



MINISTRY OF EDUCATION

COMBATING HIV AND AIDS

IN THE EDUCATION SECTOR IN MALAWI

STRATEGIC PLAN 2005 - 2008



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"In addition to poverty, Malawi is waging a war against HIV and AIDS. In that war, the effective management of basic health and the HIV and AIDS pandemic has become essential for our nation's economic productivity and survival. The HIV and AIDS pandemic is a human crisis that affects the political, economic and medical structures of our nation. As such, a holistic approach is needed to adequately deal with the crisis."

His Excellency the President Dr. Bingu wa Mutharika, President of the Republic of Malawi (2004-2009)

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This document is the Strategic Plan and an Agenda for Action that will guide HIV and AIDS interventions in the Malawi education sector during the period 2005 - 2008. The period differs from the National HIV/AIDS Strategic Framework because the education strategic plan has been designed so as to run parallel to the Medium Term Expenditure Framework (MTEF).

The whole Planning Directorate under the leadership of Professor Dr J. B Kuthemba Mwale, in particular the focal point person Dr. A.F. Kamlongera, the former Deputy Director of Planning and the United States Agency for International Development (USAID) Technical Officer, Ms. M. Tayari - HIV/AIDS and Education Advisor - who coordinated the consultative participatory planning process deserve special mention. Dr. A.F. Kamlongera also compiled and translated minutes of meetings, consultations and other pertinent comments on HIV and AIDS intervention into this Strategic Plan and Agenda for Action. In addition special thanks are extended to the HIV and AIDS and Education Technical Advisor Mr. Robert Ngaiyaye and Dr Joan Woods, United States Agency for International Development (USAID) HIV and AIDS Coordinator for ensuring that the document is finalized and approved.

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The entire strategic planning process reflected the support and priority given to HIV and AIDS prevention by the former President of the Republic of Malawi, His Excellency Dr Bakili Muluzi, and the former Vice President of

Malawi and Chairperson of Cabinet Committee on HIV and AIDS Prevention and Care, Right Honourable Justin C. Malewezi.

The former Honourable Minister of Education, Science and Technology, Dr. George Nga Mtafu exemplified the support of the former Head of State and Government, his vice and the entire cabinet towards this project. This symbolized commitment and leadership at highest level of political machinery which is necessary in the fight against HIV and AIDS.

Special word of thanks goes to the current Minister of Education Honourable Yusuf Mwawa, M.P. for expeditious approval of the Strategic Plan. The approval has enabled the implementation of the HIV and AIDS program in the Education Sector to gain the long awaited momentum.

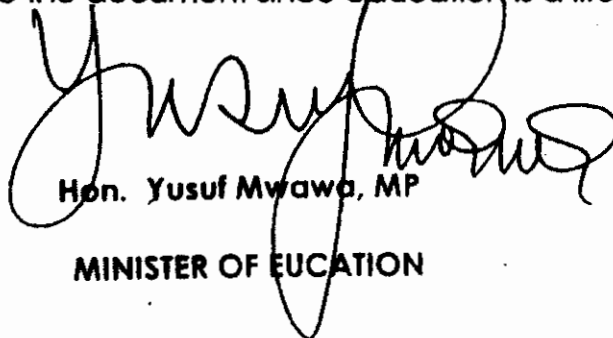
FOREWORD

In translating the expanded, multi-sectoral national response to the HIV and AIDS epidemic, which the National AIDS Control Program produced and disseminated as Malawi National HIV and AIDS Strategic Framework 2000-2004 to the nation, the Ministry of Education has completed an HIV and AIDS intervention education sector plan and Agenda for Action for the period 2005-2008.

The President of the Republic of Malawi, His Excellency Dr. Bingu wa Mutharika Head of State said, "It is recognized today, more than ever before, that without a comprehensive strategic framework to guide a national response, it will remain difficult to galvanize the collective action necessary to reverse the trends of the epidemic and mitigate its devastating impact." The Ministry of Education has defined the National HIV and AIDS Strategic Framework in the context of the education sector. This will allow precise planning and implementation of HIV and AIDS intervention among the five core functions of Curricula Development and Implementation; Teacher Education and Development; Human Resource Management; Guidance and Counseling; and Planning and Budgeting.

I am pleased to note that when coming up with this Strategic Plan and Agenda for Action a consultative participatory approach was advanced. Indeed this is the first step towards realizing the need for a concerted effort and collective action in the fight against HIV and AIDS in the education sector.

I urge all educators, learners, and all stakeholders in the education sector in Malawi to use this Strategic Plan and Agenda for Action as part of translating the National Strategic Framework into reality so that we have a healthy and sustainable education system. For those not in the education sector but who find this Strategic Plan and Agenda for Action useful, I encourage you to use the document since education is a lifelong activity.



Hon. Yusuf Mwawa, MP
MINISTER OF EDUCATION

PREFACE

The HIV and AIDS Strategy and Plan of Action in the Education Sector 2005 – 2008 is a culmination of a national process which started in April 2000. The plan is an education sector response to the HIV and AIDS pandemic called by the National AIDS Commission (NAC) and Government to translate the National HIV and AIDS Strategic Framework into one of the multi-sectoral activities.

The Strategic Plan identifies relevant HIV and AIDS prevention, mitigation, treatment, care and support, workplace programs, mainstreaming and related activities that are very critical to the education sector. Arising from the National HIV and AIDS Strategic Framework 2000 – 2004, this document puts the HIV and AIDS pandemic in the context of education. It adapts, adopts, defines and relates the guiding principles, goals, objectives and intended activities (strategies) for better planning, implementation, financing, management, monitoring, research and evaluation of interventions addressing the HIV and AIDS epidemic.

The Strategic Plan will guide all stakeholders in the public and private education sector. By design, the document has been defined in terms of five key functions of any education sector and all levels and institutions, namely, Curricula Development and Implementation; Teacher Education and Development; Human Resource Management; Guidance and Counseling; and Planning and Budgeting. It is appreciated that the complexity of issues, problems and concerns to be addressed require holistic and cross-cutting approaches that render every individual changed and to become a change agent. This hopefully will result into reduction and ultimately wiping out the effects of HIV and AIDS epidemic in the sector. This document therefore articulates the institutional requirements necessary to marshal energies and resources for the educational sector to make a positive and significant contribution towards the fight against HIV and AIDS in Malawi.

The method used for developing the Strategic Plan and Agenda for Action was participatory and consultative. Likewise its implementation is expected to be participatory because it calls for collective and individual active participation of education institutions and their immediate communities in fighting HIV and AIDS. In essence, this Strategic Plan attempts to comprehensively respond to the challenges the HIV and AIDS epidemic poses, and bring about changed behavior that curbs the spread of HIV.



Simeon. A. Hau (Dr)
Secretary for Education

ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
BCC	Behavioral Change Communication
BCI	Behavioral Change Intervention
CBOs	Community Based Organizations
CSOs	Civil Societies Organizations
DfID	Department for International Development
EMIS	Education Management Information System
GTZ	German Technical Cooperation
HIV	Human Immune-deficiency Virus
IEC	Information, Education and Communication
JICA	Japanese International Cooperation Agency
MTEF	Medium Term Expenditure Framework
MTP I	Medium Term Plan I
MTP II	Medium Term Plan II
MOE	Ministry of Education and Human Resources Development
MOH	Ministry of Health
NAC	National AIDS Commission
NACP	National AIDS Control Program
NGOs	Non-Governmental Organizations
NORAD	Norway Agency for Development
PIF	Policy and Investment Framework
OVC	Orphans and Vulnerable Children
PLWA	People Living with AIDS
STIs	Sexually Transmitted Infections
STDs	Sexually Transmitted Diseases
TOR	Terms of Reference
TOT	Training of Trainers
UK	United Kingdom
UNICEF	United Nations Children Fund
USAID	United States Agency for International Development
VCT	Voluntary Counseling and Testing

1.0 INTRODUCTION

1.1 Description of Plan

The HIV and AIDS Strategy and Plan of Action for the Education Sector 2005-2008 is presented in nine chapters. The first chapter covers the rationale for an HIV and AIDS Strategic Plan and Agenda for Action, the methodology and underlying assumptions. Chapter two covers the situation analysis of HIV and AIDS in Malawi in relation to education and chapter three contains the overall guiding principles on HIV and AIDS intervention in the sector.

In chapter four to eight, the Strategy and Plan covers the goals, objectives, strategies, education sector specific indicators and a summary of planned activities. The activities relate to the following key functions: 1. Curriculum Development and Implementation, 2. Teacher Education and Development, 3. Human Resource Management, 4. Guidance and Counselling, and 5. Planning and Budgeting. The final chapter (nine) highlights the next steps in terms of prioritization, funding and possible sources, mode of implementation, monitoring and evaluation, and additional potential indicators as indicated the nine thematic areas as described in the National Strategic Framework of the NAC. Detailed action plans for each pathway are given in Annex I (Agenda for Action). The structure and terms of reference for the steering committee and technical teams are given in Annex II.

1.2 Rationale and Premise

Although the Education Policy and Investment Framework (PIF) 2000-2012 guide the development of the education sector in Malawi, it is not comprehensive enough on HIV and AIDS intervention. This Strategy and Plan of Action is, therefore, a response to the need for a deliberate and defined HIV and AIDS intervention in and for the education sector in Malawi. Thus it sets out strategies for HIV and AIDS mitigation and prevention in the education sector. It articulates a number of potential operational programs, projects and activities in the five key functions. It is the hope of the education sector that, in addressing HIV and AIDS, it is realizing the expectations of the Malawi National HIV and AIDS Strategic Framework, which, among other things, demands a multi-sectoral approach in the fight against HIV and AIDS in Malawi.

In addition, this plan is one of the ways of realizing the goals of the education Policy and Investment Framework (PIF) since the implementation interventions contained therein will reduce the impact of the pandemic in the sector and ultimately contribute positively towards national development. As part of the PIF, HIV and AIDS interventions have existing and potential donor support hence the need for the prioritization of interventions to ensure a more systematic approach in and for the education sector. Besides, the interventions require appropriate management and monitoring mechanisms. HIV and AIDS interventions, as operational programs that the education sector is advancing, are based on functions rather than personnel and/or clientele. However, the functions have a direct bearing on the educators, the learners, and other staff in the education sector. It is, therefore, important to define HIV and AIDS interventions by function because they easily translate into relevant and implementable activities that are a reflection of the personnel and their clientele vis a vis the education sector.

Furthermore, the use of functions facilitates the mainstreaming and incorporation of HIV and AIDS interventions into all activities thus making it easier to re-focus activities, duties and job descriptions adopt and adapt to a changing scenario. Periodic reviews are essential to update the HIV and AIDS Strategy and Plan of Action so that it aligns itself to the emerging issues. The Planning Department in the Ministry of Education has on the basis of the holistic nature of its functions been designated to plan for HIV and AIDS programs and interventions, and to serve as the focal point. The Department will:

- ❖ Facilitate and coordinate the infusion of HIV and AIDS mitigation in the Ministry's policies and strategies;
- ❖ Link all departments, sections and units in addressing HIV and AIDS;
- ❖ Monitor and assist in evaluating HIV and AIDS activities of departments and committees, and;
- ❖ Act as the point of entry for and coordination of HIV and AIDS intervention by donors and other interested individuals and parties in the education sector.

The focal point has also been designated to serve as the Secretariat to the HIV and AIDS Education National Steering Committee, which is mandated to determine, approve, direct, coordinate and monitor HIV and AIDS interventions in the education sector (see Annex II).

The steering committee is composed of heads of departments in the Ministry, its parastatals and other government ministries and the cooperating partners (donors, non governmental organizations, and civil society). The Principal Secretary of MOE is the chairperson of this committee.

The Steering Committees has below it, five technical committees organized on the basis of the key functions and members are directors of MOE departments, representatives of a number of levels of the MOE, and its parastatals, other selected ministries, representatives of NGOs, CSOs in the education sector and cooperating partners. The Terms of References for the Technical Committees are stated in Annex II.

1.3 Methodology

The planning process for HIV and AIDS interventions was designed to ensure that the strategic plan covers the management, prevention and mitigation of HIV and AIDS in the entire education sector, in all sub-sectors and working with partners in and out of the government. The process mainly centred on:

- ◆ Ensuring that the plan is appropriate for the sector through exhaustive consultations and discussions within the five technical committees that reflect the five functions.
- ◆ Determining and incorporating methodologies and processes that are helpful for the Ministry of Education in taking action and result in measurable outcomes.
- ◆ Identifying performance indicators that are deemed effective for measuring progress and soliciting resources, which in the long run will ensure sustainability of the interventions.
- ◆ Identifying technical assistance needed to support the work of the Technical Committees and departments in combating HIV and AIDS.
- ◆ Developing a multi-sectoral approach to HIV and AIDS with partners within Malawi including sectoral ministries, NAC, NGOs, civil society, faith-based organizations, and other stakeholders.

1.4 Assumptions

At the on set of HIV and AIDS in Malawi, the Government focused its fight against this pandemic from a health perspective. However, HIV and AIDS has spread widely and has forced affected and/or infected individuals, families, communities, and public and private institutions to learn to live

with, manage and counteract HIV and AIDS beyond medical parameters. In the circumstances, the spread of HIV and AIDS in Malawi has led us to assume that:

- ❖ The scourge of HIV and AIDS is here to stay and despite the emergence of anti-retroviral treatment, there is no known cure. There is currently no vaccine and may not be there for the foreseeable future.
- ❖ The most effective way of controlling the pandemic is for individuals to change their behavior so they are not infected in the first place and for the youth to be moulded into a generation that is HIV free.
- ❖ The human rights and dignity of those that are HIV infected will be respected and that they live as fruitfully and decently as possible. They can help others to understand and avoid the disease.
- ❖ That Stigma and discrimination will be eliminated amongst the pupils, teachers and other non-teaching staff.
- ❖ The HIV and AIDS Strategy and Plan of 2005 - 2008 of MOE reflects national aspirations for conquering the scourge as stipulated in the Malawi National HIV and AIDS Strategic Framework 2000 - 2004 issued by the Government of Malawi (NACP) in 1999.
- ❖ The HIV and AIDS Strategy and Plan of 2005 - 2008 for Education sector addresses concerns for schools, colleges, technical institutions and universities, learners and educators (teachers and non-teaching staff), to control the spread of the HIV and limit its consequences for access to and provision of quality education in Malawi.
- ❖ MOE alone cannot fight and win the battle against HIV and AIDS epidemic in the sector. There is need for concerted effort of the MOE and its partners which include other Ministries, parastatals, NGOs, CSOs, parent groups, communities, faith based organizations and other relevant institutions in a way which is holistic and inclusive.
- ❖ As deaths from HIV and AIDS cause the number of orphaned children to increase drastically, action must be taken to protect their right to schooling and education. It will, therefore, be necessary to create alternative pathways to learning that meet *needs and requirements* of these children.
- ❖ The HIV and AIDS Strategy and Plan is considered by the MOE and all involved in its development as a living document, a starting point from which to continuously update, modify and expand the response to the HIV and AIDS pandemic within the education sector.

The HIV and AIDS Strategy and Plan recognizes the importance of ensuring that teachers, pupils and non-teaching staff who have full blown AIDS should be referred for antiretroviral therapy (ART) and treatment of opportunistic infections. In this respect, the document outlines strategies for the establishment of voluntary counseling and testing (VCT) services, peer education programs, ART literacy programs and establishment of other robust work based programs for education staff including their spouses, children and communities surrounding the schools so that everyone in the sector has access to care and support.

The Strategy and Plan of Action also addresses the issue of out-of-school youth who are not the ministry's direct responsibility in terms of programs. Operational linkages between MOE and the Ministry of Youth, Sports and Culture (MOYSC) responsible for out of school youths have therefore been outlined. This will contribute towards ensuring that the messages that are being delivered to both in-school and out-of-school youth are consistent and standardized. It will also minimize duplication in the use of the available resources.

II. HIV and AIDS SITUATION

2.1 HIV and AIDS in Malawi

Since the first official HIV and AIDS case was reported in Malawi in 1985, HIV and AIDS have posed extremely serious social, health and economic problems. These problems have been aggravated by the alarming rate at which the pandemic has spread in Malawi. The National AIDS Commission (NAC) estimates that the actual accumulated number of AIDS deaths from the start of the epidemic to December 2003 was over 641,000. At the end of 2003, it was estimated that 900,000 Malawians were infected with the HIV virus (NAC, 2003). In relation to the total population, this translates to about 1 out of every 10 Malawians being infected with HIV.

The economically productive and those likely to get married and raise families aged between 15 and 49 years, had 14.4 percent HIV prevalence in 2003 (NAC, 2003). Overall, HIV prevalence among 15 - 49 year olds was higher in urban areas (23 percent) than rural areas (14.5 percent) and varied by geographic region (Northern Region - 20.0 percent, Central Region - 15.5 percent and Southern Region - 23.7 percent). Current data from HIV sentinel report in 2003 by NAC indicates even more disturbing picture.

Reports available indicate that HIV prevalence for those without any formal education is 19.2 percent and that with primary education is 19.1 percent. HIV prevalence is significantly higher among women with secondary education 23.2 percent as compared with those with no education 19.2 percent. Those aged between 15 and 24 are particularly vulnerable to the HIV and AIDS epidemic in Malawi. NAC estimates that 46 percent of all new adult infections in 1998 occurred among this age group. Young women are particularly vulnerable; in 2001 nearly 70 percent of the new infections in young adults occurred in women.

Data disaggregated by age and gender show that more females are infected between ages 15 and 29, whereas more males are infected in the 30 and above age groups. There are a small number of AIDS cases among the 5 to 14 year olds. According to NAC, the low level of infection among the 5- 14 year olds, and the high infection levels among the 15 - 49 year olds imply that the main modes of transmission are through perinatal transmission and sexual contact in Malawi¹

Recent NAC projections of the HIV epidemic indicate that the number of Malawians suffering from AIDS is likely to increase to more than a million by 2010. Furthermore, Malawi is experiencing high rates of morbidity, mortality, orphan hood and a resurgence of tuberculosis due to HIV and AIDS. It is anticipated that the number of orphans estimated at 650, 000 in 2003 will increase each year by 65, 000 persons in the coming decade, bringing the total to over 1 million by 2010.

2.2 HIV and AIDS in the Education Sector

The education sector in Malawi mirrors the HIV and AIDS related problems the nation is facing in that the education sector embraces the young generation and teachers who teach the future leaders. Thus, HIV and AIDS in Malawi have resulted in depriving the education sector of the essential human resources. It also has resulted into increasing costs due to death, increasing absenteeism as a result of illnesses, medical bills, funeral bills and worsening morale as the pandemic takes its toll. While it is difficult to know the exact figure of educators have died of AIDS related illness, it can reasonably be said that education, as part of the employment sector, is facing a high number of deaths due to AIDS. This is causing weaknesses in the education system and its' delivery.

¹ NAC 2002, p.8 WHO and UNAIDS, 2003

There is evidence that the education system is already malfunctioning and there is a very real danger that if nothing is done this malfunctioning will become generalized and unmanageable, leading to a total collapse of the education system in Malawi.

The sample survey research of 2000 focusing on the impact of HIV and AIDS on the provision of quality education asked three questions: How has the epidemic affected primary and secondary schools? What is the anticipated impact of HIV and AIDS on education provision over the next 10-15 years? What should be done to mitigate this impact? Findings from the survey research revealed a number of factors prevalent in schools and among learners, teachers and in the curriculum. Just like the preliminary evaluation of HIV and AIDS teaching in 1991, the recent study (2000) found that "... there was no noticeable improvement in knowledge about HIV and AIDS among learners at primary schools mainly because teachers were not using the [materials]". It was specifically observed that:

- ❖ The radio was the main source of HIV and AIDS information for sexually active learners.
- ❖ Many of the learners interviewed felt that they were not personally at risk.
- ❖ Among young girls in school, the practice of having sugar daddies continues as a source of income.
- ❖ Sexual harassment and abuse by teachers of pupils persists, especially in rural schools. In such cases, teachers tend to punish a girl who does not comply and ask to be transferred when a female learner falls pregnant and/or infected with HIV.
- ❖ Learners have reservations about condoms; they are confused, they use them inconsistently and tend to believe myths attached to their use.

HIV and AIDS education has been infused in primary and secondary school curriculum since the late 1980s. The 2000 sample survey revealed that more primary school pupils (62 percent) were aware of HIV and AIDS teaching than secondary learners (32 percent). Some teachers indicated that they are uncomfortable with teaching HIV and AIDS and sexual elements in the curriculum due to cultural barriers and lack of training. They therefore, skipped topics or asked learners to read on their own. Furthermore, the HIV and AIDS education component in the curriculum was designed more to transfer information than to impart skills which are needed for behavior change.

There is no functional guidance and counseling in primary schools. Secondary schools have formal guidance and counseling programs and a member of staff is appointed to offer career advice. However, very few of the "counselors" have had formal counseling training in HIV and AIDS as stipulated by the national VCT Guide.

It was established that at some schools Youth Alert!, AIDS TOTO Clubs, the 'Why Wait?' program, Scripture Union's Bible Clubs or guest speakers from NGOs and Ministry of Health provide additional support. However, the effectiveness of these programs, clubs and guest speakers in creating significant behavior change is limited.

The data from the EMIS suggests that there has been an increase in the number of orphans at school, especially at primary level, and an increase in learner absenteeism from school due to illness, death in the family, illness in the family, and being needed at home. Orphans, especially girls, lacked basic necessities of life, and suffered from discrimination or ill treatment by guardians. No records are kept on learners who were persistently ill, or had died, although just over 50 percent of teachers indicated they had learners who were regularly ill. Learners caring for a sick family member were reported to be regularly absent or ill themselves, and registered a decline in school performance.

In addition to learners, it can be discerned from the data that among teachers, absenteeism is high because of the teacher's own or family member's illness and/or attendance of funerals for relatives or other teachers. Workloads have, with the illness and death of fellow teachers, also increased. Younger teachers are showing a higher level of mortality than was expected and in relation to older teachers. The MOE is thus increasingly spending more on funeral expenses (transport and coffins) and sick leave. Understandably, teacher morale and motivation has waned in a number of schools.

The progress to date in tackling HIV and AIDS in the education sector has among other things been analyzed through the HIV and Education Rapid Appraisal Survey. The Survey reveals the following as areas requiring immediate action:

- ❖ Articulation of a clear policy and having in place appropriate legislation to guide HIV and AIDS interventions in the sector.
- ❖ Developing regulations with regard to staff conduct, absenteeism, sick leave, funeral arrangements and costs, and sexual harassment

and abuse, and ensuring that these regulations are applied rigorously and predictably.

- ❖ Full utilization of the Life Skills for HIV and AIDS education curricula, both in teacher training and primary and secondary schools.
- ❖ Regular and in-depth analysis of the costs to the sector of the pandemic - in terms of both financial cost and decline in performance and quality of provision.
- ❖ Reduction of the stigma of AIDS for learners, educators and other personnel.
- ❖ Improved collaboration with other stakeholders in order to use more effectively the available resources.
- ❖ Working with others in the battle against HIV and AIDS.

III. OVERALL GUIDING PRINCIPLES

3.1 Introduction

The initial response to HIV and AIDS adopted by the Government of Malawi was a blood screening policy implemented in the major referral hospitals in Lilongwe and Blantyre. Later, a strategy for public education on HIV and AIDS was included and these two interventions constituted the major part of the first Medium Term Plan (MTP I) 1989-1993. The initial policy and strategy were therefore highly biomedical in nature and practice.

The second MTP (1993-1999) was more comprehensive and attempted to emphasize multi-sectoral approaches taking into account the social, psychological and economic issues in tackling the HIV and AIDS epidemic. Evaluations of the MTP II highlighted the same over-dependence of the plan on the health sector for a national response to the extent that focal points appointed in various ministries were ineffective or completely inactive (MOH, 1999, p.4).

3.2 Current HIV/AIDS Overarching Goal

The overarching goal of the Government of Malawi is to reduce the incidence of HIV and other sexually transmitted infections and improve the quality of life of those infected and affected by HIV and AIDS. To this end, an institutional framework in which functions, roles and responsibilities for key institutions playing a leading role in the implementation, coordination and financing of interventions in the fight against HIV and AIDS are clearly defined. The interventions are implemented in full recognition and support of the health sector policy goal of raising the level of health status of Malawians by reducing the incidence of illness

and occurrence of death in the population through the development of a sound delivery system capable of promoting health; preventing, reducing and curing diseases; protecting life and fostering general well-being and increased productivity.

The interventions being implemented also focus on specific areas of the national agenda for action on HIV and AIDS mitigation and these are: culture; youth and social change; socio-economic status; despair and hopelessness; care and support; orphans, widows and widowers; prevention; Information, Education and Communication (IEC); and VCT. These goals and areas of focus are relevant to any sector including education (NACP 2000) and highlight the need to:

- ❖ Strengthen the authority of and improve coordination among youth socialization institutions in order to encourage behavior change to prevent infection among youth.
- ❖ Address the socio-cultural and economic environment in order to reduce gender imbalances and thereby prevent and mitigate the spread and impact of HIV and AIDS.
- ❖ Strengthen and support sustainable capabilities for the care of orphans.
- ❖ Ensure the provision of adequate and high quality care and support services to PLWA and those affected other than orphans.
- ❖ Give hope, faith and encourage the spirit of acceptance of the reality of the HIV and AIDS epidemic in order to facilitate prevention and the mitigation of its impact.
- ❖ Facilitate and strengthen the effectiveness of HIV and other STI prevention programs and practices and expand their scope for reduced HIV incidence.
- ❖ Establish standardized, comprehensive and effective Information, education and communication (IEC) strategies to reduce the spread of HIV and minimize its impact.
- ❖ Strengthen and promote accessible, effective and ethically sound VCT services that offer psychological support in order to reduce the transmission of HIV and the impact of AIDS.

3.3 The National Strategic Framework

The Malawi National HIV and AIDS Strategic Framework 2000 – 2004 sets out the parameters for HIV/AIDS interventions which line Ministries, departments and parastatal organizations can follow in the fight against HIV and AIDS.

The institutions are under this framework required to establish focal points for HIV and AIDS activities in their departments and sections at all levels. Furthermore, each institution is required to assign personnel to deal with HIV and AIDS issues within the institution and to liaise with NAC and other public and private institutions on these activities.

The MOE has developed its Strategic Plan and Action Plan in line with the National Strategic Framework and in collaboration with NAC to guide the mainstreaming of HIV and AIDS activities. Guidelines on the use of 2 % ORT for HIV and AIDS activities have been adopted and these resources will be complemented by the financial resources that have been requested from NAC and other development partners such as DFID, USAID, UNICEF, UNFPA, UNAIDS, CIDA, GTZ.

The strategic objectives of MOE include: improvement of access, quality and equity in Primary, Secondary and Tertiary education; strengthening the Science, Technical and Vocational and Commercial components of the School Curriculum; improving Special Education; improving the performance of supporting educational institutions; developing an effective and efficiently managed educational system. To this end, the ministry has developed Life Skills Education from primary to secondary schools and Integrated Sexual and Reproductive Health Education into the curriculum as one of the interventions. These skills are targeted at learners at all levels (basic, secondary and post-secondary education) and out-of-school youth. They also target educators, and non-teaching personnel from industrial class (blue collar workers) to managers (white collar workers) in learning institutions (schools and colleges), zones, districts, divisions and headquarters.

3.4 Education Policy

The overall objective of education policy is to achieve quality education at all levels as part of efforts of alleviating poverty. This, among other things, is being done through the Policy and Investment Framework (PIF). The PIF highlights the importance of programs that address or reinforce messages related to the social impact of and coping with HIV and AIDS and other communicable diseases under Basic, Secondary and Post-Secondary Education (MOE 2000). The core theme of these programs is planning and administering a curriculum that is relevant to the goals and needs of the society.

The curriculum intervention is expected to contribute positively towards the overall educational policy which strives to achieve quality education at all levels as part of the efforts to reduce poverty. It focuses on learners rather than arguing for a systemic intervention against HIV and AIDS to mitigate the impact of the pandemic on the entire sector. A comprehensive education policy on HIV and AIDS will incorporate planning (projecting enrolment and related human resource development/training) and budgeting (finance); management and welfare of human resources, guidance and counseling of learners, educators and other staff; teacher education and development (pre and in-service training) in addition to curriculum matters.

3.5 Strategies for HIV and AIDS Intervention in Education Sector

The mission of MOE is to provide quality of education for the livelihood of all Malawian children through improved access, quality and equity, strengthened components and support institutions. The Strategic Plan for HIV and AIDS intervention in the Malawi Education Sector addresses issues that affect access, equity, quality, relevance, management, planning and financing of the education sector.

The Strategy and Plan of Action sets out detailed activities aimed at reinforcing discussion, debates and interactive teaching/learning issues of sex, sexuality, HIV and AIDS and other STDs in a culturally and gender sensitive manner in order to bring about behavior change. In addition, mechanisms for counseling on HIV and AIDS, its impact, infection and affection have been developed. The use of a skills-based approach has been adopted for the dissemination of HIV messages and materials for all groups (learners, out-of-school youth, educators and non-teaching staff among others). It is hoped that this strategy will lead to behavior change.

3.6 Principal Themes of the Strategic Plan

The preparation of this strategic plan was guided by six principal themes, namely:

- ❖ The spread of HIV and the terrible consequences of the disease for children, educators, and non-teaching staff, their families and communities, is closely linked to poverty, which exacerbates the risk to HIV infection.
- ❖ Fundamental changes in behavior and attitudes - among youth, educators, managers, auxiliary staff, parents and guardians, traditional and political leaders - is required to protect the entire

Malawian society and particularly young people, and achieve an AIDS-free generation in Malawi. So far messages on HIV have brought awareness but have failed to bring about significant desired behavior change.

- ❖ It is recognized that the greater bulk of work to counteract the disease has to be done at the local level, by parents, peers, immediate managers, teachers, counselors, NGOs, CSOs and faith-based organizations working with schools. The MOE has to take the lead in protecting children and employees in the sector and ensure that the quality of education in Malawi is maintained at the highest level in the light of impact and challenges posed by the pandemic.
- ❖ It is essential that MOE finds a way to support multi-sectoral HIV and AIDS interventions that embrace and achieve the overarching goal and policy of central government on HIV and AIDS. This will lead to the development of an education sector regulatory framework that guides the efforts of the MOE and its partners at all levels. The regulatory framework and its process will have to be ongoing and track various phases of the pandemic in ways that are flexible and appropriate.
- ❖ Educators and fellow employees are the key to carrying messages about HIV and AIDS to learners and colleagues – through the curriculum, extra-curriculum activities, guidance and counseling, and as role models – but they are not prepared for this responsibility. They need more and better information, up-to-date materials and training in interactive methodologies, encouragement to be disciplined, peer education and guidance and counseling in order to address their own fears and biases.
- ❖ There is a difference between ‘awareness’ of an impending catastrophe (the possibility of being HIV+), and willingness to change one’s behavior (to avoid becoming infected). So far, there is a long way to go from awareness to safe desired behavior among educators, communities, and young people.

3.7 Vision Statement of the Education Sector Response to HIV and AIDS

In view of the need to respond to the pandemic in a systematic manner in the sector, Government, NGOs, CSOs, education representatives and TUM developed and agreed on a vision statement on HIV and AIDS intervention. The vision statement is designed to focus practical action for protecting the quality of education against HIV and AIDS. The vision of the education sector is that of a Malawi:

- ❖ That draws upon the positive qualities of all people and traditions to overcome HIV and AIDS.
- ❖ That provides effective high quality education for all and acts as a shining example in the fight against the HIV and AIDS epidemic.
- ❖ In which educational institutions and their communities provide a safe and adequately resourced learning environment for learners, including orphans and other vulnerable children, to develop and remain healthy.
- ❖ Where educators and non-teaching personnel at all levels of the system are supported and supportive in strengthening capacity to surmount the epidemic.
- ❖ Where the MOE contributes in a consistent and effective manner to the national response to HIV and AIDS by developing its own understanding of the impact of the epidemic, building this into all management and teaching activities, and fostering partnerships across government and with all other stakeholders.
- ❖ Where the education sector establishes and nurtures a caring environment for all its personnel.

This is a vision to inspire all stakeholders in the sector. It is the vision of a society where the rights and dignity of all are respected. This requires that education system be stabilized, the potential impact of the pandemic on individual learners, educators, other personnel, and the entire education system reduced and responding creatively to new needs in the sector.

3.8 Application of the Principles

It is critical that in whatever activities the education sector wishes to advance, the principles stipulated in this chapter are applied in their entirety. Indeed, consideration of existing circumstances should be taken into account in the course of such adaptation, adoption, interpretation and translation of the principles. Furthermore, it should be borne in mind that HIV and AIDS intervention goals and policies in the education sector are cross cutting since they influence and affect the entire education system and its levels and more specifically within the timeframe of the strategic plan (2005-2008).

IV. CURRICULUM DEVELOPMENT AND IMPLEMENTATION

4.1 Introduction

According to UNICEF and Kelly (2004) "Schools can provide the best defence against HIV infection. They offer the best mechanism to deliver HIV prevention information, as well as the long term educational and social skills that protect against infection. With knowledge so critical in the fight against HIV and AIDS, the best defence against the epidemic is keeping vulnerable young people, especially girls, in school." (*Carol Bellamy, Executive Director of UNICEF, February 2004*). Therefore Education is the best defense for HIV and AIDS. In particular, the effective development and implementation of skills-based HIV and AIDS curriculum in basic, secondary and post secondary education will minimize the impact of the pandemic in the education sector and the country as a whole.

The school-age populations is key in the fight against HIV and AIDS as youth, especially primary school youth, are largely uninfected, and have not yet established risky patterns of behavior. MOE believes that each and every learner should have the opportunity to study Life Skills in order to equip them with the skills needed to reduce their own risk as well as to increase the coping capacities of those already infected and affected by HIV and AIDS. Life Skills Education on attitudes, values and behavior will be a central intervention in the Education Sector Strategic Plan on HIV and AIDS. In addition, a central aim is to infuse HIV and AIDS messages into all subjects. To facilitate improved teaching of HIV and AIDS within schools and to also to enable improved sex and sexuality self-awareness/change, evidence-based HIV and AIDS activities targeting the teachers and non-teaching staff will be implemented.

HIV and AIDS specific Curriculum Development and Implementation have already been initiated. Life Skills Education, Population Education, and Sexuality and Reproductive Health can be points of departure for curriculum development. However these interventions should be complemented by other additional extra curriculum activities such as club activities, school debates, and peer education, to help the necessary character formation and behavioral change. MOE recognizes that local communities must play a role in the development and implementation of curriculum and other school-based HIV and AIDS activities by ensuring its relevance and acceptance.

Therefore, the communities surrounding school will be mobilized to support the planned activities.

4.2 Goals and Objectives for Curriculum Development and Implementation.

Evidence-based, relevant and appropriate HIV and AIDS Curriculum Development and implementation is vital. This chapter presents overall goals and objectives for Curriculum Development and Implementation function of the Strategic Plan. The chapter also articulates the recommended strategic activities at all levels of the education sector. Curriculum Development and Implementation will contribute to the education sectors overarching goal of reducing the incidence and mitigating the impact of HIV and AIDS amongst youth in-school, teaching, and non-teaching staff.

Goal 1

Improve sexual and reproductive health of in-school youth, teachers and their spouses, non-teaching staff and school committee members through the development and constant review of evidence and results-based HIV and AIDS curricula that meet community and national needs.

Objectives

- 4.1.1 To strengthen the integration and infusion of HIV and AIDS education and training into the primary, secondary and Teacher Training College curricula by December 2008.
- 4.1.2 To strengthen the accuracy and cultural sensitivity of HIV and AIDS teaching and learning materials and messages by December 2008.
- 4.1.3 To increase the accessibility by pupils with special needs to HIV and AIDS teaching and learning materials by December 2005.
- 4.1.4 To strengthen the ability of non-teaching staff, Parent Teacher Association (PTA) and the school management committees (SMC) to prevent and mitigate the impact of HIV and AIDS.

Indicators

- i) Percentage of primary, secondary and TTC curricula topics containing at least three references to HIV and AIDS that specifically provide information on HIV and AIDS prevention or care.

- ii) HIV and AIDS Curricula Review Committee established and functional.
- iii) Percentage of primary, secondary and TTC curricula developed and undergoing review for accuracy, age appropriateness, language appropriateness and community relevance.
- iv) Number of Teacher Guides printed and distributed.
- v) Number of HIV and AIDS teaching/lessons plans for use in TTCs, and primary, secondary, and tertiary institutions developed and distributed.
- vi) Percentage of primary and secondary school HIV and AIDS teaching and learning materials transcribed into Braille or audio tools.
- vii) Percentage of pupils with special needs using HIV and AIDS learning materials that have been transcribed into Braille or audio tools.
- viii) Percentage of teachers with special needs pupils using HIV and AIDS materials that have been transcribed into Braille or audio tools.
- ix) Number of HIV and AIDS teaching and learning materials developed whose content objectives specifically target pupils with special needs.
- x) Percentage of pupils with special needs using HIV and AIDS learning materials whose content objectives specifically target pupils with special needs.
- xi) Percentage of teachers with special needs pupils using HIV and AIDS learning materials whose content objectives specifically target pupils with special needs.
- xii) Number of HIV and AIDS teaching and learning materials developed and distributed whose content objectives specifically target non-teaching staff, parent-teacher associations (PTAs), and school management committees.
- xiii) Development, printing and distribution system of teaching and learning materials for HIV and AIDS in place.

Goal 2

Improve sexual and reproductive health of in-school youth, teachers and their spouses, non-teaching staff and school committee members through the effective implementation of evidence and results-based HIV and AIDS curricula that meet community and national needs.

Objectives

- 4.2.1 To strengthen systems development, printing and distribution of HIV and AIDS education teaching and learning materials by the December 2005.
- 4.2.2 To enhance the efficacy of teacher-led HIV and AIDS education within primary, secondary and tertiary institutions by December 2006.
- 4.2.3 To strengthen HIV and AIDS information dissemination systems targeting schools and communities by December 2007.

Indicators

- i) Annual stakeholder review of development, printing and distribution system conducted.
- ii) Number of Teachers trained in participatory teaching techniques.
- iii) Percentage of teachers within primary, secondary and tertiary institutions trained in participatory teaching techniques.
- iv) Number of MCDE teachers trained on HIV and AIDS prevention and mitigation issues.
- v) Number of staff at national, division, district, and school level trained to teach and implement HIV and AIDS issues.
- vi) Number of MCDE materials printed and distributed.
- vii) Number of Radio and Television programs produced by MCDE.

Goal 3

Improve education sector sexual and reproductive health programs through sound monitoring and evaluation.

Objectives

- 4.3.1 To strengthen the HIV and AIDS education program monitoring and evaluation system and tools by December 2005.
- 4.3.2 To elevate the ability of ministry personnel and other stakeholders to monitor Life Skills for HIV and AIDS education programs by December 2006.
- 4.3.3 To increase multi-sectoral collaboration in the monitoring and evaluation of Life Skills for HIV and AIDS education programs by June 2006.

Indicators

- i) Functional HIV and AIDS program monitoring and evaluation system developed and implemented which details data capture, flow and analysis mechanisms, resources (available and required), and tools.
- ii) Monitoring and evaluation tools developed and disseminated.
- iii) At least three questions relevant to Life Skills for HIV and AIDS is included in all end-of-term examinations at primary, secondary and tertiary level.
- iv) Annual stakeholder review of HIV and AIDS monitoring and evaluation system conducted.
- v) Quarterly feedback on data results provided to all levels of the monitoring and evaluation system.
- vi) Number of ministry personnel and other stakeholders trained in use of Life Skills for HIV and AIDS education programs monitoring tools.
- vii) Percentage ministry personnel and other stakeholders that have been trained in use of Life Skills for HIV and AIDS education programs monitoring tools accurately completing and submitting monitoring tools.
- viii) Number of joint evaluation visits to each level of the monitoring and evaluation system conducted by relevant ministry personnel with education sector stakeholders.
- ix) Number of non-governmental or non-MOE organizations collaborating with MOE in data capture and/ or analysis.
- x) Number of non-governmental or non-MOE organizations collaborating with MOE in education sector research studies.
- xi) Percentage of non-governmental or non-MOE organizations attending the annual stakeholder review meeting of the HIV and AIDS monitoring and evaluation system.
- xii) Number of organizations receiving results of MOE research studies.
- xiii) Number of organizations disseminating plans or results of their research studies to MOE.

4.3 Planned Activities

The following is a summary of activities, which are considered essential for achieving the goals and objectives stated above. For details of these activities, including cost estimates, implementing dates and suggested implementing agencies and partners, see the Curriculum Development and Implementation Activity Plan In Annex I.

- i. Adapt / develop appropriate Life Skills for HIV and AIDS education materials for behavior change at primary, secondary levels, including for other staff, and school management committees.
- ii. Adapt/ develop Life Skills for HIV and AIDS education materials for teacher training.
- iii. Ensure that teachers and trainee teachers have adequate teaching skills on HIV and AIDS education.
- iv. Link development and implementation of curriculum to Primary Curriculum and Reform process to ensure consistency.
- v. Ensure that adequate resources and materials are available in Teacher Education Institutions for training teachers in Life Skills for HIV and AIDS education
- vi. Monitor and evaluate implementation of Life Skills for HIV and AIDS education.
- vii. Capacity building on the management of HIV and AIDS programs

V. Teacher Education and Development

5.1 Introduction

Educators are a critical factor in HIV and AIDS intervention and health promotion programs. However, when provided only with curriculum and teaching materials, educators often feel unprepared to address the complex and value-laden topic of HIV and AIDS. There is, therefore, need for pre- and in-service teacher training which not only imparts knowledge and skills, but also allows educators to confront their own values, beliefs and fears. The training must also enable educators to protect themselves from HIV and AIDS and to more effectively deal with the impact the pandemic has on them as individuals. In addition, training strategies must emphasize the role of educators in attitude and behavior formation and change for learners. The training should also target both practicing and trainee educators.

5.2 Goals and Objectives for Teacher Education and Development

Comprehensive Teacher Education and Development in a conducive and enabling environment is required to combat the HIV and AIDS pandemic. The conducive and enabling environment will contribute to ensuring that proper direction and focus is maintained for teachers to

effectively play their role as agents of change and support positive behavior change.

Goal 1

Improve sexual and reproductive health of in-school youth, teachers and their spouses through the development of HIV and AIDS curricula for pre-service and in-service teachers.

Objectives

- 5.2.1 By the end of the Strategic Plan period, to strengthen the integration and infusion of HIV and AIDS education and training into curricula for pre-service and in-service teacher training programs
- 5.2.2 To enhance the efficacy of teacher-led HIV and AIDS education within teacher training institutions by October 2005.

Indicators

- i) Percentage of pre-service and in-service teacher training program curricula topics containing at least three references to HIV and AIDS that specifically provide information on HIV and AIDS prevention or care.
- ii) Number of trained PEAs and TOTs trained in HIV and AIDS prevention and mitigation.
- iii) Percentage of teachers within teacher training institutions trained in participatory teaching techniques.
- iv) Number of teachers within teacher training institutions trained to teach and implement HIV and AIDS issues.

Goal 2

Improve sexual and reproductive health within education institutions and surrounding communities through the effective delivery of HIV and AIDS programs.

Objectives

- 5.3.1 To strengthen the efficacy of existing pre- and in-service teacher HIV and AIDS education programs by December 2006.

5.3.2 To increase openness among teachers about discussing and engaging with issues of sex, sexuality, reproductive health matters and HIV and AIDS by December 2008

5.3.3. To increase collaboration between communities and schools in implementing HIV and AIDS programs and reducing stigma and discrimination against teachers or pupils living with or affected by HIV and AIDS by 2008.

Indicators

- i) Pre- and in-service HIV and AIDS program Review Committee established and functional.
- ii) Percentage of pre- and in-service HIV and AIDS programs developed and undergoing review for accuracy, language appropriateness and relevance to teachers and the community.
- iii) Percentage of pre- and in-service teachers involved in HIV and AIDS extra-curricula activities school debates, clubs, AIDS TOTO, Why Wait?, Right To Know among others.
- iv) Percentage of pre- and in-service teachers involved in peer education and counseling activities.
- v) Percentage of in-service teachers who have schemes/records on the teaching of HIV and AIDS issues.
- vi) Number of teachers applying interactive teaching skills in pre- and in-service teacher training programs.
- vii) Number of SMC, PTAs, and Community Leaders trained in HIV and AIDS prevention and mitigation issues.
- viii) Number of schools holding regular open days for HIV and AIDS activities.
- ix) Percentage of primary and secondary schools with active HIV and AIDS Clubs for pupils.
- x) Number of community meetings facilitated by teachers in which HIV and AIDS is a specified topic.

Strategy

Organize open days once a month and activate clubs for HIV and AIDS Education/Activities at the school level.

Goal 3

Desired behavioral change among learners, teachers and lecturers/tutors.

Objective

Develop instruments for measuring positive behavioral change.

Indicators

- i) Number of Teacher or Learners Living with AIDS Association formed (TWLA/SWLA).
- ii) Numbers of teachers or learners who are HIV positive testifying to their colleagues about their status.
- iii) Number of awareness programs conducted.
- iv) Number of Teachers and non-teaching staff Involved and oriented to HIV and AIDS.
- v) BCC Monitoring and Evaluation system developed.

Strategy

Establish monitoring and evaluation system for behavioral change.

Goal 4

Develop effective and efficient system for the monitoring and evaluation of HIV and AIDS programs.

Objectives

- 5.4.1 Develop instruments for monitoring and evaluating the HIV and AIDS programs drawing upon emerging national/regional and international expertise.
- 5.4.2 Involve education staff at each educational institutions level in monitoring the implementation of programs.

Indicators

- i) Percentage of teachers participating in HIV and AIDS monitoring activities.
- ii) Percentage of non-teaching staff participating in M& E.
- iii) Number of and frequency of monitoring visits and their reports.
- iv) Percentage of reported behavioral change amongst teachers and pupils.

Strategy

Train teachers and other staff on monitoring and evaluation of HIV and AIDS programs.

Goal 5

Promote action oriented/operational HIV and AIDS research in the education sector.

Objectives

- 5.5.1 To strengthen the capacity of teacher educators to conduct relevant HIV and AIDS research by December 2006.
- 5.5.2 To train educators on proposal writing to source funds for HIV and AIDS programs at local level by October 2005.
- 5.5.3 To provide financial resources for HIV and AIDS research by January 2006.
- 5.5.4 To develop needs based research agenda for the education sector on HIV and AIDS by December 2005.

Strategy

- i) Train teachers and other staff in action research methodologies.
- ii) Link with the MIE, DCE, CERT and other institutions in the academia to conduct HIV and AIDS research relevant to the education sector.

Indicators

- i) Number of Research activities undertaken on HIV and AIDS relevant to the education sector.
- ii) Number of teachers trained in research methodologies.
- iii) Number of research studies submitted and funded.
- iv) Proportion of research findings used for planning and monitoring HIV and AIDS interventions.
- v) Number of research studies on the education research agenda conducted and disseminated.

5.3 Planned Activities

The following is a summary of planned activities considered essential for the achievement of the goals and objectives.

For details of these activities, including cost estimates, implementation dates and implementing agencies and partners are in the Teacher Education and Development Activity Plan in Annex I.

- i. Institutionalize HIV and AIDS BCI/IEC system at Teacher Education Institutions.
- ii. Incorporate local care and support CBOs into pre- and in-service teacher training activities.
- iii. Integrate Life Skills for HIV and AIDS education in the core courses at Teacher Education Institutions and In-service Teacher Training.
- iv. Mobilize and empower the community in the provision of HIV and AIDS prevention and mitigation activities.
- v. Strengthen individual skills for HIV and AIDS competence for primary, secondary, and MCDE school teachers and other education sector staff.
- vi. Support the integration of the concept of HIV and AIDS competence into the pre- and in-service curriculum for teacher training.
- vii. Support pre- and in-service training of secondary school teachers to use SRH/HIV and AIDS culturally sensitive life skills teaching materials effectively in all schools.
- viii. Support the integration of SRH/HIV and AIDS life skills content into the secondary and MCDE school curriculum and teaching materials.
- ix. Maintain a compendium/directory of HIV and AIDS in the education sector.

VI. Human Resource Management

6.1 Introduction

The importance of staff welfare and conditions of service in education cannot be overemphasized. Welfare and conditions of service are the keys to motivation and the effective and efficient performance of duties by staff. Where the welfare of officers has been left to chance, there has been low morale, which in turn has affected performance and service provision. Thus, good human resources management is one of the important factors towards ensuring the education sector remains efficient and effective.

Morale is of course influenced by the health conditions of personnel. Therefore, HIV and AIDS prevention that leads to behavioral change counters the consequences that the system is suffering and will suffer from as result of the HIV and AIDS pandemic. It is envisaged that without effective HIV and AIDS prevention interventions, dwindling numbers of education personnel due to death, perpetual absenteeism due to illness or attending sick relatives and funerals will cause the education sector to ground to a halt. Therefore, it is imperative that constructive counter measures against the HIV and AIDS epidemic should be put in place now.

This chapter highlights the goals and objectives, and intended actions for implementation and overall schedule for such implementation between 2005 and 2008. In developing the goals, objectives, and activities of the Human Resources and Management pathway of this strategy the ministry recognizes the need for change in mindset at all levels of the ministry. This entails reviewing and developing new policies that will impact on the management of HIV and AIDS in the education sector. In this regards, the following human resources management challenges need to be addressed:

- a) **Recruitment and selection** - Teacher attrition due to HIV and AIDS is a serious problem, and more and more the education sector is finding that it has to recruit ageing and retired personnel to meet demand. Recruitment of staff needs to be stepped up and reviewed in order to meet the realities of HIV and AIDS. There is therefore a strong need to increase staff recruitment and to develop HIV and AIDS programs in the work place which also offer ARV and VCT services.

An additional challenge is that current staff deployment procedures do not take staff's social demographics into account, especially marital status and where their families are based. MOE also needs to develop a policy that incorporates issues of gender when deploying staff.

- b) **Training** - There is pervasive teacher shortage and attrition due to HIV and AIDS. Ironically, the diversion of financial resources from teacher training colleges to HIV and AIDS programs has led to a decline in the numbers of teachers adequately trained.
- c) **Staff welfare** - The ministry has no policy governing the parameters of a medical aid scheme that provides support to staff infected and affected by HIV and AIDS.

In addition, there are currently no work-based HIV and AIDS programs in the education sector which, for example, address the rights of teachers living with HIV, and provide access to ARVs and VCT.

- d) **Management of Information** - There is no comprehensive management information system (MIS) that adequately captures information on staff absenteeism due to HIV and AIDS.
- e) **Retention and remuneration** - There is no mechanism for rewarding staff that have increased work load due to absenteeism of colleagues due to HIV and AIDS absenteeism.
- f) **Retirement.** The current retirement provisions do not take into account the realities of the impact of the HIV and AIDS. There is no motivation given to allow staffs that have AIDS to take early retirement.
- g) **Absenteeism and sick leave** - The ministry does not have clear guidelines dealing with issues of prolonged absenteeism due to HIV and AIDS (as well as other diseases). In addition, current policy on sick leave do not adequately meet the needs of staff infected and affected by HIV and AIDS

- h) In light of the fact that the majority of teachers in Malawi are female, there are no provisions for employees who are the caregivers to a spouse, children, or relatives suffering from AIDS.

6.2 Goals and Objectives for Human Resources Management

Goal 1

Improve health, well-being and coping capacity of educators and other education staff affected and infected by HIV and AIDS through policy, support structures and treatment and care.

Objectives

- 6.2.1 To increase the appropriateness of ministry policy guidelines on conditions of service for educators and other staff infected and affected by HIV and AIDS by December 2006.
- 6.2.2 To strengthen in-school support structures for staff infected and affected by HIV and AIDS by November 2005.
- 6.2.3 To strengthen HIV and AIDS workplace programs by end July 2005.
- 6.2.4 To increase access to counselling services, VCT and ARVs by

teachers, learners and non-teaching staff by December 2005.

Indicators

- i) Ministry HIV and AIDS workplace policy developed and disseminated.
- j) Ministry HIV and AIDS policy and guidelines Review Committee established and functional.
- iii) Ministry HIV and AIDS workplace policy audited for gender sensitivity by Review Committee
- iv) Ministry HIV and AIDS workplace policy audited by Review Committee to address issues of stigma and discrimination
- v) Policy guidelines on conditions of service for educators and other staff infected and affected by HIV and AIDS reviewed annually during stakeholder consultative process.
- vi) Percentage of schools with a functioning Staff Welfare Committee.
- vii) Percentage of schools with a functioning School Committee and/ or PTA.
- viii) Percentage of PTAs and School Committees trained in HIV and AIDS prevention and mitigation issues by December 2008.
- ix) Percentage of PTAs and School Committees engaging in at least one HIV and AIDS-specific activity in the previous year.
- x) Ministry HIV and AIDS workplace program developed and implemented.
- xi) Ministry HIV and AIDS workplace program Review Committee established and functional.
- xii) Ministry HIV and AIDS workplace program reviewed during annual stakeholder consultation to ensure it addresses issues of gender, stigma and discrimination and any other issues identified as relevant by stakeholders.
- xiii) Proportion of ORT funds used for HIV and AIDS workplace programs.
- xiv) Percentage of school zone/clusters with a Counselling and Career Guidance Centre.
- xv) Percentage of school zone/clusters with an HIV and AIDS Resource Centre.
- xvi) Percentage of teachers, learners and non-teaching staff undergoing VCT and knowing their results.
- xvii) Percentage of HIV+ teachers, learners and non-teaching staff who have undergone VCT and who apply to be in the Ministry's ARV program.

- xviii) Percentage of HIV+ teachers, learners and non-teaching staff who have undergone VCT and who receive ARVs from the Ministry's ARV program.
- xix) Number of teachers reported absent for at least one week due to HIV and AIDS.

Goal 2

Improve Malawi's education system through mitigating the impact of HIV and AIDS on teacher numbers.

Objective

To increase the capacity of the ministry to adequately meet Malawi's teacher needs by December 2006.

Indicators

- i) Data of teacher attrition collected, analysed and disseminated to the Ministry's Planning and Training Department.
- ii) HIV and AIDS Impact assessment in the Education Sector conducted and results disseminated.
- iii) Ministry HIV and AIDS workplace program reviewed during annual stakeholder consultation.

Goal 3

Improve the sexual, reproductive and psychological health of teachers and learners through the reduction of sexual abuse of pupils by teachers.

Objective

- 6.4.1 To strengthen the dissemination and enforcement of rules and regulations prohibiting sexual relationships between teachers and learners by October 2005.
- 6.4.2 To reduce the number of sexual relationships between teachers and pupils by October 2005.

Indicators

- i) Disciplinary Committees established at District Level.

- ii) Percentage of schools with the rules and regulations prohibiting sexual relationships between teachers and pupils clearly posted in the staff room.
- iii) Percentage of teachers accused of engaging in sexual relationships with learners that take part in a disciplinary process.
- iv) Percentage of teachers proven to have engaged in sexual relationships with pupils that are retrenched.
- v) Percentage of school clusters with a confidential and youth-friendly Counselling and Career Guidance Centre for learners and community members.
- vi) Number of suspected and reported cases of sexual relationships between teachers and pupils

Strategy

Hold stakeholders consultations to develop and disseminate guidelines prohibiting sexual relationships between education staff other men with pupils/learners.

Goal 4

To eliminate stigma and discrimination amongst educators and other staff towards HIV infected and staff with AIDS.

Objectives

To develop policy to protect the rights of staff living with HIV and those suffering from AIDS related sickness.

Indicators

- (i) Policy on stigma and discrimination developed and being implemented.
- (ii) Number of reported cases of stigma and discrimination reduced by 75%.
- (iii) Number of pupils and teachers sensitized on stigma and discrimination.

Strategy

Hold stakeholders to develop and disseminate policy on rights staff living with AIDS.

Goal 5

Implement other human resources policies in light of the HIV and AIDS impact in the education sector.

Objectives

Develop and enforce Human Resources policies (retirement, absenteeism, sick leave, retention and remuneration, and management of information) that mitigate the impact of HIV and AIDS in the education sector.

Indicators

- (i) Absenteeism by teachers and non-teaching reduced by 80 percent.
- (ii) Proportion of ORT funds used for HIV and AIDS related problems.

Strategy

Hold stakeholders consultations to develop and disseminate human resources policies that take into account of HIV and AIDS realities.

Goal 6

Establish HIV and AIDS management system at national, division, district, zone, and cluster and at community level.

Objectives

Ensure that HIV and AIDS issues are implemented and coordinated at all levels.

Indicators

- (i) Number of staff involved HIV and AIDS activities at national, divisions, districts and school level.
- (ii) HIV and AIDS Management system in place.
- (iii) Number of HIV and AIDS Resource centres established and fully functional.
- (iv) Number of HIV and AIDS prevention committees established and meeting regularly.

Strategy

Create appropriately funded HIV and AIDS management system.

VII. GUIDANCE AND COUNSELING

7.1 Introduction

Malawian education needs to offer HIV and AIDS related guidance and counseling services which are readily accessible at all levels. As an integral part of the education system, this will assist in retaining learners and educators, breaking the silence around HIV and AIDS, reaching those who drop out of school and removing stigma and discrimination among educators and other staff with HIV and AIDS. Guidance and counseling on HIV and AIDS should help to protect and support the education system, its services and its personnel.

7.2 Goals and Objectives

Goal 1

Improve the sexual, reproductive and psychological health of teachers and pupils through in-school and workplace guidance, counseling and testing services.

Strategies

- a) Conduct sensitization workshops, seminars and meetings on the importance guidance and counseling activity services through the education sector.
- b) To establish guidance and counseling services in the education sector.

Objectives

- 7.2.1 To raise awareness on the importance of guidance and counseling in schools, colleges and the workplace by June 2006.
- 7.2.2 To enhance the capacity of teacher educators, and teachers to provide counseling and guidance by June 2006.
- 7.2.3 To increase access to VCT by teachers, learners and non-teaching

staff by December 2006.

7.2.4 To strengthen collaborative links between education institutions and communities, NGOs, CSOs and other government ministries in the provision of guidance and counselling services by June 2006.

Indicators

- i) Percentage of school zone/clusters with a Counselling and Career Guidance Centre.
- ii) Percentage of school zone/clusters with an HIV and AIDS Resource Centre.
- iii) Number of people accessing counselling, guidance and testing services.
- iv) Number of teacher educators and teachers trained in counselling and guidance.
- v) Percentage of schools with guidance and counselling materials.
- vi) Number of HIV and AIDS materials disseminated by the ministry.
- vii) Percentage of teachers, learners and non-teaching staff undergoing VCT and knowing their results.
- viii) Percentage of HIV+ teachers, learners and non-teaching staff who have undergone VCT and who apply to be in the Ministry's ARV program.
- ix) Percentage of HIV+ teachers, learners and non-teaching staff who have undergone VCT and who receive ARVs from the Ministry's ARV program.
- x) Partnership directory established and semi-annually reviewed.
- xi) Number of joint guidance and counselling activities conducted by education institutions and communities, NGOs, CSOs and other government ministries

Goal 2

Improve the health and coping capacity of PLWHA and OVC in the education sector.

Objective

To increase access of PLWHA and OVC in the education sector to guidance, counseling and support structures by November 2005.

Indicators

- i) Percentage of teachers, learners and non-teaching staff undergoing VCT and knowing their results.
- ii) Percentage of HIV+ teachers, learners and non-teaching staff who have undergone VCT and who apply to be in the Ministry's ARV program.
- iii) Percentage of HIV+ teachers, students and non-teaching staff who have undergone VCT and who receive ARVs from the Ministry's ARV program.
- iv) Number of in-school OVC.
- v) Percentage of in-school OVC receiving guidance and counselling.
- vi) Percentage of in-school OVC receiving material and financial support.
- vii) Percentage of pupils reported as absent due to HIV and AIDS.
- viii) Percentage of in-school HIV and AIDS activities directly targeting OVC.

Goal 3

Adopt/adapt guidance and counselling policies that support a reduction in HIV and AIDS risk for learners and education personnel.

Objectives

- 7.4.1 Adopt a comprehensive policy framework to ensure safety in the education environment at all levels.
- 7.4.2 Incorporate issues of gender equity and equality in all education policies that relate to guidance and counseling.

Indicators

Number of pupils, teachers and non teaching staff on oriented to HIV and AIDS programs in the education sector.

Goal 5

Develop and use an effective and efficient system monitoring and evaluation HIV and AIDS- related guidance and counselling policies and programs.

Objectives

Monitor and evaluate the ongoing implementation of HIV and AIDS activities within guidance and counseling.

Indicators

- (i) Number of activities implemented related to guidance and counseling.
- (ii) Number of support materials developed, printed and distributed on counseling and guidance.

Strategy

Establish a monitoring and evaluation system for guidance and counseling

7.3 Planned Activities

The following is a summary of activities which are considered essential for achieving the goals and objectives stated above. For details of these activities, including cost estimates, implementation dates and suggested implementing agencies and partners are in the Guidance and Counseling Activity Plan in Annex I.

- i. Increase access to and demand for VCT among education staff.
- ii. Train school counselors on HIV and AIDS.
- iii. Establish links to NGOs, CBOs and other relevant partners for the provision of guidance and counseling services in the education sector.
- iv. Establish counseling and guidance centres at all levels in the education sector.

VIII. PLANNING AND BUDGETING

8.1 Introduction

The education sector competes with other sectors such as health, environment, and economic for resources required to discharge its mandate. The HIV and AIDS pandemic make the competition for scarce resources even more intense. Thus, the education system has to be well armed through proper planning and management of its resources if it is to be cost-effective and efficient. Overall the pandemic demands meticulous and imaginative planning, financing and budgeting of all relevant activities.

There is also a need for the education sector to be well informed about how it is being affected by HIV and AIDS, the response it is making, the adjustments it finds necessary, the initiatives it has put in place, and the possible way forward. Therefore, there is need for an effective and well-maintained HIV and AIDS related Education Management Information System (EMIS).

Such an EMIS has to allow for proper projection of capacity building (Human Resources Development and Training), enrolment, the pattern of learning and teaching, and budgetary/financial issues. Like wise the EMIS should be a point of departure for indicators, monitoring and evaluation activities.

8.2 Goals and Objectives

Goal 1

Improve sexual and reproductive health of education sector members through dedicated political leadership and support.

Objectives

8.2.1 To increase and strengthen Ministerial political commitment and support to HIV and AIDS initiatives by December 2005.

8.2.2 To increase and strengthen education stakeholder commitment and support to the Ministry of Education's HIV and AIDS Strategic Plan by April 2005.

Indicators

- i) Proportion of ORT funds used on HIV and AIDS programs.
- ii) Percentage of speeches made by the Minister of Education which make at least one mention of HIV and AIDS.
- iii) Strategic Plan reviewed and widely disseminated.
- iv) Number of consultative workshops and/ or meetings held with development partners, NGOs, CSOs and MOE personnel regarding the Strategic Plan.
- v) Number of collaborative activities undertaken with relevant Government ministries, NAC, development partners, NGOs, CSOs, and other stakeholders.
- vi) Percentage of HIV and AIDS resources in Malawi dedicated to education sector activities.

- vii) Proportion of development partners' resources committed for HIV and AIDS only.

Goal 2

Establish an HIV and AIDS responsive information system to inform planning and management at all levels.

Objectives

- 8.3.1 Incorporate HIV and AIDS sensitive indicators in all existing EMIS activities.
- 8.3.2 Use indicators to review progress in the implementation of this strategic plan and respond accordingly.

Indicators

- (i) Number of indicators related to HIV and AIDS being reported in all documents.
- (ii) Monthly and quarterly reports produced.

Goal 3

Mobilize adequate resources (financial, human and material) for the implementation of the strategic plan.

Objectives

- 8.3.1 Identify and indicate the financial resources needed to implement the HIV and AIDS strategic plan in a cost-effective way.
- 8.3.2 Assess the long-term recurrent financial implications of implementing the strategic plan.
- 8.3.3 Plan for the anticipated shortfall in human resources within the MOE

Indicators

- (i) Number of funds committed to HIV and AIDS.
- (ii) Number of development partners attending coordination meetings of HIV and AIDS.
- (iii) Number of development partners committed to support HIV and AIDS in education.
- (iv) Proportion of development partners' resources committed for HIV and AIDS only.

- (v) Number of HIV and AIDS Intervention supported by development partners.

Strategy

Hold regular resource mobilization meetings to support HIV and AIDS interventions in the education sector.

Goal 4

Provide coordination and oversight for the monitoring and evaluation of programs and policies for all technical teams/functions.

Objective

Oversee implementation and monitoring of Strategic Plan for HIV and AIDS Intervention in the Malawi Education Sector.

Indicators

- (i) Number of agreed issues in donor coordination meeting.
- (ii) Proportion of development partners supporting the HIV and AIDS Strategic Plan.

Strategy

Hold regular quarterly donor and stakeholders coordination meetings.

8.3 Planned Activities

The following is a summary of activities, which are considered essential for achieving the goals and objectives stated above. For details of these activities, including cost estimates, implementation dates and implementing agencies and partners are contained in the Planning and Budget Activity Plan in Appendix 1.

- i. Recruit and train adequate personnel to implement and monitor the HIV and AIDS Strategic Plan.
- ii. Conduct policy reviews.
- iii. Build HIV and AIDS into EMIS activities and use this data for on-going management.
- iv. Include HIV and AIDS in the annual education budget.
- v. Integrate HIV and AIDS program activities in the ministry budget.

IX. PRIORITISATION, RESOURCE MOBILISATION, MONITORING AND EVALUATION

9.1 Introduction

The successful implementation and achievement of the objectives of the strategic plan depends on the availability to resources and commitment in the sector to minimize the devastating impact of the pandemic. In this regard activities which are a priority must of necessity be implemented first as indicated in order to lay the foundations for success. Critical to all this is the identification of financial resources and the monitoring and evaluation of progress being made.

9.2 Prioritization of Actions

The careful prioritization of actions is crucial in the bid to use resources judiciously, efficiently and effectively. Deliberate prioritization of the different activities brings to the fore funding gaps and the pace at which significant progress is attainable. Prioritization brings into greater focus the fact that HIV/AIDS is a cross cutting issue, and hence, requires action on the several fronts at the same time and by all sections of the Ministry of Education and all sectors. The prioritization of actions within and between activities also helps in redirecting resources for greater impact rather than focusing one function.

It is *sine qua non* that curriculum development and implementation is the largest and most direct area that has a bearing on HIV and AIDS intervention and change in behavior in the education sector. However, it is equally important to provide adequate resources for Teacher Education and Development, Human Resource Management, Guidance and Counseling, and Planning and Budgeting. In this Strategic Plan, prioritization has provided for action on HIV and AIDS interventions on all five fronts simultaneously whilst bearing in mind possible outputs that can be inputs of other functions.

One of the priority actions for the education sector is the initiation of the process of mainstreaming HIV and AIDS and developing HIV and AIDS programmes for all staff and learners. Support is therefore required from institutions such as NAC for the "take off" of the sector plan through preparation and provision of the necessary knowledge and capacity development to enable the education sector translate, train, monitor and

evaluate plans; supervise and manage programmes; in the fight against HIV and AIDS.

There is also need as a priority, to timely fund and translate into tangible actions and outcomes, the various HIV and AIDS interventions in this plan. The timely availability of funds for the activities as prioritized will through effective co-ordination draw synergies from all the plans, programs, projects and corresponding actions in the education sector for real change to occur. Hence, every activity should always be considered in line with other corresponding activities within and outside its immediate function. Such an approach will reduce, if not remove, repetition, oversight and provide a truly comprehensive HIV and AIDS intervention in education.

9.3 Funding

Since April 2000, a number of cooperating partners (donors) have made commitments to support the education sector's response towards HIV and AIDS. Parallel to donor commitment, the Government of Malawi has included the funding of HIV and AIDS intervention in its recurrent budget. However, the funding from both donors and the Government is unlikely to fulfill the needs of the sector. Given all required financial the Ministry of Education will require MK 3 Billion to implement this Strategy and Plan of Action in the next three year period. Therefore, the short-term and long-term solution lies in a great need to mobilize local resources more aggressively and in a concerted manner to support the education response.

In the National HIV and AIDS Strategic Framework 2000 - 2004, the mobilization of resources from the private sector (institution proprietors and other interested firms), communities and individuals to support the local initiative is an important part of the financing strategy. The use of local materials and human resources at the level of the school and its immediate community and the use of existing social capital will be the main focus for participatory community based initiatives thereby complementing the resources provided by external donors and the Government.

It is also envisaged that the Strategic Plan and Agenda for Action will be launched as part of the effort of mobilizing resources for education sector response to HIV and AIDS.

This will be followed by annual resource mobilization discussions during education reviews, forums with development assistance partners and local education institutions (public and private). It is through this forum that progress will be assessed and emerging issues in on-going interventions and initiatives addressed. Funding gaps identified will help in the re-distribution of financial resources from both donors and government equitably among the five functions, which this strategic plan addresses.

The Strategic Plan has set out a common vision and approach and there is therefore, urgent need to review present financing mechanisms in order to provide for better coordination, flexibility and timely financing of HIV and AIDS interventions in the education sector. The preferred approach is to allow donors to meet and select areas of intervention in a manner that allows each one to exploit comparative advantage. This requires some form of synchronized funding, processing and disbursement, and maximum flexibility in terms of preferred areas of funding. For those funding areas not covered by donors, there will be need for government to cover these through its revenue, loans and other mechanisms that NAC in liaison with Treasury may recommend. Alternatively, "basket funding" in which donors and government agree to contribute to a "pool fund" based on agreed priorities in the Agenda for Action can be considered. The second approach, though desirable, has to take into account the disbursement conditions of donors like USAID and JICA who do not co-mingle their financial assistance with other donors.

The MOE is already following a loosely defined co-mingle system which takes into account non co-mingling donors. Hence, the second approach may not prove problematic. Besides, co-mingling is a step in realizing Sector Wide Approaches in Projects, which MOE and donors are advocating. For those partners not ready for basket arrangement they will be allowed to develop their own financing arrangements as long as they allow for flexible, synchronized and efficient disbursement arrangements amicable to the education sector (both public and private education institutions).

9.4 Research

The HIV and AIDS pandemic is characterized by a complex interplay of biomedical, social, cultural, economic, human rights, legal and ethical issues. The interplay has to be understood and appreciated through vigilant monitoring, evaluation and research in the education sector.

Results on research are essential for the proper planning and management of interventions so that the education system does not collapse. Research, in particular action research, is therefore, an important part of the Strategic Plan and will continue in future for the generation of data and information to inform HIV and AIDS prevention and mitigation programmes and activities. Research will be undertaken to:

- ❖ Identify and analyze factors, which place educators, other staff and learners, in relation to the immediate communities, at risk of infection and develop possible strategies for reducing vulnerability.
- ❖ Results of the research will also be used to determine more cost-effective methodologies for countering the epidemic in the education sector in liaison with key stakeholders.

The NAC has set out priorities for research on HIV and AIDS prevention and mitigation. In relation to the Education sector, the research activities are as follows:

- ❖ Defining the factors, which determine the spread of HIV and influence (positively and negatively) the management of the epidemic in education.
- ❖ Examining reasons for risk behavior, type of risk behavior and risks associated with such behaviors, particularly among the youth.
- ❖ Investigating gender concerns, which place education personnel and learners at risk of infection and the belief pattern, which entrenches these factors, and how education can change them.
- ❖ Examining models in guidance and counseling and the skills, knowledge and attitudes necessary for caring for the infected and affected.
- ❖ Assessing the impact of the epidemic at individual and institutional levels.
- ❖ Defining policy, legal, gender, and ethical aspects of the epidemic and the necessary guidelines for management and impact mitigation in the education sector.

The research activities outlined are not exhaustive but focus on the critical areas requiring deeper understanding for improved programming, strategizing, management and implementation. Every effort will be made to ensure that NAC is informed of research activities being undertaken in order to minimize duplication and as a central repository of HIV and AIDS related matters.

Furthermore, collaboration with NAC is needed for rapid and wide dissemination of research results. Other stakeholders will also be kept abreast of research activities on HIV and AIDS and education.

9.5 Monitoring and Evaluation

It is imperative to demonstrate whether HIV and AIDS programmes in the education sector are bringing forth the desired outcome and impact. The complexity of HIV and AIDS interventions requires detailed and refined monitoring and evaluation at inter- and intra levels particularly for crosscutting issues such as policy, resource mobilization and utilization, programme design and implementation.

The MOE, with assistance from relevant government institutions, will monitor and regulate policy, legal, gender and ethical issues supportive of planning and implementation of HIV and AIDS prevention and care programmes in the education sector. Emphasis on monitoring and evaluation will focus on resource mobilization, allocation and utilization in the public sector and application of policy, legal, gender and ethical issues in programme implementation. The HIV and AIDS Steering Committee and Focal Point of the MOE, on behalf of the Inter-ministerial Committee on HIV and AIDS, Central Government, and NAC will monitor the overall effectiveness, integration of and rationale for national programmes and interventions in all areas and levels of education.

All institutions in the sector will have to play their part by incorporating in their program plans monitoring and evaluation mechanisms and produce monthly and quarterly reports in the agreed format. Proper coordination between the district education sector and District AIDS Coordinating Committee in monitoring HIV and AIDS related issues at the district is essential for this purpose. A framework for on-going monitoring and evaluation of programmes will be developed in collaboration with the NAC, development assistance partners and stakeholders which, among other things, will focus on:

- ◆ The nature, range and quality of programmes, activities and services.
- ◆ The geographical distribution of programmes, and the diversity of activities and services.
- ◆ The synergy of programmes, activities and services and people's access to and utilization of available programmes, activities and services.

- ❖ The relevance and effectiveness of policies, practices and procedures under implementation at all levels.
- ❖ The effectiveness of coordination and collaboration among implementing agencies in planning and delivery of programmes.
- ❖ The effectiveness of resource mobilization strategies and utilization of such resources for programme activities.
- ❖ Determination of gaps, improvements required and strategies for effecting changes and improvements.
- ❖ Monitoring of major actions for revision of the strategic plan on an on-going basis.

It is also imperative that the monitoring, evaluation and research of HIV and AIDS and the education sector is done using appropriate indicators. These indicators will help determining whether progress is being made and the extent to which the goals and objectives have been attained. These have been specified in each of the pathways. In addition, as part of mainstreaming the HIV and AIDS programming in overall education sector, detailed monitoring indicators have already been integrated in EMIS.

The National HIV and AIDS Strategic Framework provides guidelines for coming up with specific indicators of performance in relation to the overall national target of reducing HIV and AIDS among the 15 - 49 year olds by about 50 percent, and increasing the median age at first sexual debut from the estimated 15 - 16 years to 17 - 18 years by the year 2004. The following performance indicators are deemed relevant for the education sector:

Culture and HIV and AIDS

- ❖ Increase in debate and discussion of values, beliefs and practices, which influence the course of the epidemic.
- ❖ Increase in advocacy for change in sex related values, beliefs and practices.
- ❖ Changes in negative attitudes towards women, girls and people living with HIV and AIDS.
- ❖ Modifying contents and practices in education institutions for the youth.

Youth, Social Change and HIV and AIDS

- ❖ Increase in quantity and quality of IEC and Life Skills materials and messages addressing youth development issues, particularly HIV and AIDS.

- ❖ Programmes and materials on human sexuality education and training for schools, youth organizations and youth communities.
- ❖ Participation and leadership of youth in HIV and AIDS activities and related development issues.
- ❖ Increase in dialogue and communication among socialization institutions.

Socio-Economic Status and HIV and AIDS

- ❖ Increase in advocacy work on issues of gender and the HIV and AIDS pandemic.
- ❖ Gender awareness and training programmes with regard to HIV and AIDS.
- ❖ Increase in knowledge and observance of policy, law and human rights with regard to gender equity and equality.
- ❖ Equity in access to education and training opportunities between males and females.

Despair and Hopelessness and HIV and AIDS

- ❖ Improve knowledge and skills for dealing with HIV and AIDS among relevant stakeholders.
- ❖ Increase quantity and quality of materials and messages addressing issues of hope, faith and compassion.
- ❖ Changes in language and language images, which cause despair or negative attitudes towards the pandemic and infected individuals.

HIV and AIDS Management

- ❖ Increase coordination and mechanisms for joint planning and exchange of experiences among stakeholders.
- ❖ Increase quality and extent of HIV and AIDS workplace programmes in the education sector.
- ❖ Change in human resource management policies, incorporating HIV and AIDS and issues raised by the pandemic.
- ❖ Increase availability of adequate and improved data to manage the HIV and AIDS pandemic.

HIV and AIDS and Orphans, Widows and Widowers

- ❖ Increase in quality and coverage of training and education programmes for orphans, widows and widowers.

- ❖ Increase availability of adequate and improved data and information on numbers and situations of orphans, and other vulnerable persons.
- ❖ Increase in collaboration and coordination of activities among institutions in providing care and support to orphans and other vulnerable persons.

Prevention of HIV Transmission

- ❖ Increase in counseling services on abstinence, mutual faithfulness and VCT among youth and adults.
- ❖ Programmes on sexuality and Life Skills education for immediate families, communities and educational institutions.
- ❖ Counseling programmes for families, educational institutions and immediate communities on behavior change and HIV and AIDS/STIs.
- ❖ Increase in the practice of safer sex behaviors, particularly among young people.
- ❖ Increase in access to condoms by sexually active populations in rural and urban areas by referral to relevant institutions.
- ❖ Improve knowledge about and adherence to infection control procedures.

HIV and AIDS Information, Education and Communication

- ❖ Increase in collaboration, networking and related mechanisms in the design of messages and materials.
- ❖ Improved quality and distribution of messages and materials: relevance, targeting, content and coverage of social groups.
- ❖ Increase level of participation of IEC agents and final users in the development of messages and materials.
- ❖ Increase in participation of institutions in the preparation and dissemination of HIV and AIDS education.
- ❖ Participation of all relevant personnel, including health, traditional and opinion leaders in HIV and AIDS education at institution level.
- ❖ Increase in the participation of boys and girls in HIV and AIDS education activities as beneficiaries and change agents.

Voluntary Counseling and Testing

- ❖ Increase in the number and effectiveness of counselors supporting and promoting HIV and AIDS related interventions, such as VCT, in the education sector.

- ❖ Improve quality, distribution and utilization of IEC messages and materials on the benefits of VCT for various groups in education.
- ❖ Participation of both HIV positive and negative persons in giving testimonies on the benefits of VCT.

ANNEX 1

Plan of Action

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Function 1: CURRICULA DEVELOPMENT AND IMPLEMENTATION

Goals	Objectives	Activities	Cost Estimates (US \$)	Date of Implementation	Suggested Implementing Agencies	Suggested Collaborating Partners
1. Regular review of school curricula at all levels to ensure responsiveness to HIV & AIDS issues and preparation of curriculum, on HIV and AIDS for non teaching staff and school committee.	1.1. To infuse knowledge skill and attitudes on HIV and AIDS into the Primary, Secondary and TTC curricular	1.1.1 Identify needs	No cost	July, 2004	MOE and MIE	USAID, GTZ, DfID, UNICEF, UNAIDS, UNFPA, CIDA, World Bank, JICA, MOH, NAC, Ministry of Youth, National Youth Council, PCAR CC
		1.1.2 Identify relevant stakeholders	\$4,000	July, 2004	MOE EMAS and MIE	
		1.1.3 Source and evaluate relevant materials from other countries	\$2,000	July, 2004 and on-going	MOE HIV/AIDS Focal Point	
		1.1.4 Establish national strategy for consultation from communities and other sources to ensure cultural relevance and sensitivity.	\$8000	On-going	MOE EMAS, DTED and MIE	
		1.1.5 Gather information from communities and other sources to ensure cultural relevant and sensitivity.	\$8,000	August - October 2004	MOE, Special Education, EMAS, DTED, MCDE and MIE	
		1.1.6 Systematically revise the curriculum by infusing HIV and AIDS issues.	\$86,976	August /Sept. 2004	MOE EMAS, DTED, MCDE and MIE, Special Education	

	1.2 To develop accurate HIV and AIDS teaching and learning materials with culturally sensitive messages.	1.2.1. Identify mechanisms for adaptation and modification of existing materials.	\$4000	July 2004 and repeated semi-annually	MOE DTED, and MIE	EMAS, MCDE,	MOE, Supplies Unit, CIDA, UNICEF, DFID, GTZ, UNFPA, GCU
		1.2.2. Hold workshops with stakeholders and writing teams.	See 1.1.6				
		1.2.3. Writing team incorporates adapted information into existing HIV and AIDS education materials.	See 1.1.6	July 2004 and on going.	MOE DTED, and MIE	EMAS, MCDE,	DFID, UNFPA, UNICEF, GTZ, USAID
		1.2.4 Printing of the adapted materials.	\$ 470,000	July 2004 and on going.	MOE DTED, and MIE	EMAS, MCDE,	DFID, NAC, GCU, Supplies Unit
	1.3 To develop curriculum for non teaching staff & school committee members addressing the HIV and AIDS pandemic in all institutions under MOE.	1.3.1 Identify relevant stakeholders	No cost	July 2004 and on-going			
		1.3.2 Identify needs	No cost				
		1.3.3 Establish national strategy for consultation and communication	\$ 4000	July 2004 and on going.	MOE DTED, and MIE	EMAS, MCDE,	
		1.3.4 Gather information from communities and other source to ensure cultural relevance and sensitivity	See 1.1.5				SMC, Plan International, Action AID
	1.3.5 Hold workshop with stakeholders and writing team to come up materials.	See 1.1.6	July 2004 and on-going	MOE DTED, and MIE	EMAS, MCDE,		

	<p>1.4 To transcribe HIV and AIDS teaching & learning materials for students with special needs.</p>	<p>1.4.1 Identify experts to prepare the materials</p> <p>1.4.2 Identify mechanism for adaptation and modification of existing material</p> <p>1.4.3 Hold workshops with experts and stakeholders.</p> <p>1.4.4 Print and distribute materials for pupils with special needs</p>	<p>No costs</p> <p>No costs</p> <p>\$ 43,488</p> <p>\$ 100,000</p>	<p>July 2004 and on-going</p> <p>July 2004 and on-going</p> <p>July 2004 and on-going</p>	<p>MOE, EMAS, DTED, MCDE, Special Education and MIE</p> <p>MOE</p> <p>MOE</p>	<p>USAID, GTZ, DfID, UNICEF, UNAIDS, UNFPA, CIDA, MOHP, NAC, Ministry of Gender</p> <p>DFID, NAC, GCU, Supplies Unit</p> <p>DFID, NAC, GCU, Supplies Unit</p>
<p>2. Effective implementation of reviewed curricula.</p>	<p>2.1 To improve the system for development, printing and distribution of HIV and AIDS education teaching and learning materials.</p>	<p>2.1.1 Develop TOR to assess current procedures and practices for printing and distribution of materials.</p> <p>2.1.2 Conduct an assessment study and evaluate current procedures and practices for printing and distributing materials and make recommendations on improved system.</p>	<p>\$8,000</p> <p>\$8,000</p>	<p>August, 2004</p> <p>August, 2004 and on-going</p>	<p>MOE, EMAS, DTED and TTCs</p> <p>MOE, TTCs and MIE</p>	<p>USAID, GTZ, DfID, UNICEF, UNAIDS, UNFPA, CIDA, MOH, NAC, Ministry of Gender</p>

	2.2 Training teachers on participatory teaching techniques and skills for effective delivery of HIV and AIDS education.	2.2.1 Convene stakeholders meetings to discuss teacher education and development program on HIV and AIDS education.	\$14,500	August, 2004	MOE, TTCs and MIE	PCAR, DFID, World Bank, UNICEF, CIDA, GTZ, USAID
		2.2.2 Conduct campaigns including radio call-ins, in relation to national teacher education and development program to discuss HIV and AIDS education.	\$172,800	August, 2004 On-going	MOE DTED and TTCs	CSCQBE, Action AID, Plan International, NAC, Various, Radio Stations
		2.2.3 Hold workshops to write and refine materials for teacher trainers.	See 1.1.6	July 2004 and on-going	MOE MCDE, EMAS, MIE, TTC	ACEM, DFID, UNICEF, PCAR, GTZ, CIDA
		2.2.4 Print and distribute the revised materials.	See 1.2.4	August 2004 and on-going	MOE, EMAS, MIE	Various Printers, Supplies Unit, GCU, NAC
		2.2.5 Hold workshops to orient teacher trainers in the use of the materials.	\$ 152,208		MOE MCDE, EMAS, MIE	
		2.3 To train distance education teachers (MCDE) in the effective use of distance education materials on HIV and AIDS.	2.3.1 Hold stakeholders conference to plan the intervention.	\$ 14,500	August 2004 and on-going	MOE, MIE, Special Education, MCDE, EMAS,

		<p>2.3.2 Source and evaluate relevant distance teacher materials on Life Skills for HIV and AIDS from other countries.</p> <p>2.3.3 Hold workshop to prepare distance education teachers manual and effective use of distance education materials on HIV and AIDS.</p>	<p>\$10,000</p> <p>\$ 43,488</p>	<p>August 2004 and on-going</p> <p>August 2004</p>	<p>MOE, MCDE, MIE, EMAS, Special Education</p>	<p>DFID, GTZ, JICA, USAID, UNFPA, UNICEF, World Bank</p> <p>Information, NAC Various Radio Stations, TVM, Agriculture</p>
	<p>2.4 To develop a/v materials and lessons on HIV and AIDS.</p>	<p>2.4.1 Train MCDE staff on production and use of video and radio education materials.</p> <p>2.4.2 Produce radio and video education materials on HIV and AIDS including broadcasts.</p>	<p>\$ 43,488</p> <p>\$ 146,976</p>	<p>August 2004</p> <p>September 2004</p>	<p>MOE</p> <p>MOE</p>	<p>Information, NAC Various Radio Stations, TVM, HEU, Agriculture</p> <p>Information, NAC Various Radio Stations, TVM, HEU, Agriculture</p>
<p>3. Establish an affective and efficient system for monitoring and evaluation of Life Skills Education for HIV and AIDS prevention and behavior change.</p>	<p>3.1 To devise effective monitoring and evaluation mechanism for HIV and AIDS.</p>	<p>3.1.1. Liaise with organizations and institutions involved in HIV and AIDS activities.</p> <p>3.1.2. Coordinate HIV and AIDS curricula activities within the education sector.</p>	<p>No Cost</p> <p>\$18,000 / year</p>	<p>July 2004 On-going</p> <p>January 2004 On-going</p>	<p>MOE HIV/AIDS Advisor</p> <p>MOE HIV/AIDS Advisor</p>	<p>USAID, GTZ, DFID, UNICEF, UNAIDS, UNFPA, CIDA MOH, NAC</p> <p>USAID, GTZ, DFID, UNICEF, UNAIDS, UNFPA, CIDA MOHP, NAC (M&E Dept)</p>

		<p>3.1.3. Identify and recruit regional or international consultant to develop monitoring and evaluation instrument/guidelines.</p> <p>3.1.4. Develop national monitoring and evaluation plan together with budget and planning technical team.</p> <p>3.1.5. Conduct monthly monitoring and supervisory visits</p> <p>3.1.6. Conduct Mid-term evaluation.</p> <p>3.1.7. Conduct summative evaluation.</p>	<p>(*These M & E costs will be eventually be integrated in ORT funds in MOE Dept of Planning.) \$ 14,500</p> <p>See 3.1.2</p> <p>\$14,500</p> <p>\$14,500</p>	<p>May, 2004 and on-going</p> <p>June 2004</p> <p>June 2004 and on going</p> <p>January, 2005-6</p> <p>December 2007</p>	<p>MOE, Planning, MIE</p> <p>MOE, Planning, MIE</p> <p>MOE, DTED and EMAS</p> <p>MOE, Zonal offices, PEAs, SEMAs</p> <p>MOE EMAS, DTED and TTCs</p>	<p>EMAS, DTED,</p> <p>EMAS, DTED,</p>	<p>USAID, DFID, NAC, JICA, UNICEF< UNFPA, World Bank FBOs, Ministry of Youth, National Youth Council, UNESCO, Civil Society</p> <p>USAID, DFID, NAC, JICA, UNICEF< UNFPA, World Bank FBOs, Ministry of Youth, National Youth Council, UNESCO, Civil Society</p> <p>USAID, DFID, NAC, JICA, UNICEF< UNFPA, World Bank FBOs, Ministry of Youth, National Youth Council, UNESCO, Civil Society</p>
	<p>3.2. To train and involve educational personnel in monitoring of the implementation of HIV and AIDS Education programs.</p>	<p>3.2.1. Training workshop on how to implement M& E tools using cohort groups.</p> <p>3.2.2. Monitor implementation of Life Skills for HIV and AIDS curriculum.</p>	<p>\$8,000</p> <p>No cost (done together with 3.2.2. and 3.2.3.)</p>	<p>Immediately and on-going</p> <p>Immediately and on-going</p>	<p>MOE HIV/AIDS Advisor</p>		<p>USAID, DFID, NAC, JICA, UNICEF< UNFPA, World Bank FBOs, Ministry of Youth, National Youth Council, UNESCO, Civil Society</p>

	<p>3.3. To establish a multi-sectoral approach to the evaluation of the impact of HIV and AIDS Education within the education sector.</p>	<p>3.2.3. Monitor development and dissemination of HIV and AIDS teaching and learning materials.</p>	See 3.1.2	Annually	MOE HIV/AIDS Advisor	<p>USAID, DFID, NAC, JICA, UNICEF< UNFPA, World Bank FBOs, Ministry of Youth, National Youth Council, UNESCO, Civil Society</p>
		<p>3.3.1 Liaise with national bodies involved in HIV and AIDS interventions.</p>	No costs	January 2004 on-going	MOE HIV/AIDS Advisor	
		<p>3.3.2 Evaluate HIV and AIDS education program.</p>	\$14,500	December 2005	MOE HIV/AIDS Advisor	
		<p>3.3.3 Organize national dissemination of evaluation funding event</p>	\$14,500	January 2006	MOE HIV/AIDS Advisor	
		<p>3.3.4 Feed back evaluation findings from education sector into national programs.</p>	\$ 14500	January 2006 on-going	MOE HIV/AIDS Advisor	

Function 2: TEACHER EDUCATION AND DEVELOPMENT

Goals	Objectives	Activities	Cost Estimates	Date of Implementation	Suggested Implementing Agencies	Suggested Collaborating Partners
1.0 Develop/revise HIV and AIDS responsive teacher training curriculum for pre-service and in-service programme	1.1 To incorporate skills based on HIV and AIDS education and interactive teaching techniques into curricular of pre-service and in-service teacher training programs.	1.1.1 Source and evaluate national/ regional teacher education materials on Life Skills for HIV and AIDS education.	\$5,000	July, 2004	MOE, DTED	DFID, GTZ, JICA, UNICEF, UNICEF, TTCs, MIE
		1.1.2 Adapt current Life Skills for HIV and AIDS education materials used in Malawi to incorporate recommendations from evaluation.	\$14,500	July, 2004 and on-going	MOE, DTED, MIE	USAID, GTZ, DfID, UNICEF, UNAIDS, UNFPA, CIDA MOHP, NAC, ACEM
		1.1.3 Organize training sessions for writers of Life Skills for HIV and AIDS (for teachers) materials.	\$413,968	Immediately and on-going	MOE, DTED, MIE	University of Malawi, Mzuzu University, UNAIDS, Ministry of Information, NAC, ACEM
	1.2 To adapt and provide a variety of teaching and learning resources for use in teacher training institutions.	1.2.1 In the light of an emerging program, audit current resources in teacher training.	See 1.1.3	September, 2004 and on-going	MOE, DTED	Above + communities and NGOs, ACEM

<p>2.0 Improved methods/ delivery of HIV and AIDS Programs in education institutions and surrounding communities</p>	<p>1.3. To develop teaching and learning materials, teachers guides that address pupils with special needs</p> <p>2.1 To review the existing Pre-and in-service teacher education programs in light of HIV and AIDS.</p>	<p>1.2.2 Adapt and develop materials for teacher training institutions as necessary.</p>	No cost	August, 2004	<p>MOE DTED, EMAS and MIE</p> <p>MOE DTED, EMAS and MIE</p> <p>MOE DTED, EMAS and MIE</p> <p>MOE DTED, EMAS and MIE</p> <p>MOE DTED, EMAS and MIE</p> <p>MOE DTED, EMAS and MIE</p> <p>MOE DTED, EMAS and MIE</p>	<p>University of Malawi, Mzuzu University, UNAIDS, Ministry of Information, NAC, ACEM, DFID</p>
		<p>1.2.3. Supply institutions with adequate learning resources and materials.</p>	\$ 64,800	September, 2004		<p>Above + NAC, UNAIDS, DFID, USAID</p>
		<p>1.3.1 Transcribe and Prefest Life Skills Education for HIV and AIDS materials into Brail and Sign Languages</p>	\$14,500	September, 2004 and on-going		
		<p>1.3.2 Train Special Education Teachers on HIV and AIDS.</p>	See 1.1.3	October, 2004		
		<p>1.3.3 Print and Distribute materials for special needs pupils.</p>	\$20,000			
		<p>2.1.1 Review and revise existing National/regional Pedagogical skills for the delivery of HIV and AIDS Programs.</p>	\$ 5,000/ year	January, 2004 On-going		
					MOE DTED, EMAS, Planning	

	2.2 To create and maintain an open environment regarding sexuality, reproductive health, and HIV and AIDS.	2.1.2 Use the revised resource materials for orientation of Lecturers/Tutors.	See 1.1.3	September 2004 on-going	and MIE	University of Malawi, Mzuzu University, UNAIDS, PCAR, HEU, NAC, ACEM,DFID, USAID,MOI
		2.2.1 Appoint and train HIV/AIDS focal persons at teacher education institutions and at district level (Training workshop for 44 people, 2 days).	\$12,000	July 2004 On-going	MOE, HRM DTED, TTCs	
		2.2.2 Establish (Teachers & Student Leaving with AIDS associations) T/SLWA) for easy targeting.	\$41,986	July 2004 and on-going	MOE DTED	
		2.2.3 Sensitize University and Teacher Training College staff to accept and support Teachers Living with AIDS (TLWAs). (Utilize UN Volunteers and incorporate into other trainings)	See 2.2.2	July 2004 and on-going	MOE, DTED, MIE	University of Malawi, Mzuzu University, UNAIDS, PCAR, HEU, NAC, ACEM,DFID, BLM USAID,MOI
		2.2.4 Make information on HIV and AIDS related issues accessible to	\$ 318,912	May 2004 and on-going	MOE, DTED, MIE	University of Malawi, Mzuzu University, UNAIDS, PCAR, HEU, NAC, ACEM,DFID, BLM, PSI USAID,MOI

		<p>all education personnel.</p> <p>2.2.5 Elicit the support of communities for HIV and AIDS issues to be tackled in the education sector, including through the Life Skills for HIV and AIDS education curriculum.(Integrate with ongoing work of CRECCOM and other NGOs)</p> <p>2.2.6 Incorporate local care and support CBOs into teacher training activities.</p> <p>2.2.7 Support existing co-curricular activities to complement existing HIV and AIDS programs.</p>	<p>See 2.2.4</p>	<p>July 2004 and on going</p>		<p>University of Malawi, Mzuzu University, UNAIDS, PCAR, HEU, NAC, ACEM,DFID, USAID</p>
					MOE, DTED,MIE	
				July 2004 and on going	MOE, DTED,MIE	University of Malawi, Mzuzu University, UNAIDS, PCAR, HEU, NAC, ACEM,DFID, USAID
			See 3 Year Work Plan	July 2004 and on going		University of Malawi, Mzuzu University, UNAIDS, PCAR, HEU, NAC, ACEM,DFID, USAID
			See 3 Year Work Plan	July 2004 and on going	MOE, DTED,MIE, EMAS, Special Education	DFID,GTZ, USAID, DPS, UNICEF, UNFPA.
	2.3 To equip educators with necessary knowledge attitudes, practices and skills to effectively deliver HIV and AIDS related education.	<p>2.3.1 Work closely with Curriculum Development and Education Technical Team to coordinate teacher training in</p>	See 1.16	July 2004 and on-going	HIV/AIDS Advisor, DTED, EMAS	

<p>3.0 Establish system for monitoring and evaluation of HIV and AIDS programs in educational institutions to measure positive behavior change.</p>	<p>3.1 To develop instruments for measuring positive behavioral change.</p>	<p>pre-and in-service Life Skills for HIV and AIDS education.</p> <p>2.3.2 Encourage Teachers/Students Living with AIDS (TLWAs) to share their experience with educators, parents and learners.(T/SLWA/TEI/3 times/year).</p> <p>2.3.3 Integrate Life Skills for HIV and AIDS education in the core courses at teacher training colleges.</p> <p>3.1.1 Invite persons who are HIV positive to talk to student teachers.</p> <p>3.1.2. Holding in house discussions on severity, effects and impact of HIV and AIDS on education.</p>	<p>See 2.3.1 BCC Interventions activities</p> <p>See 2.3.1</p> <p>See 2.3.2</p> <p>See 1.1.6</p>	<p>July 2004 and on-going</p> <p>July 2004 and on going</p> <p>July 2004 and on going</p> <p>July 2004 and on going</p> <p>July 2004 and on going</p>	<p>HIV/AIDS Advisor, DTED, EMAS</p> <p>HIV/AIDS Advisor, DTED, EMAS</p> <p>HIV/AIDS Advisor, DTED, EMAS</p> <p>HIV/AIDS Advisor, DTED, EMAS, MIE</p> <p>HIV/AIDS Advisor, DTED, EMAS, MIE</p>	<p>DFID,GTZ, USAID, DPS, UNICEF, UNFPA,</p> <p>DFID,GTZ, USAID, DPS, UNICEF, UNFPA, PCAR, UNAIDS</p> <p>NAC, MACRO, MANASO, TLWA, MANET</p> <p>NAC, MACRO, MANASO, TLWA, MANET,TVM, ACEM</p>
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<p>4.0 Improved behavioral change among student, teacher and lecturers/tutors.</p>	<p>4.1 Develop instruments for monitoring and evaluating HIV and AIDS programs drawing upon emerging national/regional and international expertise.</p> <p>4.2 To involve education staff at educational institution in monitoring the implementation of programs.</p>	<p>3.1.3. Organizing programs like Turning Point on TVM.</p> <p>4.1.1 Develop instruments for measuring positive behavioral change.</p> <p>4.1.2 Pilot test the instruments developed</p> <p>4.1.3 Use the polished instrument for monitoring program implementation for constant feedback</p> <p>4.2 Training workshop for staff at teacher training institutions on how to monitor HIV and AIDS programs.</p>	<p>See Radio Programs</p> <p>See Activities on 3 Year work Plan</p> <p>See Activities on 3 Year work Plan</p> <p>See Activities on 3 Year work Plan</p> <p>See Activities on 3 Year work Plan \$ 8000</p> <p>\$ 2000</p>	<p>July 2004 and on going</p> <p>October 2004 and on going</p> <p>October 2004 and on going</p> <p>October 2004 and on going</p> <p>October 2004 and on going</p> <p>October 2004 and on going</p>	<p>HIV/AIDS Advisor, DTED, EMAS, MIE</p> <p>HIV/AIDS Advisor, DTED, EMAS, MIE</p> <p>HIV/AIDS Advisor, DTED, EMAS, MIE</p> <p>HIV/AIDS Advisor, DTED, EMAS, MIE</p> <p>HIV/AIDS Advisor, DTED, EMAS, MIE</p> <p>HIV/AIDS Advisor, DTED, EMAS, MIE</p>	<p>DFID, UNICEF, UNFPA, UNAIDS, World Bank, NAC, BLM, ACEM</p> <p>DFID, UNICEF, UNFPA, UNAIDS, World Bank, NAC, BLM, ACEM</p> <p>DFID, NSO, UNICEF, UNFPA, UNAIDS, World Bank, NAC, BLM, ACEM</p> <p>DFID, NSO, UNICEF, UNFPA, UNAIDS, World Bank, NAC, BLM, ACEM</p>
<p>5.0 Promote action oriented/operational HIV and AIDS research in teacher education.</p>	<p>5.1 To strengthen the capacity of teacher educators to conduct research relevant to HIV and AIDS.</p>	<p>5.1.1 Train TTC tutors to manage action research by student teachers at TTCs.</p>	<p>\$ 2000</p>	<p>October 2004 and on going</p>	<p>HIV/AIDS Advisor, DTED, EMAS, MIE</p>	<p>DFID, NSO, UNICEF, UNFPA, UNAIDS, World Bank, NAC, BLM, ACEM</p>

		5.1.2. Orientation of DTED staff on HIV and AIDS relevant research.	\$ 8000	October 2004 and on going	HIV/AIDS Advisor, DTED, EMAS, MIE	DFID, UNFPA, World Bank, NAC, BLM, ACEM	UNICEF, UNAIDS, Bank
		5.1.3. Undertake regular studies.	See 3 year Work plan strengthening Coordination	October 2004 and on going	HIV/AIDS Advisor, DTED, EMAS, MIE	DFID, UNFPA, World Bank, NAC, BLM, ACEM	UNICEF, UNAIDS, Bank
		5.1.4. Disseminate findings of studies to relevant stakeholders	See 3 year Work plan strengthening Coordination	October 2004 and on going	HIV/AIDS Advisor, DTED, EMAS, MIE	DFID, UNFPA, World Bank, NAC, BLM, ACEM	UNICEF, UNAIDS, Bank
		5.1.5. Use research findings to develop relevant teaching and training materials.	See 1.1.6	October 2004 and on going		DFID, UNFPA, World Bank, NAC, BLM, ACEM	UNICEF, UNAIDS, Bank

Function 3: Human Resource Management

Goals	Objectives	Activities	Cost Estimates	Date of Implementation	Suggested Implementing Agencies	Suggested Collaborating Partners
1.0 Provide support and care for educators and other education staff affected and infected by HIV and AIDS.	1.1 To review and revise the conditions of service of educators and other staff in the context of HIV and AIDS.	1.1.1 Situation analysis to identify HIV and AIDS related needs.	\$ 14,500	July, 2004	MOE, HRMD and HIV/AIDS Focal Person	Ministries of Justice and Economic Planning, Treasury, MOH, TUM, TSC
		1.1.2 National Symposium to provide wide consultation of stakeholders.	\$14,500	July, 2004	MOE, HRMD and HIV/AIDS Advisor	
		1.1.3. Review the HIV and AIDS-relevant conditions of service in conjunction with HRMD, OPC.	\$57,984	July, 2004 and on going	MOE, HRMD and HIV/AIDS Focal Person	MOE Divisions, DEMs, TSC, TUM
		1.1.4 Encourage members of staff to join medical scheme that is supported by government.	No cost	July - October 2004	MOE Administration	
		1.1.5 Encourage members of staff to acquire life insurance policies	No cost	August, 2004 and annually	MOE Administration	MOE Divisions, DEMs, TSC, MOH, NAC, TUM
		1.1.6 Develop social welfare policy for educators and other members staff	No cost	August, 2004 and annually	MOE Administration	
		1.1.7 Develop ORT guidelines on how HIV and AIDS budget should be utilised.	No cost	May 2004	MOE Administration	MOE Divisions, DEMs, TSC, MOH, NAC, TUM, OPC,

	1.2. To strengthen linkages between existing social welfare committees and PTAs in order to provide care and support for those in the education sector affected and infected by HIV and AIDS.	1.2.1. Assess the level of awareness and understanding of social welfare committee members regarding HIV and AIDS, including their knowledge of stigma and discrimination, impact and care and support at the community level.	\$14,500	August 2004 and on going	MOE Administration	DHRMD, Treasury MOE - Divisions, DEMs, TSC, MOH, NAC, TUM, OPC, DHRMD, Treasury
		1.2.2. Conduct TOT at district level on care and support for HIV/AIDS infected and affected staff and learners (3 day workshop)	\$ 59,984	August 2004 and on going	MOE Administration	MOE - Divisions, DEMs, TSC, MOH, NAC, TUM
		1.2.3. Conduct sensitization and awareness meetings on care and support at zonal level for social welfare committees and community (2 days).	\$ 59,984	August 2004 and on going	MOE Administration	OPC, DHRMD, TUM, NAC, TSC, Justice, HRC, Treasury OPC, DHRMD, TUM, NAC, TSC, Justice, HRC, Treasury

<p>2.0 Establish HIV and AIDS and gender sensitive management policy and programmes.</p>	<p>2.1. To adapt/adopt and implement a policy on HIV and AIDS related management issues.</p> <p>2.2. To develop and implement a health-related treatment programme for education personnel.</p>	<p>2.1.1. Adaptation of clear and non-discriminatory management guidelines for educators and other education staff which are sensitive to HIV and AIDS.</p>	See 1.1.3	August, 2004	MOE HRM	MOHP, NAC, MOAI, Min. of Justice, Min. of Labor, Human Rights Bodies
		<p>2.1.2. Disseminate guidelines to all levels of the education sector.</p>	See 1.2.3	August 2003 and ongoing	MOE HRM	MOH, NAC, Labour, HRC
		<p>2.2.1. Establish linkages to relevant health partners to ensure the best possible treatment for education personnel.</p>	See 1.1.2	August 2003 and ongoing	MOE HRM	DHRMD, OPC, Labour, TUM, TSC, Gender, HRC
		<p>2.2.2. Step up recruitment of staff taking into account of HIV and AIDS realities.</p>	No cost	August 2003 and ongoing	MOE HRM	DHRMD, OPC, Labour, TUM, TSC, Gender, HRC
		<p>2.2.3. Develop policy that will take care of gender equity and equality issues in the deployment of staff.</p>	See 1.1.3	August 2003 and ongoing	MOE HRM	DHRMD, OPC, Labour, TUM, TSC, Gender, HRC
		<p>2.2.4. Intensify in service training for staff.</p>	See 1.2.3	August 2003 and ongoing	MOE HRM	DHRMD, OPC, Labour, TUM, TSC, Gender, HRC

		2.2.5. Develop HIV and AIDS programs in the work place.	\$ 1,013, 220	June 2004 and on-going	MOE HRM	DHRMD, OPC, Labour, TUM, TSC, Gender, HRC
		2.2.6. Implement HIV and AIDS interventions at all levels	See 2.2.5	June 2004 and on-going	MOE HRM	DHRMD, OPC, Labour, TUM, TSC, Gender, HRC
						DHRMD, OPC, Labour, TUM, TSC, Gender, HRC

<p>3.0 Improved recruitment and deployment of trained educators and other staff in the education sector.</p>	<p>3.1. To conduct recruitment and deployment this is responsive to increased attrition rate.</p>	<p>3.1.1 Determine number of trained teachers and staff needed in the education sector. 3.1.2. Formulate action plan for increased recruitment and training. 3.1.3. Sensitise education officials on deployment guidelines developed in Objective 3.1.2, above. 3.1.4. Include HIV and AIDS programs in training of staff in the work place 3.1.5. Increase budget to train more tutors and teachers.</p>	<p>See 1.1.3 See 1.1.3 See 2.2.5 See 1.1.3 See 3 Year Work Plan on Budgeting and Planning</p>	<p>June 2004 and on-going August, 2004 October, 2004 and on going October, 2004 and on going October, 2004 and on going</p>	<p>MOE MOE, HRM and DTED MOE, HRM and DTED MOE, HRM and DTED MOE, HRM and DTED</p>	<p>DHRMD, OPC, Labour, TUM, TSC, Gender, DHRMD, OPC, Labour, TUM, TSC, Local Government DHRMD, OPC, Labour, TUM, TSC, Local Government DHRMD, DFID, NAC, USAID, OPC, Labour, TUM, TSC, Local Government</p>
<p>4.0 Eliminate stigma and discrimination amongst educators and other staff towards HIV infected and staff with AIDS.</p>	<p>4.1 To develop policy to protect the rights of staff living with HIV and AIDS related sickness.</p>	<p>4.1.1. Develop policy and guidelines to address stigma and discrimination. 4.1.2 Train educators on policies and guidelines that address stigma and discrimination.</p>	<p>See 1.1.3 See 2.2.5</p>	<p>June 2004 and on going June 2004 and on-going</p>	<p>MOE, HRM and DTED MOE, HRM and DTED</p>	<p>DHRMD, DFID, NAC, USAID, OPC, Labour, TUM, TSC, Local Government</p>

		4.1.3 Monitor the implementation of policies and guidelines that address stigma and discrimination	See 2.2.5	June 2004 and on going	HIV/Advisor HRM	DFID, NAC, USAID, DHRMD, OPC, Labour,
		4.1.4. Develop clear guidelines on disciplinary process to be followed on educators and other staff.	See 1.1.3	June 2004 and on going	HIV/Advisor HRM	TUM, TSC, Local Government Plan International, Action AID
		4.1.5 Establish associations for PLWA-Teachers and Students for easy targeting.	See 3 Year Work plan and Care and Support	June 2004 and on going	HIV/Advisor HRM	DFID, UNICEF, TUM, TSC
5.0. Implement appropriate human resources policies in light of the HIV and AIDS impact in the education sector.	5.1. To develop and enforce human resource policies (retirement, absenteeism, sick leave, retention and remuneration, and management of information) that mitigates the impact of HIV and AIDS in the education sector.	5.1.1. Develop guidelines for tracking absenteeism and other related HIV and AIDS related problems.	\$ 14,496	June 2004 and on going	HIV/Advisor EMIS	TUM, TSC, Decentralization, DHRMD
		5.1.2. Develop systems to monitor absenteeism to enhance proper planning.	\$ 14,496	June 2004 and on going	HIV/Advisor EMIS	CRECCOM, CSCQBE, DFID, USAID, NAC
		5.1.3 Improve working conditions for staff in the education sector.	See 1.1.3	June 2004 and on going	HIV/Advisor, EMIS	NSO, NAC, ACEM, USAID, DFID, GTZ NSO, NAC, ACEM, USAID,

		5.1.4 Improve current EMIS to capture data on HIV and AIDS related sickness by sex and age.	See 5.1.1	June 2004 and on going	HIV/Advisor, EMIS	DFID, GTZ
		5.1.5 Develop guidelines for special packages for those members of staff with increased workload due to HIV and AIDS, special skills and experience, and those working in rural areas.	See 1.1.3	June 2004 and on going	HIV/Advisor, EMIS	NSO, NAC, ACEM, USAID, DFID, GTZ
		5.1.6 Develop guidelines for special rewards to those with special skills and those working in rural areas	See 1.1.3	June 2004 and on going	HIV/Advisor, EMIS	DFID, USAID, UNICEF, UNESCO-IIEP, NSO
		5.1.7 Review the retirement conditions to take into account the interest of members of staff with full blown AIDS.	See 1.1.3	June 2004 and on going	HIV/Advisor, EMIS	OPC, Local Government, DHRMD, Labour
		5.1.8. Review the current sick leave policy to reflect the realities of HIV and AIDS impact.	See 1.1.3	June 2004 and on going	HIV/Advisor, EMIS	OPC, Local Government, DHRMD, Labour

6.0. Timely and effective mainstreaming of HIV and AIDS in the Education Sector.	6.1. Ensure that HIV and AIDS issues are mainstreamed at all levels.	6.1.9 Conduct a study to identify all OVC with a view to target them.	\$ 14,500	November 2004	HIV/Advisor, EMIS	OPC, Local Government, DHRMD, Labour
		6.1.10 Develop and disseminate HIV and AIDS Policy for the education sector	\$ 666,816	July, 2004 and on going	HIV/AIDS Advisor Planning	Gender and Local Government
		6.1.1 Establish HIV and AIDS Unit at Headquarters.	\$ 57,600	January 2004 and on-going	HIV/AIDS Advisor HRM	DFID, UNICEF, USAID, TUM, TSC, Local Government
		6.1.2 Establish HIV and AIDS Unit at National, Division, District and School levels.	See 6.1.1	January 2004 and on-going	HIV/AIDS Advisor HRM	DHRMD, OPC, Treasury
		6.1.3 Develop guidelines for HIV and AIDS activities at all levels.	See 3 Year Work plan	August 2004	HIV/AIDS Advisor HRM	DFID, UNICEF, USAID, TUM, TSC, Local Government

<p>7.0 To eliminate sexual relationships between education staff and students; between staff from other sectors and students and between students themselves.</p>	<p>7.1. To promote and enforce rules and regulations prohibiting sexual relationships between education staff and employees from other sectors and students as well students themselves.</p>	<p>7.1.1 Lobby Law Commission in Liaison with the Department of Human Resource Management and the Ministry of Justice to prioritise the review of and the enforcement of rules and regulations governing sexual relationships between education staff and students.</p>	See 1.1.3	On-going	MOE HRM	DHRMD, Min. of Justice, TSC, TUM, Human Rights Bodies
		<p>7.1.2. Develop new mechanisms to deal with lack of enforcement of all regulations. (Cross-checking mechanisms involving PEAs and communities.)</p>	See 5.1.10	July - Oct, 2004	MOE HRM	DHRMD, Min. of Justice, TSC, TUM, Human Rights Bodies
		<p>7.1.3. Conduct workshops at district, zonal and cluster levels to sensitize educators, other education staff and communities to rules and regulations and enforcement.</p>	See 5.1.10	February - May, 2004	MOE HRM	DHRMD, Min. of Justice, TSC, TUM, Human Rights Bodies, Local Government

<p>8.0 Establish and use an effective and efficient system for monitoring and evaluating</p>	<p>7.2. To sensitive students, staff, parents and communities on various forms of sexual abuse and human rights.</p> <p>8.1 Monitor and evaluate the ongoing implementation of HIV/AIDS activities within human resource management; care and support, management and policies, recruitment and deployment and staff / student sexual relationships.</p>	<p>7.1.4. Sensitize pupils and communities on code of conduct of teachers.</p> <p>7.2.1. Work closely with relevant education and human rights NGOs to ensure that messages reach education stakeholders.</p> <p>8.1.1. Develop monitoring tools - using UNGASS and NAC guidelines</p> <p>8.1.2. Orient all members of staff on tools</p> <p>8.1.3 Conduct Monthly monitoring.</p> <p>8.1.4. Conduct Mid-term evaluation.</p> <p>8.1.5. Conduct Summative evaluation.</p> <p>8.1.6 Document and disseminate best practices.</p>	<p>See 5.1.10</p> <p>See 5.1.10</p> <p>\$ 72,000</p> <p>See 8.1.1</p> <p>See 8.1.1</p> <p>See 3 year Work Plan</p> <p>\$ 14,500</p> <p>\$14,500</p>	<p>July - Oct 2004 On-going</p> <p>July 2004 and on-going</p> <p>July 2004 and on-going</p> <p>July 2004 and on-going</p> <p>December 2005 - Jan 2006 October 2007</p> <p>July 2004 and on-going</p>	<p>HIV/AIDS advisor</p> <p>MOE HRM</p> <p>MOE HRM and Strategic plan steering committee</p> <p>MOE, Planning</p> <p>MOE, Planning</p> <p>MOE, Planning</p> <p>MOE, Planning</p> <p>EMIS,</p> <p>EMIS,</p> <p>EMIS,</p> <p>EMIS,</p>	<p>DHRMD, Min. of Justice, TSC, TUM, Human Rights Bodies, Local Government</p> <p>Local Government, TUM, TSC, DFID, USAID, UNICEF, GTZ, UNFPA, NSO, NAC</p> <p>Local Government, TUM, TSC, DFID, USAID, UNICEF, GTZ, UNFPA, NSO, NAC</p>
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Function 4: Guidance and Counselling

Goals	Objectives	Activities	Cost Estimates	Date of Implementation	Suggested Implementing Agencies	Suggested Collaborating Partners
1.0 Provide HIV and AIDS guidance, counselling and workplace education services which are universally available in the education sector.	1.1. To raise awareness on the importance of guidance and counselling in schools, colleges and the workplace.	1.1.1. Sensitisation campaign on radio, television, with posters. (3 months duration).	\$666,816	July - Oct, 2004	MOE/ GC	MOHP Health Ed. Unit, MBC Radio, TVM, UNESCO, UNAIDS, UNFPA
	1.2. To develop training programmes in guidance and counselling for teacher educators, teachers and other facilitators.	1.2.1. Develop guidance and counselling training programmes.	See 1.1.1	October, 2004	MOE /GC	NAC, GCYDC, UNESCO, UNFPA, MIE, Plan Intl, MOH, CDC
		1.2.2. Train school counsellors on counselling and Guidance.	See 1.1.1	July, 2004 and on-going	MOE /GC	TUM, USAID, UNESCO, UNFPA, NAC, GCYDC, MOH, TVM, MBC, MANA
		1.2.3. Provide MOE GC office with equipment to communicate with stakeholders. (Computer, printer, telephone, fax, etc).	See 3 Year Work plan	November, 2004 and on-going	MOE/ GC	
1.3. To establish links with partners.	1.3.1. Develop link with NAC and health sector to		\$132,600	July, 2004 and on-going	MOE/GC	NAC, GCYDC, UNESCO, UNFPA, MIE, Plan Intl,

	<p>Including NAC and health sector, to facilitate the introduction of VCT for all education sector personnel and learners.</p>	<p>establish VCT centres in all necessary places to ensure services are available to all.</p> <p>1.3.2. Work in collaboration with TUM to include VCT sensitisation in TUM HIV/AIDS activities.</p> <p>1.3.3 Purchase ARV and other OI drugs and distribute to Teachers and students who need them.</p>	<p>See 3 year Work Plan</p> <p>\$ 144,000</p>	<p>July 2004 and on going</p> <p>May, 2004</p>	<p>MOE/ GC</p> <p>MOE/ GC</p>	<p>MOH, CDC</p> <p>TUM, TSC, Action Aid, Care, Plan, UNESCO, UNFPA, UNICEF</p> <p>NAC, MOH, TUM, TSC</p> <p>OPC, DHRMD, Treasury, OPC</p> <p>NAC, DFID, Labour, USAID</p>
	<p>1.4 To promote accessible, effective and ethically sound VCT services that offer psychological support for all education sector personnel and learners.</p>	<p>1.4.1. Hire full time HIV and AIDS advisor for MOE GC to work with the GCO.</p> <p>1.4.2. Adopt / adapt guidelines for VCT for education personnel and learners. (From NAC guidelines.)</p>	<p>See HRM activities</p> <p>See HRM activities</p>	<p>January 2004 and on going</p> <p>July 2004-05-12</p>	<p>MOE/ GC</p> <p>MOE/ GC</p>	

		1.4.3. Print and distribute guidelines for learners counselling training programs.	See HRM activities	July 2004 and on going	HIV/AIDS Advisor	NAC, Labour, Supplies Unit, GCU	DFID, USAID,
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<p>2.0 Creation of environment in which learners, educators and other staff are supported in positive behaviour change to protect them against HIV and AIDS.</p>	<p>2.1. To sensitise students, staff, families and communities on the importance of providing a supportive and enabling environment.</p> <p>2.2. To form partnerships between education institutions and communities, NGOs, CSOs and other government ministries in the provision of guidance and counselling services.</p>	<p>2.1.1. Included in activity 1.1.1.</p>	See 2.2.5	July - Oct 2004	HIV/AIDS MOE GC	Advisor	NAC, UNFPA, TUM, Government	GCYDC, UNESCO, Local
		<p>2.2.1. Conduct Partnership Directory Study of existing partners.</p>	S 14,500	July, 2004	HIV/AIDS MOE GC	Advisor	UNESCO, USAID, UNAIDS, CIDA	DFID, UNFPA, GTZ
		<p>2.2.2. Produce a directory of partners.</p>	See 2.2.1	August, 2004	HIV/AIDS MOE GC	Advisor	CIDA	
		<p>2.2.3. Determine effective model of partnership. (in conjunction with 2.2.1.)</p>	See 2.2.1	September, 2004	HIV/AIDS MOE GC	Advisor	UNESCO, USAID, UNAIDS, CIDA	DFID, UNFPA, GTZ
		<p>2.2.4. Promote partnerships between education institutions and existing community resources (i.e. care and support, guidance and counselling) in line with National Community Participation</p>	See 2.2.1	September, 2004 and on-going	HIV/AIDS MOE GC	Advisor	UNESCO, USAID, UNAIDS, CIDA	DFID, UNFPA, GTZ
				November, 2004 and on-going				

		Strategy.	\$ 298,080	September, 2004 and on-going	HIV/AIDS MOE GC	Advisor	
	2.3. To mobilize resources for the development of guidance and counselling programmes in the education sector.	2.3.1. Mobilize and sensitize partners and beneficiaries. (To be done with 1.1.1., 1.2.2., 1.3.1.)	See 2.3.1	November, 2004 and on-going	HIV/AIDS MOE GC	Advisor	NAC, UNAIDS, HRC, CBOs, TUM, TSC
		2.3.2. Register programs on guidance and counselling in education.	See 2.3.1	November, 2004 and on-going	HIV/AIDS MOE GC	Advisor	NAC, UNAIDS, HRC, CBOs, TUM, TSC
		2.3.3. Develop proposals for unfunded programs.	See 2.3.1	July, 2004 and on-going	HIV/AIDS MOE GC	Advisor	NAC, UNAIDS, HRC, CBOs, TUM, TSC
		2.3.4. Source funding from Malawi Government and other donors.	See 2.3.1	July, 2004 and on-going	HIV/AIDS MOE GC	Advisor	NAC, UNAIDS, HRC, CBOs, TUM, TSC
		2.3.5. Develop financial / resource and process indicators.	See 2.3.1	May and June of each year	HIV/AIDS MOE GC	Advisor	NAC, UNAIDS, HRC, CBOs, TUM, TSC
		2.3.6. Monitor the use of finances / resources.	See 2.3.1	July, 2004 and on-going	HIV/AIDS MOE GC	Advisor	NAC, UNAIDS, HRC, CBOs, TUM, TSC
					July, 2004 and on-going	HIV/AIDS MOE GC	Advisor

<p>3.0. Adopt and/or adapt guidance and counselling policies that support a reduction in HIV and AIDS risk for learners and education personnel.</p>	<p>3.1. To extend and maintain good practice of extra-curricular, non-formal, leisure and recreational activities which promote positive behaviour change.</p>	<p>3.1.1. Adapt existing manual on behavior change (from NAC or elsewhere) and print. 3.1.2. Mobilize schools for extra curricular activities (sports, drama, music games, etc). 3.1.3. Monitor performance and progress of co-curricular activities in schools and communities.</p>	<p>See 3 Year Work plan</p>	<p>September, 2004 and on-going</p>	<p>HIV/AIDS MOE GC Advisor</p>	<p>NAC, UNAIDS, HRC, CBOs, TUM, TSC, PSI, Youth</p>
<p>3.0 Provide supportive and caring response to those infected and affected by HIV and AIDS.</p>	<p>3.1. To adapt a comprehensive policy framework to ensure safety in the education environment at all levels.</p>	<p>3.1.1. Work with NAC on development of multi-sectoral policy on guidance and counseling. 3.1.2 To incorporate issues of gender equity and equality in all education policies that</p>	<p>See 3 Year Work plan</p>	<p>September, 2004 and on-going</p>	<p>HIV/AIDS MOE GC Advisor</p>	<p>NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI</p>
			<p>See 3 Year Work plan</p>	<p>October, 2004 and on-going</p>	<p>HIV/AIDS MOE GC Advisor</p>	<p>NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI</p>
			<p>See 3 Year Work plan</p>	<p>July 2004</p>	<p>HIV/AIDS MOE GC Advisor</p>	<p>NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI</p>
			<p>See 3 Year Work plan</p>	<p>October, 2004 and on-going</p>	<p>HIV/AIDS MOE GC Advisor</p>	<p>NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI</p>
			<p>See 3 Year Work plan</p>	<p>August, 2004 and on-going</p>	<p>HIV/AIDS MOE GC Advisor</p>	<p>NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI</p>
				<p>August, 2004 and on-going</p>		<p>NAC, UNAIDS, HRC, CBOs, TUM,</p>

		relate to guidance and counselling	See 3 Year Work plan	August, 2004 and on-going	HIV/AIDS MOE GC Advisor	TSC, BLM, Youth, PSI
		3.1.3 Disseminate policy and guidelines to stakeholders.	See 3 Year Work plan	August, 2004 and on-going	HIV/AIDS MOE GC Advisor	NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI
	3.2. To adapt/adopt clear education sector guidelines and procedures which will enable education professionals infected by HIV/AIDS to lead a productive, fulfilling and dignified life.	3.2.1 Adapt and print policy guidelines on HIV/AIDS in the workplace.	See 3 Year Work plan		HIV/AIDS MOE GC Advisor	NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI
		3.2.2 Disseminate nutrition related information package utilizing local foods for educators and learners.	See 3 Year Work plan	August, 2004 and on-going	MOE GC and EMAS	NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI
		3.2.3 Advocate for multi-grade teaching or presence of a volunteer teacher when one teacher is absent.	See 3 Year Work plan	August, 2004 and on-going	MOE GC and DTED	NAC, UNAIDS, HRC, CBOs, TUM, TSC, BLM, Youth, PSI
	3.3. To establish partnerships among education institutions and communities to ensure the	3.3.1. Participate in national task for Orphans and Vulnerable Children.	See 3 Year Work Plan	August, 2004 and on-going	MOE GC and Strategic steering committee	NAC, UNAIDS, Human Rights NGOs, CBOs
		3.3.2. Organize	See 3 Year work	August, 2004 and		

	participation of youth, including orphans and other vulnerable children.	meetings for the PTAs and school committees to discuss orphans and vulnerable children, youth and HIV and AIDS. 3.3.3. Adopt/adapt IEC package for briefing community leaders and school communities.	Plan See 3 Year work Plan See 3 Year work Plan See 3 Year work Plan	on-going August, 2004 and on-going	MOE GC and Strategic steering committee and plan MOE GC and Strategic steering committee and plan MOE GC and Strategic steering committee and plan	NAC, UNAIDS, Human Rights NGOs, CBOs TSC, TUM , Labour, Local Government TSC, TUM , Labour, Local Government TSC, TUM , Labour, Local Government
4.0 Establish system to monitor and evaluate HIV and AIDS-related guidance and counselling	3.4. To establish clear mechanisms whereby education institutions and communities ensure the continuity of teaching and learning where pupil absenteeism is common and persistent. 4.1. Monitor and evaluate the ongoing implementation of HIV/AIDS activities within guidance and counselling.	3.4.1 Analyze and modify existing policies taking consideration of HIV and AIDS. 3.4.2 Disseminate modified policies with curriculum developers. Advocate for multi-grade teaching and presence of a teacher when one is absent.				NSO, NAC, USAID, DFID, GTZ, TSC, TUM , Labour, Local Government

<p>policies and programmes:</p>		<p>4.1.1. Conduct Monthly monitoring.</p> <p>4.1.2. conduct Mid-term evaluation.</p> <p>4.1.3. Conduct Summative evaluation.</p>				<p>NSO, NAC, USAID, DFID, GTZ, TSC, TUM, Labour, Local Government</p>
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Goals	Objectives	Activities	Cost Estimates	Date of Implementation	Suggested Implementing Agencies	Suggested Collaborating Partners
1. Provide dynamic and effective leadership and form constructive partnerships with all stakeholders in and out of government to deliver relevant and quality education in an HIV and AIDS-responsive system.	1.1. To ensure continued Ministerial political commitment to HIV/AIDS initiatives through regular information sharing. 1.2. To make all education stakeholders aware of the existence and contents of the strategic plan in order to promote broad sectoral ownership. 1.3. To work collaboratively with relevant government ministries, donors, NGOs, CSOs etc to coordinate activities and ensure consistency of planning and implementation.	1. 1.1. Hire full-time HIV/AIDS and Education Advisor at the MOE.	\$30,000/year	January, 2004	MOE	USAID, UNAIDS, UNFPA, UNICEF, NAC, MoHP
		1.2.1. Launch the Strategic Plan.	\$178,632	July, 2004	MOE HIV/AIDS and Educ. Advisor	MGYCS, GTZ, NORAD, UNAIDS, UNFPA, UNICEF, USAID, NAC, Law Commission
		1.3.1. Coordinate ongoing implementation of Strategic Plan.	See 1.2.1	July, 2004 and on-gong	MOE HIV/AIDS and Educ. Advisor	MGYCS, GTZ, NORAD, UNAIDS, UNFPA, UNICEF, USAID, NAC, Law Commission
		1.4.1. Conduct policy review of PIF, PRSP, National Education Act and other relevant documents.	See 1.2.1	July- Oct, 2004	MOE-HIV/AIDS Focal Person and HIV/AIDS and Educ. Advisor	

	1.4. To ensure that all education policies respond to the HIV/AIDS pandemic.					
2. Establish an HIV and AIDS responsive information system to inform planning and management at all levels.	2.1. To incorporate HIV and AIDS indicators in all existing EMIS activities.	2.1.1. Develop indicators to track HIV and AIDS impact on the education sector.	No cost	August, 2004	MOE EMIS Unit	DFID, GTZ, NORAD, UNFPA, UNICEF, UNESCO, USAID
		2.1.2. Incorporate indicators into current census.	\$1,500	August, 2004	MOE EMIS Unit	MGYCS, GTZ, NORAD, UNAIDS, UNFPA, UNICEF
		2.1.3. Collect data with annual census.	No cost	October, 2004 and annually November, 2004	MOE EMIS Unit	USAID, NAC
		2.1.4. Pilot test DEMMIS in one or more districts	\$6,000	December, 2004	MOE EMIS Unit	Law Commission
		2.1.5. Implement DEMMIS nationally.	\$30,000			
		2.2. To use indicators to review progress in the implementation of this strategic plan and respond accordingly.	2.2.1. Provide data to annual PIF and MTEF reviews in order to assess the need for new strategies revise policies and reallocate resources to mitigate the	No additional cost	Annually	MOE EMIS Unit

		Impact of HIV and AIDS on the education sector.				
3. Mobilize adequate resources (financial, human and material) for the implementation of the strategic plan.	3.1. To identify and indicate the financial resources needed to implement the HIV and AIDS strategic plan in a cost-effective way.	3.1.1. Cost initial activities.	See 3 Year Work plan	July, 2004	MOE Budget and Finance Office	MGYCS, GTZ, NORAD, UNAIDS, UNFPA, UNICEF USAID, NAC
	3.2. To assess the long-term recurrent financial implications of implementing the strategic plan.	3.2.2. Develop budget plan for submission to ensure a line item for HIV and AIDS.	See 3 Year Work plan See 3 Year Work plan	Annually	MOE Budget and Finance Office	
	3.3. To plan for the anticipated shortfall in human resources within the MOE. (See function 3 HRM, activity 3.1.1. and 3.1.2.)	3.3.1. Assess shortfall in human resources.	See 3 Year Work plan	September, 2004 To be updated annually	MOE, Planning and HRM MOE, Planning and HRM	MGYCS, GTZ, NORAD, UNAIDS, UNFPA, UNICEF USAID, NAC
		3.3.1. Develop strategy to meet human resources needs.	Costed Function (activity 3.1.2.)	in 3	September, 2004 and quarterly As determined by teams	MOE Department of Planning Technical Team Chairs

<p>4. Provide coordination and oversight of monitoring and evaluation of programmes and policies for all technical teams/functions.</p>	<p>4.1. Oversee implementation and monitoring of Strategic Plan for HIV/AIDS Intervention in the Malawi Education Sector Education.</p>	<p>4.1.1. Hold quarterly Steering Committee meetings to discuss progress on activity plans. 4.4.2. Hold regular Technical Team meetings. 4.1.1. Fund and provide technical assistance and oversight for the monitoring and evaluation of the four other functions.</p>	<p>\$ 3600/year</p> <p>\$20,000</p>	<p>On-going</p> <p>As determined by technical teams</p>	<p>MOE Dept of Planning</p>	<p>Technical Committee members</p>
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ANNEX 11

Technical Committees and Terms of References

Annex II Technical Committees

Committees, Team Members and Terms of Reference

The Ministry of Education established an HIV and AIDS Steering Committee and five technical committees. These bodies were formed for effective and efficient planning and management of HIV and AIDS activities.

A. The Steering Committee

The Steering Committee was formed with the intention of directing, determining, coordinating, monitoring and approving HIV and AIDS interventions in the education sector. Membership of the Steering Committee is composed of Government officials from MOE, Justice, HRMD, and Health, parastatals (MANEB, MIE, Universities and colleges), NGOs in the education sector and Civil Societies, Teachers Union of Malawi and cooperating partners (donors etc) in education. The Principal Secretary for Education chairs the Steering Committee; whereas the secretary is the Director of Education Planning. The Planning Division is the focal point on HIV and AIDS activities. Membership to this committee is not rigid. Thus the committee may include all public and private institutions and individuals that may have an interest in education.

Terms of Reference

The HIV and AIDS Steering Committee of the MOE shall:

1. Direct HIV and AIDS activities in accordance with the overall policy of the Government of Malawi.
2. Approve all HIV and AIDS projects/programs to be implemented in all educational institutions.
3. Monitor the Ministry's interventions on HIV and AIDS activities.
4. Assess the extent to which HIV and AIDS interventions are mainstreamed and complement the Ministry's policy of providing relevant and quality education that is equitable and accessible to all Malawians.
5. Ensure that HIV and AIDS interventions are holistic, comprehensive, and involve non-teaching personnel, teachers, lecturers, pupils/students, school committees and parent-teacher associations in the education sector.
6. Approve the proposed HIV and AIDS budget and technical support for activities in the education sector.

7. Source financial and technical support from cooperating partners.
8. Direct donor input in educational areas of critical need within the framework of the National HIV and AIDS Strategic Intervention.
9. Consolidate work plans of the technical committees for collaborative HIV and AIDS intervention to minimize, if not completely remove, duplication and redundancies.
10. Meet quarterly and/or whenever the chairperson deems it necessary for extra-ordinary meeting.

B. Five Technical Committees

The five functions were discussed and presented as issues for planning and agenda for action by five committees, namely, Curricula Development and Implementation, Teacher Education and Development, Human Resource Management, Counseling and Guidance and Planning and Budgeting. These committees had varied representation from both public and private institutions in the education sector. The institutions represented in the different committees were from education NGOs, like CRECCOM, Teachers' Union of Malawi, donor representatives that are locally found, universities, colleges, secondary and primary school representatives and Ministries of Health and Justice, the Department of Human Resource Management and Development and relevant Ministry of Education, Science and Technology departments. Some of the donor agencies facilitated the meetings in terms of funding transport, accommodation and board allowance of committee members. Membership to the five committees by different institutions is not confined to just one; members old and new are encouraged to attend meeting in all five committees.

i. Curricula Development and Implementation Technical Committee

Facilitator: DfID

Membership

Director of Education Methods Advisory Services – **Chairperson**

Malawi Institute of Education (two members) - **Secretary**

Malawi National Examinations Board

Principal of St Joseph Teacher Training College

Director of the Department of Teacher Education and Development

Principal of Domasi College of Education

Principal of Malawi College of Health Sciences

Head of Education, Chancellor College

Polytechnic – Education Section

Planning Division – MOE

Terms of Reference

Curricula Development and Implementation Technical Committee of the MOE in facilitating the work of the HIV and AIDS intervention Steering Committee shall:

1. Organize training sessions for writers of HIV and AIDS teaching and learning materials
2. Source materials on HIV and AIDS.
3. Convene stakeholders meetings to review HIV and AIDS Information Education Communication.
4. Liaise with different organizations involved in HIV and AIDS education (curricula) activities.
5. Coordinate HIV and AIDS curricula activities within the education sector.
6. Identify HIV and AIDS experts to conduct training for teachers on HIV and AIDS.
7. Identify experts to conduct training of Trainers programs on HIV and AIDS behavioral change interventions.
8. Identify trainees for the Training of Trainers HIV and AIDS program.
9. Monitor dissemination of HIV and AIDS information in the education sector.
10. Monitor development and dissemination of HIV and AIDS teaching and learning materials.
11. Facilitate evaluation of HIV and AIDS education programs and activities.
12. Meet every two months and/or whenever the chairperson deems it necessary for extra-ordinary meetings.

II. Teacher Education and Development Technical Committee

Facilitator: GTZ - German Technical Cooperation (MIITEP)

Membership

Director of Teacher Education and Development - **Chairperson.**

Representative of Teacher Education and Development - **Secretary.**

Mzuzu University

Malawi Institute of Education

Basic Education - MOE

Planning Division - MOE

USAID

UNFPA

Domasi College of Education

Terms of Reference

Teacher Education and Development Committee of MOE in facilitating the work of the HIV/AIDS intervention Steering Committee shall:

1. Identify a full time desk officer at MOE and desk officers at teacher education institutions.
2. Explore existing information Education and Communication (IEC) materials in HIV and AIDS education at all institutions and develop other relevant IEC.
3. Sensitize educators and communities to accept and support people living with HIV and AIDS.
4. Make accessible information on HIV and AIDS related issues.
5. Elicit the support of community based HIV and AIDS programs in training activities.
6. Incorporate community based HIV and AIDS programs in training programs.
7. Support existing co-curricular activities to implement existing HIV and AIDS Programs.
8. Monitor and facilitate the evaluation of the effectiveness, utility and impact of impact of HIV and AIDS training.
9. Costing and funding the integral part of each activity proposed.
10. Integrate guidance and counselling courses for Trainers of Trainees.
11. Provide relevant teaching/learning materials on HIV and AIDS.
12. Expand existing Education Management Information System to include relevant and up-to-date data.
13. Develop training schemes, which use interactive methodologies for professional staff.

14. Encourage people living with HIV and AIDS to share their experience with educators and learners.
15. To integrate HIV and AIDS education in the core courses.
16. Develop and enforce a profession code of ethics for educators.

iii. Human Resource Management Technical Committee

Facilitator: JICA

Membership

Chief Human Resources Management Officer - **Chairperson**
Teaching Service Commission
Teachers Union of Malawi
Administration - MOE-**Secretary**
Ministry of Justice
Department of Human Resources Management and Development
District Education Officer - Mangochi
Planning Division - MOE
European Union
Central West Education Division

Terms of Reference

Human Resource Management Committee of the MOE in facilitating the work of the Steering Committee shall:

1. Ensure that HIV and AIDS interventions are mainstreamed in all relevant Human Resource Management issues/actions.
2. Recommend HIV and AIDS interventions related to Human Resource Management.
3. Promote dialogue and liaise with relevant institutions to combat HIV and AIDS under Human Resource Management.
4. Review annual budgeting of HIV and AIDS interventions under Human Resource Management.
5. Direct financial and technical input for Human Resource Management activities related to HIV and AIDS issues.
6. Define the roles of Human Resource Management in combating HIV and AIDS, for example monitoring the effects on HIV and AIDS of Human Resource Management in identifying trainees as counselors.

7. Regularly and effectively monitor and facilitate the evaluation of HIV and AIDS interventions under Human resource Management.
8. Meet every two months and/or whenever the chairperson deems it necessary for extra-ordinary meeting.

iv. Guidance and Counseling Technical Committee

Facilitator: UNICEF (NORAD Funding)

Membership

Guidance and Counseling Section - MOE - **Chairperson**

Department of Basic Education, MOE

Education Methods Advisory Service

Chancellor - Education Department

Secondary School Representative

Malawi National Commission - UNESCO

CRECCOM

UNFPA

UNICEF - **Secretary**

Term of Reference

Guidance and Counseling Technical Committee of the MOE in facilitating the work of the Steering Committee shall:

1. Review and finalize goals, objectives and action plans for guidance and counseling on HIV and AIDS.
2. Define the role of guidance and counseling in the HIV and AIDS strategic plan.
3. Develop a mechanism for implementing of HIV and AIDS guidance and counseling.
4. Advocate for the provision of HIV and AIDS guidance and counseling opportunities and services in the education sector at all levels.
5. Fund raise for HIV and AIDS guidance and counseling programs.
6. Ensure implementation of guidance and counseling activities.
7. Meet monthly and/or whenever the chairperson, in consultation with the committee coordinator, deems it necessary for an extra-ordinary meeting.

v. Planning and Budgeting Technical Committee

Facilitator: USAID

Membership

Planning Division – MOE – **Chairperson**

Department of Human Resource Management and Development

National AIDS Commission

Chairpersons of the other four technical committees.

Human Resource Management and Development – MOE

USAID – **Secretary**

DfID

GTZ

JICA

UNAIDS

UNFPA

UNICEF

Terms of Reference

Planning and Budgeting Technical Committee of the MOE in facilitating the work of the Steering Committee shall:

1. Coordinate and provide guidance to HIV and AIDS and Education Working Groups.
2. Monitor and pace progress on HIV and AIDS and Education Working Groups.
3. Spearhead the Strategic Planning process.
4. Act as liaison between Steering Committee and the rest of the working groups.
5. Identify financial implications of suggested activities.
6. Strengthen the Education management Information System (EMIS) to incorporate HIV and AIDS responsive data and projections.
7. Ensure that the HIV and AIDS Strategic Plan and its implementation in education contains activities in the following areas: curricula

development and implementation; teacher education and development; human resource management; guidance and counseling and planning and budgeting.

8. Ensure that the implementation process is regularly and effectively monitored and evaluated.
9. Ensure that the Strategic Plan and the subsequent actions of technical committees are streamlined to minimize duplication and redundancies, while at the same time attempting to identify gaps.
10. Meet monthly and/or whenever the chairperson deems it necessary for an extra-ordinary meeting.