preparing to teach sexuality and life skills: an awareness training manual for teachers and community workers (International HIV/AIDS

Alliance; Ministry of Education of Zambia, 2008). The activities in this manual seek to equip teachers with a stronger understanding of sexuality, gender, sexual and reproductive health, and HIV & AIDS and the self-awareness, values and skills to play an effective role in HIV prevention, care and mitigation in their schools and communities.

This includes providing supportive, positive role models, creating a safe environment, reducing stigma and discrimination and teaching sexuality and life skills effectively. The manual was developed by teachers and teacher trainers in **Zambia**.



This manual is part of the *Our Future* series, and comprises:

- *Preparing to teach sexuality and life skills*. A trainers' manual designed to prepare teachers and others for teaching sexuality and life skills by exploring gender and sexuality issues in their personal and professional lives.
- *Teaching sexuality and life skills*. A guide to teaching sexuality and life skills education and using the 'Our Future' pupils' books.
- *Our future: sexuality and life skills education for young people*. Three school books for pupils in Grades 4–5, Grades 6–7 and Grades 8–9.

All the topics can be covered in a six-day workshop in a training college, school or local venue. The materials are suitable for both in-service training and pre-service programmes and address some of the most important challenges faced by teachers engaging on HIV and AIDS education at primary and lower secondary levels⁴¹.

Teacher exercise book: participatory learning activities from the EI/WHO training and resources manual on school health and HIV & AIDS prevention

(Education International, WHO, Education Development Centre, 2004). This manual is designed to provide resources and examples of participatory learning activities to help prevent HIV infection and related discrimination through schools. The content was designed collaboratively with teachers, health educators and training experts. The manual stresses the critical importance of teacher training before teachers work in the classroom on these issues, enabling teachers to explore their own attitudes and knowledge regarding HIV and AIDS; to justify and advocate for the importance of HIV education in schools; and to develop adequate and appropriate skills in the use of participatory learning techniques in the classroom.

The manual includes a range of participatory learning activities and has been developed by teachers and for teachers, responding to some of the main difficulties regularly encountered by teachers, including in the classroom. It promotes interactions and focuses on life skills development, with a number of useful tips for teachers on addressing sensitive issues, including examples of ice-breaking sessions.

⁴¹ See: http://www.AIDSalliance.org/graphics/secretariat/publications/Preparing_to_teach.pdf

Workplace policy

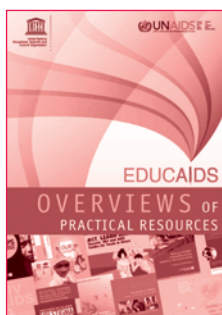
The ILO, in collaboration with UNESCO, has developed a workplace policy framework for education sector institutions⁴² in the **Caribbean region** (ILO/UNESCO, 2006a) and in **Southern Africa** (ILO/UNESCO, 2006b). These policies cover:

- prevention of HIV infection;
- the elimination of stigma and discrimination on the basis of real or perceived HIV status;
- the care, treatment and support of staff and students who are infected or affected by HIV;
- management and mitigation of the impact of HIV in education institutions.

EDUCAIDS Overview of Practical Resources

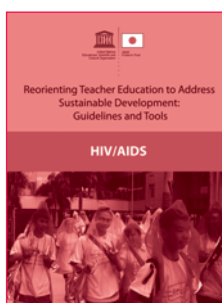
(UNAIDS/UNESCO, January 2008). This overview contains five annotated lists of the best available resources on specific topics, as follows:

- Quality education
- Content, curriculum and learning materials
- Educator training and support
- Policy management and systems
- Approaches and illustrative entry points.



Reorienting Teacher Education to Address Sustainable Development: Guidelines and Tools - HIV/AIDS

(UNESCO Bangkok, 2010). This manual is designed for teacher educators and teachers looking for practical guidelines and tools to incorporate HIV/AIDS into their curriculum based on a theoretical three-day workshop to enable them to learn about: how HIV/AIDS is and is not spread; the difficulties in teaching young people about sex and drugs; why it is important to teach this topic; and techniques to teach this subject.



⁴² For the Caribbean example, see: <http://unesdoc.unesco.org/images/0014/001472/147278E.pdf> For the Southern Africa example, see: <http://unesdoc.unesco.org/images/0014/001469/146933E.pdf>

For a national example, see Kenya National Union of Teachers (KNUT) Workplace Policy: http://www.AIDSportal.org/Article_Details.aspx?ID=5989

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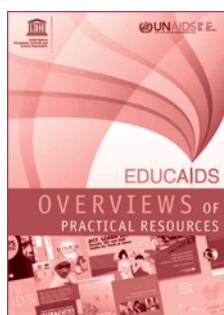
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EDUCAIDS IMPLEMENTATION SUPPORT TOOLS

Technical Briefs



Two-page summaries of key issues related to the essential components of a comprehensive education sector response to HIV and AIDS. Grouped into one of the five essential components of the comprehensive response, each brief is intended to reach high-level officials in ministries of education and other organizations that are charged with supporting the development and implementation of policies, determining resource allocations, and implementing programmes for education sector staff and learners. Each brief can be used as a stand-alone reference. Together they offer comprehensive and flexible guidelines on the continuum of activities required to respond to the epidemic at the country level.



Overviews of Practical Resources

They provide a summary of some of the key resources on different components of education sector policy and programmatic responses to HIV and AIDS. Each Overview includes a brief synopsis of each resource, its aim and content, and how to access it.

For more information and to access the above resources see <http://www.educaids.org>

Complete list of Technical Briefs:

Component of a Comprehensive Response	Brief Title
Quality education	Quality education and HIV & AIDS
	A rights-based approach to the education sector response to HIV and AIDS
	Gender-responsive approaches in education sector responses
	Providing culturally sensitive education on HIV and AIDS
	Girls' education and HIV prevention
	Education for orphans and children made vulnerable by HIV and AIDS
	HIV and AIDS education for minorities
	HIV and AIDS education for refugees and internally displaced persons
	Focused HIV prevention for key populations
Promoting the greater involvement of people living with HIV in education sector responses	
Content, curriculum and learning materials	Curricula for HIV and AIDS education
	Addressing HIV-related stigma and discrimination
	HIV and AIDS education in primary school
	HIV and AIDS education in secondary school
	Tertiary education responses to HIV and AIDS
Educator training and support	Educator training on HIV and AIDS
	Creating supportive environments for teachers in the context of HIV and AIDS
	Psychosocial support for students affected or infected by HIV
	Strengthening school and community linkages
Policy, management and systems	HIV and AIDS workplace policies for the education sector
	Situation analysis and effective education sector responses to HIV and AIDS
	Projection models for HIV and AIDS in the education sector
	Addressing human capacity in education in the context of HIV and AIDS
	Coordination and strategic partnerships in HIV and AIDS education
	International funding for the education sector responses to HIV and AIDS
	Advocacy for a comprehensive education sector response
	Monitoring and evaluation of HIV and AIDS education responses
Approaches and illustrative entry points	Life skills-based education for HIV prevention
	School health and HIV prevention
	HIV and AIDS education for out-of-school young people
	Drug use prevention in the context of HIV and AIDS education
	School feeding and HIV and AIDS
	HIV and AIDS treatment education
	Communications and media in the education sector response to HIV and AIDS
	HIV prevention with and for people living with HIV

Please visit the EDUCAIDS website, <http://educaids.org>, for updated editions and additional briefs as well as other EDUCAIDS Implementation Support Tools. All resources are available in the six UN languages (Arabic, Chinese, English, French, Russian and Spanish) and Portuguese, and on CD-Rom.

USEFUL WEBSITES

UNESCO's response to HIV and AIDS

<http://www.unesco.org/aids>

EDUCAIDS

<http://www.educaids.org>

UNAIDS IATT on Education

<http://www.unesco.org/aids/iattUNESCO>

Clearinghouses on HIV & AIDS and Education

<http://hivaidsclearinghouse.unesco.org>

List of UNESCO Field Offices

UNESCO has field offices based in the following cities, some of which act as regional bureaux, cluster offices or national offices: Abuja, Accra, Addis Ababa, Almaty, Amman, Apia, Bamako, Bangkok, Beijing, Beirut, Brasilia, Brazzaville, Bujumbura, Cairo, Dakar, Dar es Salaam, Dhaka, Doha, Geneva, Hanoi, Harare, Havana, Islamabad, Jakarta, Kabul, Kathmandu, Kigali, Kingston, Kinshasa, Libreville, Lima, Maputo, Mexico City, Montevideo, Moscow, Nairobi, New Delhi, New York, Phnom Penh, Port-au-Prince, Quito, Rabat, San José, Santiago, Tashkent, Tehran, Venice, Windhoek, Yaoundé.

For more information on the UNESCO field offices, see the webpage:

http://portal.unesco.org/en/ev.php-URL_ID=34016&URL_DO=DO_TOPIC&URL_SECTION=201.html

UNAIDS Cosponsors

ILO – International Labour Organization

<http://www.ilo.org/public/english/protection/trav/aids/>

UNDP – United Nations Development Programme

<http://www.undp.org/hiv>

UNESCO – United Nations Educational, Scientific and Cultural Organization

<http://www.unesco.org/aids>

UNFPA – United Nations Population Fund

<http://www.unfpa.org/hiv/index.htm>

UNHCR – The Office of the United Nations High Commissioner for Refugees

<http://www.unhcr.org/cgi-bin/texis/vtx/protect?id=401915744>

UNICEF – United Nations Children's Fund

<http://www.unicef.org/aids>

UNODC – United Nations Office on Drugs and Crime

http://www.unodc.org/unodc/drug_demand_hiv_aids.html

WFP – World Food Programme

http://www.wfp.org/food_aid/food_for_hiv/index.asp?section=12&sub_section=1

WHO – World Health Organization

<http://www.who.int/hiv/en>

The World Bank

<http://www.worldbank.org/aids>

UNAIDS Secretariat

<http://www.unaids.org>

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BOOKLET N°

6

**GOOD POLICY AND PRACTICE
IN HIV & AIDS
AND EDUCATION**

Pre-service Teacher Training

This booklet is the sixth in a series of publications that address key themes of UNESCO's work on HIV & AIDS and the education sector. It synthesizes lessons learnt, activities, case studies, policies and practices in HIV-related pre-service teacher education and training. The guide concerns the key role pre-service teacher training has in preparing future teachers to deliver effective sexuality education and HIV prevention education to children and young people in education institutions.

Booklet 1 provides an overview of why HIV and AIDS are important issues for the education sector, identifies weaknesses in current policy and programming responses, and highlights evidence gaps. Booklet 2 discusses issues affecting learners in the context of HIV and AIDS, including rights and access to education, protection, knowledge and skills, and care and support. Booklet 3 discusses issues affecting educators in the context of HIV and AIDS, including training, conduct, and care and support. Booklet 4 concentrates on the role and importance of strategic partnerships in developing education sector responses to HIV and AIDS, while Booklet 5 focuses on the topic of effective learning using illustrative examples.

Intended mainly for government, donor and NGO policy-makers, planners and managers working in the education sector, we hope that the booklets will also be useful for school governing bodies, administrators, head teachers, teachers and other educators who are tackling some of the challenges presented by the HIV and AIDS epidemic.

For more information on UNESCO's work on HIV and AIDS, visit the website: <http://www.unesco.org/aids> or contact aids@unesco.org