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UNESCO'S STRATEGY FOR HIV AND AIDS



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ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral Therapy
EDUCAIDS	UNAIDS Global Initiative on Education and HIV & AIDS
EFA	Education for All
FRESH	Focusing Resources on Effective School Health
HIV	Human Immunodeficiency Virus
IATT	Inter-Agency Task Team
IBE	International Bureau of Education
IIEP	International Institute for Educational Planning
ILO	International Labour Organization
MDG	Millennium Development Goal
MSM	Men who have sex with men
SADC	Southern Africa Development Community
TTISSA	Teacher Training Initiative for Sub-Saharan Africa
UBRAF	Unified Budget, Results and Accountability Framework
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations Children's Fund
UNODC	United Nations Office on Drugs and Crime
WFP	World Food Programme
WHO	World Health Organization

FOREWORD

There has been considerable progress across the world in responding to HIV and AIDS. Yet, the number of people newly infected with HIV continues to rise in many countries, and AIDS is still a leading cause of adult mortality. Treatment has become more widely available, but the costs for individuals and countries remain significant, and the sustainability of treatment is a serious concern.

This situation calls for sharper efforts to reverse the epidemic and to ensure that all those in need receive treatment and care. The stakes are high. If we fail to respond effectively to HIV and AIDS, we will fall far short of the Education for All objectives and the Millennium Development Goals. We will fail to meet our collective commitment to promoting human rights, gender equality and social justice.

UNESCO is fully engaged with meeting this challenge. Responding to HIV and AIDS has been and remains a high priority for action throughout all of our work, from Headquarters and in the field. HIV prevention lies at the heart of our efforts – to reduce the number of people newly infected with HIV and the human and financial costs of the epidemic.

All parts of the Organization are mobilized, working at the global, regional and country levels, through activities that are culturally appropriate, gender transformative and evidence-based. This cross-disciplinary approach is our signature strength, and it is well-suited for tackling HIV and AIDS.

This new *UNESCO Strategy for HIV and AIDS* builds on longstanding experience, and has been updated to reflect the need to accelerate Universal Access to HIV prevention, treatment, care and support and to adapt to an evolving epidemic and a changing global environment. This is our overarching goal. It is aligned with our action on gender equality and in Africa, and built into our overall Medium Term Strategy.


With this goal in mind, UNESCO will structure its work around three strategic priorities – to build country capacity for effective and sustainable education

responses to HIV, to strengthen comprehensive HIV and sexuality education, and to advance gender equality and protect human rights. Drawing on the Organization's unique mandate in education, the sciences, culture and communication, these priorities will guide our contribution to *UNAIDS Strategy and Outcome Framework 2011-2015*, in line with UNESCO's role within the revised UNAIDS Division of Labour.

Our goals are clear. We will provide greater emphasis to HIV prevention in the context of wider health promotion. We will seek to ensure that all girls and boys, young women and men, in and out of formal education, have access to comprehensive HIV education. We will strengthen the implementation and monitoring of education responses, and we will tackle the gender and human rights issues that hinder effective responses to HIV and AIDS.

We will continue to mobilise resources for our action through our regular budget and from extra-budgetary sources – such as the UNAIDS Unified Budget, Results and Accountability Framework and the private sector. We will seek also to build on these, by diversifying funding sources and by identifying additional resources across all sectors and at all levels of the Organization.

The result of an extensive consultative process, this Strategy reflects UNESCO's united and targeted vision of how we will contribute most to prevent the further spread of HIV, to protect individuals, families and societies from the impact of AIDS, and to advance human rights and dignity for all.



Irina Bokova,
Director-General



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UNESCO'S GOAL AND STRATEGIC PRIORITIES

Goal

The overarching goal of the UNESCO Strategy for HIV and AIDS is Universal Access to HIV prevention, treatment, care and support.

UNESCO and Universal Access

UNESCO's goal of Universal Access is in line with UN-wide policy as adopted by the UN General Assembly Special Session on HIV/AIDS (UNGASS) in 2001 and reaffirmed at the General Assembly's High Level Meeting in 2006.

Universal Access is critical to achieve the HIV target for MDG 6, which is to halt and reverse the spread of HIV by 2015. Achievement of the MDGs on education (MDG 2), maternal and child health (MDG 4 and MDG 5), poverty (MDG 1) and environmental sustainability (MDG 7) also depends on successful HIV prevention, treatment and mitigation.

The Outcome Statement of the September 2010 MDG Summit highlights 'redoubling efforts to achieve Universal Access to HIV prevention, treatment, care and support services as an essential step in achieving MDG 6 and as a contribution to reaching the other MDGs'.

Universal Access is critical to achieve the HIV target for MDG 6, which is to halt and reverse the spread of HIV by 2015. Achievement of the MDGs on education (MDG 2), maternal and child health (MDG 4 and MDG 5), poverty (MDG 1) and environmental sustainability (MDG 7) also depends on successful HIV prevention, treatment and mitigation.

Strategic Priorities

To achieve its goal and address the challenges outlined in Section 2, UNESCO will structure its work in the coming years around the following strategic priorities:

- Build country capacity for effective and sustainable education responses to HIV.
- Strengthen comprehensive HIV and sexuality education.
- Advance gender equality and protect human rights.

UNESCO will take forward this strategy as a UNAIDS cosponsor and through its core functions of leadership and advocacy, policy and programmatic guidance, technical support, strategic information, convening and coordination. The strategy will be implemented through the collective actions of UNESCO's sectors, institutes, regional bureaux and field offices and in collaboration with a range of partners.



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PROGRESS AND CHALLENGES

HIV and AIDS

In the last decade, the HIV response has been transformed by increased political commitment and a dramatic increase in resources. Increased commitment is reflected in the 2001 UN General Assembly Declaration of Commitment on HIV/AIDS, the 2006 Political Declaration, and commitments to the Millennium Development Goals and to Universal Access to HIV prevention, treatment, care and support.

Global and country action is making a difference. In 33 countries, including 22 in sub-Saharan Africa, new infections fell by over 25% between 2001 and 2009. Improved access to services to prevent mother-to-child transmission has reduced the number of infants infected with HIV from 500,000 in 2001 to 370,000 in 2009. New interventions and emerging technologies, including male circumcision, microbicides and pre-exposure prophylaxis, have the potential to further enhance HIV prevention efforts, if implemented at sufficient scale.

Treatment access has expanded significantly, and 5.2 million people in low- and middle-income countries now receive antiretroviral therapy (ART). This has contributed to a decrease in AIDS-related deaths, from 2.2 million in 2004 to 1.8 million in 2009.¹ Efforts are underway to simplify the way treatment is provided and bring down treatment costs in order to accelerate scale-up of access to ART. There is also growing evidence that increasing the availability of treatment can contribute to HIV prevention.

However, major challenges remain. Globally, 33.3 million people are living with HIV, including 2.5 million children. An estimated 2.6 million people were newly infected with HIV in 2009. Sub-Saharan Africa, with an estimated 68% of all people living with HIV, remains the most severely affected region, but HIV incidence is increasing in some countries, notably in Eastern Europe and Central Asia. Young people aged 15-24 represent 40% of new infections, and many young people still lack access to the

¹ UNAIDS 2010 Global AIDS Report

UNESCO's contribution focuses on the pivotal role of education in the response to HIV and in achieving Universal Access. This includes learning in formal educational settings, non-formal educational activities, and informal education and communication through mass media and community channels.

information, skills and services required to prevent HIV infection. Young women are especially vulnerable to HIV in sub-Saharan Africa.

New infections continue to outpace the scale-up of treatment – for every person who starts treatment, two are newly infected with HIV – and 10 million people who need treatment do not have access to ART. The number of children orphaned as a result of HIV continues to increase.

There is a need to improve and scale up HIV prevention, including access to new and proven prevention interventions, and to provide simpler and less costly treatment if countries are to meet their Universal Access targets. As of 2010, four in five low- and middle-income countries were not on track to meet these targets.² At the same time, countries' ability to expand prevention, treatment, care and support is threatened by declining investment in HIV, in part as a result of the global economic downturn

and in part because of shifting donor and national priorities.

HIV epidemics are diversifying and becoming more complex, as new epidemiological patterns emerge. Sexual transmission is growing in significance in Eastern Europe and Central Asia, where the epidemic has until recently been largely concentrated among people who inject drugs. In sub-Saharan Africa, where heterosexual transmission has been predominant, there is evidence of elevated HIV risk among men who have sex with men (MSM) and people who inject drugs. Sex work remains central to epidemics in a number of countries in Asia and sub-Saharan Africa, and the overlap between sex work and injecting drug use is a major factor in HIV transmission in the worst affected countries of Eastern Europe and Central Asia.

Better evidence is critical to ensure that national responses adapt to changing epidemic priorities. UN and other development partners also need to adapt, to provide effective support for region- and country-

² Progress in implementation of the Declaration of Commitment and Political Declaration, Report of the Secretary-General 1 April 2010

specific responses. The “Know Your Epidemic, Know Your Response” approach, which UNAIDS is promoting and UNESCO supports, aims to assist countries to gain a better understanding of their epidemics and to tailor their responses accordingly, as well as to ensure that UN and other development partners provide appropriate support.

Stronger political commitment and leadership are also critical since many of the barriers to tackling

the epidemic are political, social and cultural. Stigma and discrimination, gender inequality and gender-based violence, and punitive and counter-productive laws continue to impede effective HIV responses. Greater efforts must be made to reduce stigma and discrimination, protect human rights, advance gender equality and promote the involvement of those most affected by HIV.

The role of education in the HIV response

As the UN specialised agency for education, UNESCO’s contribution focuses on the pivotal role of education in the response to HIV and in achieving Universal Access. This includes learning in formal educational settings, non-formal educational activities, and informal education and communication through mass media and community channels. But UNESCO also recognises that education alone cannot bring about the changes needed to reverse and halt the epidemic. Education must be complemented by efforts to address the social and cultural factors that influence people’s ability to make healthy choices and adopt safe behaviours and action across all sectors of society.

Education is central to preparing young people for adult life and offers important protection against HIV. The Global Campaign for Education has estimated that universal primary education alone would prevent 700,000 new HIV infections each year. The achievement of Education for All (EFA) is therefore fundamental to reduce HIV-related vulnerability and risk. UNESCO and its partners are working with countries to achieve EFA. There has been

good progress – 47 of 163 countries have achieved universal primary education and 20 countries are on track to achieve this by 2015.³ The number of primary school age children not in school has fallen by 33 million, but in 2007 at least 72 million were still not in school. Moreover, despite improvements in girls’ enrolment, 24 countries are unlikely to achieve gender parity at primary or secondary level by 2015.

3 EFA Global Monitoring Report 2010

The importance of education was affirmed by the 2010 Millennium Summit, which concluded that ‘Ensuring children’s access to school is an important aspect of HIV prevention, as higher levels of education are associated with safer sexual behaviour, delayed sexual debut and overall reduction in girls’ vulnerability to HIV’.

Education can:

- Provide children and young people with the knowledge and skills they need to make safer and healthier choices.
- Contribute to delay in sexual debut and reduce risk behaviour among those who are already sexually active.
- Promote awareness of the risks of alcohol and drug use, in particular the HIV risk associated with unsafe injecting drug use.
- Provide young MSM with the knowledge and skills they need to make safe and healthy choices about sex.
- Address the social and structural factors that facilitate the spread of HIV, including lack of opportunity and gender inequality.
- Reduce the vulnerability of girls to HIV by improving their self-esteem and economic prospects. The higher the level of education the greater the benefits – girls who complete secondary school have a lower risk of HIV infection and are more likely to practise safer sex.
- Promote understanding and tolerance and reduce stigma and discrimination towards people living with HIV as well as marginalised and most-at-risk populations.

At the same time, there is growing recognition that EFA cannot be achieved without addressing HIV and AIDS. HIV keeps children out of school and has an adverse effect on learning. The EFA Global Monitoring Report 2010 highlighted children most at risk of educational marginalisation. These include children who are living with HIV, who have been orphaned and who live in households affected by HIV.

Strengthening the education response

While many countries have developed education sector HIV and AIDS policies and strategies, available evidence suggests that progress with implementation has been limited:

- A recent evaluation of EDUCAIDS, the UNAIDS Global Initiative on Education and HIV and AIDS, highlighted the need to mainstream HIV in education policies and programmes and to address implementation bottlenecks.
- A joint SADC, UNESCO and UNICEF review in the Southern Africa Development Community region found that national education sector HIV policies and strategies exist but implementation has been weak due to lack of leadership, capacity and resources.
- A UNAIDS Inter-Agency Task Team (IATT) on Education review of lessons learned identified similar challenges, recommending more support for implementation, as well as closer monitoring and evaluation, of education sector HIV responses.

Greater support for countries to address the implementation gap, and in particular to build the capacity of the education sector to deliver on policies and strategies at all levels, is essential. Countries worst affected by HIV also need support to address the impact of the epidemic on the education sector. HIV and AIDS account for up to 77% of teacher shortage in countries with high rates of HIV.⁴

Concerted efforts are also required to increase the coverage, quality and scope of HIV education, in order to maximise its potential impact on the epidemic.

Globally, while knowledge about HIV and safer sexual behaviour among young people has improved, only 34% of young people have comprehensive and accurate knowledge of HIV.⁵ Coverage must be expanded to ensure that all children and young

people have access to accurate information and high quality HIV education to enable them to develop the requisite knowledge, attitudes and skills before they reach an age where some of them might engage in risk taking behaviours.

This includes improving access to HIV information and promoting behaviour change for children and young people who are not in school and through non-formal education programmes. Use of new media and technologies, including the internet, provides an important opportunity to reach and influence young people, in particular those who are not in formal education. UNESCO can draw on the combined expertise of its Education and Communication and Information Sectors to maximise the potential of new media and technologies.

Coverage with HIV education in secondary schools has improved, but coverage with age-appropriate education in primary schools is less consistent. The needs of students in tertiary education, including teacher training institutions, have been poorly addressed. UNESCO-commissioned studies of HIV-related knowledge and risk behaviour at training colleges in Zambia and Ethiopia in 2008 found that misinformation and misconceptions about HIV were common among students and that transactional sex, multiple sexual partnerships, sexual exploitation of female students and sexual relationships between staff and students placed students at high risk of HIV infection. Support to plan and implement HIV interventions in tertiary educational institutions is critical.

In many countries there is also a gap between knowledge and practice and some young people who do have accurate information about HIV engage in risk behaviours. Education responses also need to address the factors that contribute to this, including peer pressure, youth culture and low risk perception.

⁴ UNESCO. *Education counts towards the Millennium Development Goals*. 2010.

⁵ UNAIDS 2010 *Report on the Global AIDS Epidemic*.

Promoting comprehensive HIV and sexuality education

Well planned and delivered HIV and sexuality education increases knowledge, develops skills, generates positive attitudes and can modify or reduce risk taking behaviour.

But poor quality curricula, lack of properly trained teachers and inappropriate teaching methods and learning materials, among other factors, limit the effectiveness of HIV education. HIV education that

focuses on providing information and uses traditional teaching methods often fails to engage young people and to address attitudes, skills and behaviours. A study conducted by the Southern and East Africa Consortium for Monitoring Educational Quality (SACMEQ) (see below) concluded that there is an urgent need to improve delivery of HIV prevention education in schools.

Delivery of HIV Education ... Room for Improvement

The SACMEQ III Project 2007-2010 involved 15 education ministries, 2,779 schools, 8,045 teachers and 61,421 pupils in Grade 6 (average age 13.5 years) in East and Southern Africa. Teachers and pupils were tested on their knowledge of HIV and AIDS. Respondents were categorised as having 'minimal' knowledge if they had mastered at least 50% of the official curriculum and 'desirable' knowledge if they had mastered at least 75%. In most countries, only 20-40% of pupils had minimal knowledge and less than 10% had desirable knowledge. Almost all teachers had minimal knowledge and 80-95% in most countries had desirable knowledge. These findings, which highlight the difference in knowledge among teachers and pupils, underscore the urgent need to improve delivery of HIV education in schools.

Effective HIV and sexuality education requires highly skilled and motivated staff. Teachers need appropriate training, skills in the use of participatory methods, and ongoing support. More attention must be paid to ensuring that pre-service training provides teachers with the requisite knowledge and skills and to assessing how teachers are delivering HIV education and addressing the reasons for poor delivery.

Children and young people need good quality HIV education in all epidemic settings. In practice,

however, school curricula often consider HIV in isolation, and prevention education focuses on heterosexual transmission of HIV with little reference to other risk behaviours. Education on HIV and drug prevention programmes are not always integrated. When they are, HIV prevention does not always address harm reduction, which is viewed by some as encouraging drug use among young people, leaving young injecting drug users exposed to HIV transmission. Legal restrictions often deny access to services for young people who already use drugs.

UNESCO Support for HIV and Drugs Education

Many drug users, including injecting drug users, are young people. The average age for the first use of heroin or other drugs is below 24 years in most settings, and studies show that the average age for the first use of injection is decreasing. UNESCO's work on HIV and drugs, as a key component of comprehensive HIV education, focuses on:

- Educating young people before they may start using drugs to equip them with information and skills to help them make safer and less harmful choices.
- Educating young people who use drugs but do not inject them about the risks related to drug use in general and injecting drug use in particular, and informing them about harm reduction strategies in case they start to inject drugs.
- Informing young injecting drug users about harm reduction strategies and facilitating their access to harm reduction services and ART for those who are living with HIV.

UNESCO has already been supporting key interventions in these areas in regions where the main route of transmission is injecting drug use, including Asia Pacific, Eastern Europe and Central Asia.

A fundamental shift is also required to ensure that HIV education is incorporated within wider sexuality education and health promotion. This should ensure that HIV education addresses issues such as relationships, trust, peer pressure, power disparities, gender norms and gender inequality,

pregnancy, other sexually transmitted infections, same sex relationships, drug use and social norms that increase HIV risk and vulnerability, as well as stigma and discrimination associated with HIV and with those who engage in risk behaviours.

Latin American and Caribbean Commitment to Comprehensive Sexuality Education

In August 2008, health and education ministers from Latin America and the Caribbean signed an historic declaration in Mexico City. The Ministerial Declaration provides a mandate for school-based sexuality and HIV education in the region, calling for comprehensive sexuality education to encompass human rights, ethical, biological, emotional, cultural and gender aspects and respect for diversity of sexual orientations and identities and to be a core area of instruction in primary and secondary schools.

Comprehensive HIV and sexuality education is priority for UNESCO and the UN. This is strongly reflected in the UNAIDS Strategy and the Outcome Framework priority area of empowering young people to protect themselves from HIV⁶, which includes the goal of addressing comprehensive knowledge about HIV, particularly through sexuality education, and the recent evaluation of EDUCAIDS, which highlighted the need for a stronger emphasis on human rights and gender issues in education sector responses.⁷ It is also reflected in the UNAIDS Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV, which advocates for and supports access to country-level comprehensive sexuality education that promotes gender equality and human rights.

The 2010 report of the UN Special Rapporteur on the right to education also focused on comprehensive sexuality education as a means to realising other human rights and highlighted the importance of comprehensive sexuality education in view of the threat of HIV. The report also emphasised the need for sexuality education to be framed within a solid gender and diversity perspective.



6 UNAIDS Outcome Framework Business Case Empowering Young People to Protect Themselves from HIV (Draft March 2010). The goal of this priority area of the Outcome Framework is to: by 2015 reduce new HIV infections among young people (15-24) by 30% by providing comprehensive sexual and reproductive information, skills, services and commodities in a safe and enabling environment tailored to the specific country and epidemic context.

7 UNESCO et al (2009). *International Technical Guidance on Sexuality Education: An Evidence-informed Approach for Schools, Teachers and Health Educators*.

Addressing gender equality and human rights

Effective responses to HIV and AIDS require greater efforts to promote gender equality and human rights and to tackle stigma and discrimination, both through education and more widely. More specifically, greater attention must be given to promoting tolerance

of cultural and sexual diversity, positive attitudes towards people living with HIV and the specific rights and needs of children and young people who are living with HIV.

Gender equality is one of UNESCO's two global priorities for 2008-2013 and the Gender Equality Action Plan has been approved by UNESCO's Executive Board. Gender equality is central to all areas of UNESCO's work, including its work on HIV and AIDS.

Action to address gender and human rights issues needs to take account of the way in which culture influences people's understandings of health, behaviours, relationships and individual and social choices. Culturally appropriate approaches can engage individuals and communities to catalyse change, including changes in gender norms and

attitudes towards people living with HIV. Cultural diversity means, however, that there is no 'one size fits all' approach, and culturally-appropriate approaches should reflect internationally agreed principles of respecting and promoting cultural diversity.

Women and girls and HIV

- The HIV epidemic has taken a devastating toll on the lives of young women, who account for 66% of infections among young people worldwide.
- HIV is the leading cause of death and disease among women of reproductive age (15-49 years) worldwide.
- In nearly all countries in sub-Saharan Africa and certain Caribbean countries, the majority of people living with HIV are women, especially girls and women aged 15-24 years.
- One half of people living with HIV globally are women and 76% of all HIV-positive women live in sub-Saharan Africa.
- Women living with HIV are more likely to experience violence due to their HIV status.

Source: Fact sheet on women, girls, HIV and education prepared by UNESCO for the 2011 Commission on the Status of Women.

Gender inequality and gender-based violence⁸ affect the educational and economic prospects of women and girls and increase their HIV risk and vulnerability. Efforts to promote gender equality, reduce gender-based violence, and realise the rights of women and girls are central to the HIV response, especially in countries where women are disproportionately affected by HIV and AIDS. Gender norms and expectations about male behaviour reinforce gender inequality but also increase the HIV risk and vulnerability of men and boys. And in regions where the epidemic is driven by unsafe sex between men and unsafe injecting drug use, men are disproportionately affected by HIV.

Gender inequality and gender-based violence affect the educational and economic prospects of women and girls and increase their HIV risk and vulnerability

National responses must, therefore, be gender transformative, empowering women and girls and working with men and boys to address harmful gender norms and to change attitudes and practices that increase HIV risk and vulnerability of both sexes.

National responses must also be based on human rights principles and standards. Despite the existence of protective laws and policies, discriminatory practices persist, including the exclusion of children living with HIV from school, and HIV-positive children and young people continue to experience stigma and discrimination from teachers and their peers. In a recent UNESCO study of the educational needs of learners living with HIV, every HIV-positive child reported negative consequences of others knowing

⁸ See http://data.unaids.org/pub/FactSheet/2010/20100302_fs_womenhiv_en.pdf

their HIV status. Greater efforts are required to eliminate stigma and discrimination in educational settings, including enforcing laws and policies that protect learners and educators from discrimination and mobilising the wider society. Empowering youth and student associations through peer initiatives and enabling local policy-makers to adequately respond to challenges at the municipal level are important entry points.

The education response must also adapt to meet the needs of the 2.5 million children and young people worldwide who are living with HIV. HIV-positive children and young people have specific HIV prevention, treatment, care and support needs. As they grow older, young people living with HIV need information to enable them to make safe and healthy choices about relationships, sex and reproduction, but this is not consistently addressed in HIV prevention education. HIV education also needs to incorporate treatment issues, so that young people know about HIV counselling and testing and understand the importance of treatment adherence and continued protective behaviours.



Comprehensive HIV and sexuality education can be an entry point for a healthy school approach and wider health promotion efforts. Health promotion and school health can also be an entry point for HIV education. Educational settings can contribute to improving health as well as to protecting human rights, advancing gender equality and tackling stigma and discrimination. Efforts to promote school health and to integrate health promotion within education must be stepped up.

Schools have also demonstrated that they can play an important role in care and support for infected and affected children and young people, especially those who lack family support. But lessons learned need to be applied more widely and schools need to develop stronger links with health and social welfare services. Non-formal education and educational efforts outside the classroom also continue to provide an important context for expanding access to good quality educational opportunities on HIV prevention for young people.

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UNESCO'S CONTRIBUTION

UNESCO contributes to the HIV response through the collective actions of its sectors, institutes, regional bureaux and field offices and in collaboration with a range of partners. Partnerships, with UNAIDS and UN agencies, multilateral and bilateral donors, national governments, international and national civil society organisations, and the private sector, are central to UNESCO's work on HIV and AIDS.



UNESCO's principles

UNESCO's work on HIV and AIDS is guided by the following principles:

- **Human rights** – UNESCO is guided by international human rights principles and standards. UNESCO takes a human rights-based approach that emphasises equality, non-discrimination, participation and accountability, and works to reduce stigma and discrimination, promote tolerance and uphold the rights of people affected by HIV and of those who are particularly vulnerable to HIV.
- **Gender equality** – UNESCO supports gender-transformative programming that advances gender equality and addresses gender roles, cultural norms and power structures which increase the vulnerability of women and men to HIV.
- **Country ownership** – UNESCO is committed to the principles of national ownership, harmonisation and alignment, in line with the Paris Declaration on Aid Effectiveness and the UNAIDS Strategy 2011-2015. UNESCO will continue to work with country partners, to align action with national priorities, plans and processes, and to support the 'Three Ones' – one national plan, one national coordinating authority and one national M&E framework for HIV and AIDS.
- **Evidence** – UNESCO supports approaches that are scientifically accurate and grounded in evidence, and the Know Your Epidemic, Know Your Response approach. UNESCO will continue to generate strategic information, encourage innovation and support countries to implement proven and evidence-informed HIV responses that are appropriate to the epidemic context.
- **Involvement and inclusion** – UNESCO promotes the involvement of all sectors of society, including civil society, the media, the private sector, most-at-risk populations, and people living with and affected by HIV. UNESCO is committed to Greater Involvement of People Living with HIV and the framework for Positive Health, Dignity and Prevention, which emphasise the rights and responsibilities of people living with HIV and their leadership role in prevention and treatment and in addressing legal and policy barriers.
- **Cultural appropriateness** – Culture influences people's understanding of health, relationships, beliefs, behaviours and the way they understand HIV and AIDS. UNESCO promotes culturally appropriate approaches to HIV that are relevant to the local context and draw on communities' cultural resources. Respect for local culture is essential to meaningful participation of affected populations, and participation is essential to ensure that interventions are culturally appropriate. Culturally appropriate education can also challenge harmful traditional practices and help to develop alternative and safer practices.
- **Participation of young people** – Young people need knowledge, skills and a supportive environment to make safe, healthy choices in their lives. UNESCO targets actions to meet the needs of young people and works with organisations of young people and initiatives that promote young people's involvement in HIV policy and programmes. Participation focuses on young people who are most at risk and young people living with HIV, including support for them to address stigma and discrimination.

Collective action within UNESCO

All of UNESCO's sectors contribute to the HIV response, through sector-specific strategies and collaboration across sectors.

UNESCO's work across sectors is coordinated through the Intersectoral Platform on HIV and AIDS, which will be further strengthened in 2012-2013, and is overseen by the UNESCO Global Coordinator for HIV and AIDS with support from the UNESCO Focal Point on HIV and AIDS. In 2010, the Intersectoral Platform produced a practical guide on the essential characteristics of effective HIV prevention, with contributions from UNESCO's Communication and Information, Culture, Education, Natural Science and Social and Human Sciences Sectors and the Division for Gender Equality.

The roles of each sector are:

- **Communication and Information Sector** – supports the capacity of media, communication and information professionals and institutions to strengthen professional journalistic reporting standards and access to credible, scientifically accurate information on HIV and AIDS, and to develop interactive multi-media tools and youth-friendly material.
- **Culture Sector** – promotes culture and intercultural dialogue as conditions and assets for successful HIV responses grounded in the principles of respect for human dignity, cultural diversity and participation in policy and programming.
- **Division for Gender Equality, Office of the Director-General** – supports the integration of a gender equality perspective into all stages of the programme cycle, from conceptualisation to evaluation. The Division builds relevant capacity, seeks to ensure UNESCO's participation in inter-agency efforts around gender and HIV-related work and provides policy advice to Member States including on gender equality and HIV and AIDS.
- **Education Sector** – supports comprehensive education sector responses to HIV and AIDS, with a particular focus on HIV prevention with young people, including through EDUCAIDS and the UNAIDS IATT on Education.

In 2010, the Intersectoral Platform produced a practical guide on the essential characteristics of effective HIV prevention, with contributions from UNESCO's Communication and Information, Culture, Education, Natural Science and Social and Human Sciences Sectors and the Division for Gender Equality.

- **Natural Science Sector** – promotes accurate and up-to-date scientific content, supports institutions of higher learning to integrate HIV and AIDS in their scientific programmes and promotes research capacity-building for young scientists.
- **Social and Human Sciences Sector** – supports policy-oriented research and the development of policy recommendations for municipal authorities and seeks to empower young people to address HIV-related discrimination and human rights and the structural causes of vulnerability.

UNESCO Sectors Implement a Range of HIV and AIDS Programmes and Projects

The **Communication and Information Sector** provides technical support to broadcast and media training institutions, university departments and libraries. It supports local content creation through regional peer review workshops and training for young TV producers, facilitates free distribution of quality TV items among broadcasters, and promotes quality professional reporting and networking between broadcasters and national AIDS prevention institutions. It also advocates for the use of new information technologies and open educational resources to strengthen HIV prevention efforts and prevent stigma and discrimination. Resources developed include a Model Curriculum for Journalism Education adopted by 57 training institutes in 45 countries, a Handbook for TV Trainers and Producers on HIV and AIDS and an interactive computer game. The sector also works in partnership with the media. For example, the Asia-Pacific Institute for Broadcasting Development (AIBD) has developed a broadcasters training module on HIV and AIDS, which is being used to train TV producers and trainers among its 26 members and 70 affiliates as well as broadcasting unions and associations in the Africa and Asia-Pacific regions. The Sector also supports national, local and school media capacity-building for public sensitisation on HIV and AIDS, behaviour change communication for HIV prevention among young people and reduction of HIV-related stigma and discrimination in Central Asian countries and the Russian Federation.

The **Culture Sector** conducts research on cultural aspects of HIV and AIDS, supports efforts to mainstream culturally-appropriate approaches in national HIV policy and programming and disseminates information on socio-cultural issues – for example, how HIV affects migrant women and the role of religious leaders in fighting stigma and discrimination. The Sector also promotes the use of arts and creativity in HIV programmes and supports the development of culturally appropriate materials and programmes. This has included a series of toolkits and theatre manuals on using arts and creativity to address HIV-related discrimination, and radio programmes on HIV, drugs and trafficking for ethnic minority communities in the Greater Mekong region.

The **Division for Gender Equality** has developed a series of issues papers that seek to improve understanding of structural issues affecting women's and girls' vulnerability to HIV and a gendered response. In 2009, the Division for Gender Equality and the Culture Sector, in collaboration with the Social Science Research

Council, published the online version of *The Fourth Wave: Violence, Gender, Culture and HIV in the 21st Century*, a publication which addresses the social, cultural and economic factors that are driving the epidemic.

The **Education Sector** is providing a range of support for comprehensive education sector responses to HIV and AIDS in 80 countries. In Pakistan, for example, UNESCO is supporting the Ministry of Education to include HIV and AIDS education in the National Education Policy, as well as advocating with policy-makers and curriculum developers for the integration of HIV prevention education in school curricula. This work is part of the Joint UN Programme on Health and Population and is being undertaken by UNESCO in partnership with UNICEF, UNFPA and WHO. In Kazakhstan, UNESCO has supported the Ministry of Education and Science and the national in-service teacher training institute to develop resources on HIV prevention education for teachers. Some of these materials have been adapted for teachers in the neighbouring countries of Kyrgyzstan, Tajikistan and Uzbekistan and an e-course using these materials is currently in development. And in Vietnam, UNESCO has been working with other UNAIDS cosponsors to strengthen the Ministry of Education and Training, support strategic planning and inclusion of HIV and sexuality education in national strategy documents as well as monitoring and evaluation of HIV and AIDS education, and advocate for inclusion of HIV prevention in the education sector.

In East and Southern Africa, support is being provided to 17 countries through two specific programmes.

- The UNESCO-OPEC Fund for International Development programme aims to: enhance the evidence base on education and HIV; develop partnerships for action at global, regional and national level; support intensified implementation of education sector responses at country level; and deliver high quality technical support to countries. Following rapid assessments, action is being taken to strengthen mainstreaming of HIV and AIDS within broader education sector policies and strategies, improve monitoring and evaluation of the education sector's effectiveness and strengthen sexuality education in HIV education programmes.
- The Virginio Bruni Tedeschi Foundation funds the Building Knowledge, Skills and Hope: HIV and AIDS Education for African Children programme

in Angola, Lesotho, Namibia and Swaziland. The programme aims to increase the coverage and quality of HIV education, improve the availability of technical support, and enhance partnerships and lessons learned. By early 2011, it had reached 4,024 schools, 17,236 teachers and 453,913 learners with activities including teacher training and psychosocial support for educators and learners living with HIV.

The **Natural Science Sector** works in collaboration with the UNESCO Regional Bureau for Science and Technology in Africa to mainstream HIV into university curricula, focusing on science and engineering faculties, and to eliminate stigma and discrimination in universities. Over 150 university lecturers have been trained and a generic HIV integration course module has been developed for universities in sub-Saharan Africa in addition to national integration course modules for Botswana, Ghana, Kenya and Rwanda. The sector also supports Advanced Summer Schools in Africa to build research capacity and promote collaboration between young research scientists in

Africa and other regions. Future work will continue to focus on building capacity in virology, immunology and genetics, disseminating advances in HIV research and mainstreaming HIV within university programmes, and support for youth organisations in Small Island Developing States.

The **Social and Human Sciences Sector** has worked through the UNESCO Bangkok and Namibia Offices to build the capacity of municipal authorities to address stigma and discrimination. Several hundred municipalities were involved in workshops held in the Philippines, Thailand, Sri Lanka and Papua New Guinea. Policy reviews are being conducted in Namibia and South Africa to inform the design and implementation of advocacy strategies targeting municipalities and other local actors. The Sector has also encouraged peer-to-peer initiatives to empower young people to address stigma and discrimination through the UNESCO Lima, Moscow and Quito Offices. Methodologies and workshops are being developed and used in Belarus, Moldova, Ecuador, Bolivia and Peru.

UNESCO's International Institute for Educational Planning (IIEP) and International Bureau of Education (IBE) make an important contribution, through technical assistance, capacity-building, support for development of HIV curricula, analysis of good practice and development of practical guidance, as well as through the UNESCO HIV and AIDS Education Clearinghouse.

The IIEP focuses on education planning in the context of HIV and on analysis of the impact of the epidemic on education systems and has developed a series of training modules for education ministries on integrating HIV into education planning. The IBE focuses on technical assistance to Member States and capacity development on curricula for primary and secondary education and teacher training (pre-service and in-service).

UNESCO's HIV and AIDS Education Clearinghouse

The HIV and AIDS Education Clearinghouse provides support to ministries of education, education professionals, development agencies, civil society organisations, researchers and UNESCO field staff, through a comprehensive website and database in English, French, Spanish and Portuguese, a virtual library with over 6,000 references, a monthly electronic newsletter, and an enquiry and literature search service. The Clearinghouse was established in December 2008 to bring together existing UNESCO HIV and AIDS resource centres, and is a collaboration of IIEP, IBE and UNESCO's regional and cluster bureaux and offices. Recent activities have included hosting a web forum on HIV and teachers.

UNESCO also produces technical guidance and practical resources. Recent examples include international technical guidance on sexuality education, EDUCAIDS tools, case studies on overcoming barriers to implementation of sexuality education, policy briefs on the socio-cultural and gender dimensions of the epidemic and the response, and a series of good policy and practice booklets.

In addition, UNESCO supports research to strengthen the evidence base. Recent examples include research on sexuality education policies, comprehensive sexuality education, learning needs of infected and affected learners, and the response of schools to the needs of most-at-risk students.

UNESCO Support for HIV and Sexuality Education

UNESCO's work on HIV and sexuality education is supported by a multi-disciplinary Global Advisory Group, which provides leadership, guidance and recommendations. In response to the Group's recommendations, UNESCO has:

- Developed *International Technical Guidance on Sexuality Education: An Evidence-informed Approach for Schools, Teachers and Health Educators*, available in English, French, Spanish, Russian, Arabic, Chinese, and Portuguese, published in partnership with UNAIDS, UNFPA, UNICEF and WHO.
- Supported country adaptation and use of the Technical Guidance to strengthen educational programmes in this area.
- Conducted a study on the cost and cost-effectiveness of sexuality education.
- Published case studies on implementation of national sexuality education programmes, *Levers of Success*, available in English, French, Spanish and Portuguese.

UNESCO has strengthened its capacity to provide support at regional and country level through the appointment of Regional AIDS Advisors in Bangkok, Moscow, Santiago and Johannesburg, and 20 National Programme Officers (NPOs) in UNESCO field offices, ten of whom are based in East and Southern Africa.

NPOs in East and Southern Africa, West and Central Africa, and Asia-Pacific have received additional training to enable them to identify and respond to country needs for technical support on education and HIV. Capacity development for all staff in gender equality, HIV and sexuality education will continue to be a UNESCO priority.

Building the Capacity of UNESCO Staff

UNESCO organised a planning workshop for staff who are involved in supporting comprehensive education sector responses to HIV and AIDS through EDUCAIDS, from 8 to 10 December 2009 in Johannesburg, South Africa. Participants came from UNESCO offices in Eastern and Southern Africa as well as the UNESCO Regional Bureau of Education in Africa (BREDA) in Dakar. The workshop was co-organised by UNESCO's regional team on HIV and AIDS in Johannesburg and the Section on HIV and AIDS at UNESCO HQ. Participants were introduced to new planning tools including a draft *Global strategic plan for promoting and supporting EDUCAIDS implementation* and an *M&E framework for EDUCAIDS* and were given the opportunity to comment on the tools in order to improve them and adapt them to the regional context. Feedback highlighted the importance of this workshop in enabling staff to improve UNESCO support for strategic and operational planning and to improve coordination of planning for EDUCAIDS with other stakeholders. A similar workshop was organised for staff from UNESCO offices in West and Central Africa in March 2010 in Dakar, Senegal.

An induction workshop was held for all new UNESCO staff working on HIV and AIDS in East and Southern Africa in May 2010 in Johannesburg. The workshop focused on support for planning and implementation of a 2-year programme funded by the OPEC Fund for International Development for supporting comprehensive education sector responses to HIV and AIDS through EDUCAIDS in 17 countries in East and Southern Africa. It offered an opportunity for new UNESCO staff to understand their role in advocacy, planning, coordination, M&E and resource mobilisation for the education sector response to HIV. A similar workshop was held for NPOs in the Asia-Pacific region in December 2010 in Bangkok. This workshop also provided an opportunity for all NPOs to share experience, challenges and best practice on planning, resource mobilisation, advocacy, and monitoring and evaluation.

Working with UN partners

UNESCO is a founding cosponsor of the UN Joint Programme on HIV/AIDS (UNAIDS), an innovative partnership that involves 10 UN cosponsors.⁹ UNESCO's work on HIV and AIDS will contribute towards delivering the strategic directions identified in the UNAIDS Strategy 2011-2015 and will continue to contribute to the priority areas in the UNAIDS Outcome Framework (see Table 1).

Table 1: UNAIDS Strategic Directions and Outcome Framework Priority Areas

Strategic Direction	Outcome Framework Priority Area	Goals for 2015	UNESCO's Contribution
Revolutionalise HIV prevention	<ul style="list-style-type: none"> Reduce sexual transmission of HIV Empower young people to protect themselves from HIV Prevent mothers dying and babies infected with HIV Protect people who use drugs from becoming infected with HIV 	<ul style="list-style-type: none"> Sexual transmission of HIV reduced by half overall Sexual transmission among young people reduced by 30% Vertical transmission of HIV eliminated and AIDS-related maternal deaths reduced by half All new HIV infections prevented among people who use drugs 	UNESCO will support efforts to reduce sexual transmission of HIV, in particular among young people, MSM, sex workers and transgender people and people who use drugs. Specific emphasis will be given to empowering young people to protect themselves from HIV.
Catalyse the next phase of treatment, care and support	<ul style="list-style-type: none"> Ensure people living with HIV receive treatment Prevent people living with HIV dying from TB Enhance social protection for people affected by HIV 	<ul style="list-style-type: none"> Universal access to antiretroviral therapy for people living with HIV who are eligible for treatment TB deaths among people living with HIV reduced by half People living with HIV and households affected by HIV are addressed in all national social protection strategies and have access to essential care and support 	UNESCO will support efforts to educate and inform young people and communities about HIV and TB treatment and to ensure that children and young people receive essential care and support, including in educational settings.
Advance human rights and gender equality	<ul style="list-style-type: none"> Remove punitive laws, policies, practices, stigma and discrimination that block effective responses to AIDS Empower MSM, sex workers and transgender people to prevent HIV and to fully access ART Meet the HIV needs of women and girls and stop sexual and gender-based violence 	<ul style="list-style-type: none"> Countries with punitive laws and practices around HIV transmission, sex work, drug use or homosexuality reduced by half HIV-related restrictions on entry, stay and residence eliminated in half of countries that have such restrictions Zero tolerance for gender-based violence HIV-specific needs of women and girls addressed in at least half of national HIV responses 	UNESCO will support efforts to promote legal rights and reduce stigma and discrimination, to promote gender equality, tackle gender-based violence and meet the HIV-related needs of women and girls.

To enhance the UN response, UNAIDS has revised the Division of Labour. Based on the comparative advantage of cosponsors, this describes how the Joint Programme will work collectively in 15 areas to deliver results and respond to country needs and priorities. The revised Division of Labour builds on earlier guidance on UN Joint Programming and Joint Teams on AIDS and complements the UNAIDS Technical Support Strategy 2010-2015.

⁹ ILO, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, UNODC, WFP, WHO, World Bank

Under the Division of Labour (included in full in Annex 1), UNESCO has been designated as the convening agency for ensuring good quality education for a more effective HIV response. UNESCO is also a key partner in a further eight areas (see Table 2).

Table 2: UNESCO's Role in the UNAIDS Division of Labour¹⁰

Division of Labour area	Convenor(s)	Agency partners
Reduce sexual transmission of HIV	WB, UNFPA	ILO, UNDP, UNESCO, UNICEF, WFP, WHO
Protect drug users from becoming infected with HIV and ensure access to comprehensive HIV services for people in prisons and other closed settings	UNODC	UNDP, UNESCO, UNICEF, WB, WHO
Empower MSM, sex workers and transgender people to protect themselves from HIV infection and to fully access antiretroviral therapy	UNDP, UNFPA	UNESCO, WB, WHO
Remove punitive laws, policies, practices, stigma and discrimination that block effective responses to AIDS	UNDP	ILO, UNESCO, UNHCR, UNFPA, UNODC, WHO
Meet the HIV needs of women and girls and stop sexual and gender-based violence	UNDP, UNFPA	UNESCO, UNHCR, UNICEF, UNODC, WFP, WHO
Empower young people to protect themselves from HIV	UNICEF, UNFPA	UNESCO, UNHCR, UNODC, WHO
Scale up HIV workplace policies and programmes and mobilise the private sector	ILO	UNESCO, UNHCR, WHO
Ensure good quality education for a more effective HIV response	UNESCO	ILO, UNFPA, WB
Support strategic, prioritised and costed multi-sectoral national AIDS plans	WB	ILO, UNDP, UNESCO, WFP, WHO

UNESCO works as a UNAIDS cosponsor through regular meetings of the Cosponsor Global Coordinators and Focal Points with the UNAIDS Secretariat and the Committee of Cosponsoring Organisations at global level, through Regional AIDS Teams, and through UN Theme Groups and Joint Teams on AIDS at country level.

UNESCO will also continue to coordinate two key UNAIDS initiatives, namely EDUCAIDS and the UNAIDS Inter-Agency Task Team (IATT) on Education, both of which involve collaboration with UN and other partners.

The UNAIDS Inter-Agency Task Team on Education

The UNAIDS IATT on Education aims to:

- Strengthen and accelerate education sector responses to HIV.
- Improve coordination and alignment of agency support for global and country-level actions.
- Strengthen the evidence base and support evidence-informed policy and programming.
- Promote and support good practices in the education sector related to HIV.
- Encourage exchange of information and materials.
- Build bridges between those working in education and in HIV.

The IATT has developed strategic guidance for education sector responses to HIV, a toolkit on mainstreaming HIV in the education sector, and a series of advocacy briefing notes on teachers living with HIV, mainstreaming HIV in education, girls' education and HIV prevention, and HIV and AIDS education in emergencies. The IATT also provides inputs to the EFA Fast Track Initiative and Global Monitoring Report.

¹⁰ The full Division of Labour is included in Annex 1.

Joint working, through the IATT and through regional and country teams, will further contribute to efforts to 'Deliver as One' in the context of wider UN reform and of the Paris Declaration on Aid Effectiveness, as well as the UNAIDS Strategy 2011-2015.

UNESCO also works through inter-agency partnerships with UNAIDS cosponsors on specific global and regional initiatives. Recent examples include collaboration with:

- UNFPA, UNICEF, WHO and the UNAIDS Secretariat to develop International Technical Guidance on Sexuality Education.

- ILO on the development of workplace policies for the education sector.
- WHO on HIV and AIDS treatment education.
- UNICEF, WHO and the World Bank on school health promotion including through the Focusing Resources on Effective School Health (FRESH) initiative.
- UNHCR on educational responses to HIV and AIDS for refugees and internally displaced persons.
- UNICEF and the SADC Secretariat on a review of education sector responses.

Collaboration with UNICEF and UNFPA in East and Southern Africa

The joint UNESCO-UNICEF review of education sector responses to HIV in East and Southern Africa, conducted in collaboration with the SADC Secretariat, developed as a result of both agencies' membership of the HIV Prevention Working Group of the Regional AIDS Team. It also built on earlier collaboration on the Care and Support for Teaching and Learning Initiative, which provided a common platform for work on HIV and education, and the Schools as Centres of Care and Support Programme.

Working together on this initiative has strengthened inter-agency collaboration at country level, streamlined communication with national counterparts, and promoted sharing of ideas and resources and more efficient use of human, technical and financial resources. Further collaboration is planned to address implementation gaps identified by the review and to support HIV-positive educators and learners. UNESCO and UNICEF are also collaborating with UNAIDS and UNFPA to encourage countries to provide comprehensive sexuality education.

UNESCO and UNICEF are also supporting the SADC Secretariat to reinvigorate the education sector response and strengthen monitoring and evaluation in the region. In addition to the joint review of policy and strategy, and implementation of policy and strategy, UNESCO and UNICEF conducted a rapid assessment in 2010 of monitoring and evaluation of education sector responses to HIV and AIDS and plan to pilot HIV and education indicators.

UNESCO is an active partner in UN+ and UN Cares. UN+ represents and provides support for UN staff living with HIV and meets with UN decision-makers to voice key concerns. UN+ works in partnership with UN Cares, the UN system HIV workplace programme, to ensure that all staff know about HIV and are aware of their rights.

In the area of gender equality, UNESCO is an active member of the UNAIDS Interagency Working Group on women, girls, gender equality and HIV, and is working with ILO, UNFPA, UNICEF, UN Women and WHO within the framework of the United Nations Adolescent Girls Task Force. UNESCO's work on HIV and AIDS will also link to UN Women, the new UN entity for gender equality and the empowerment

of women, and contribute to the goals of the UN Secretary-General's initiative, UNiTE to End Violence against Women.

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Working with national partners

At country level, UNESCO supports national governments, through education ministries and other line ministries (notably health), National AIDS Councils and Commissions and UNESCO National Commissions. UNESCO also works with a wide range of civil society partners, including professional associations, academic and training institutions, non-government organisations, networks and organisations of people living with HIV and the media. EDUCAIDS (see Box below) supports the implementation of comprehensive education sector responses.

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EDUCAIDS

EDUCAIDS promotes, develops and supports comprehensive education sector responses that comprise: quality education; policy, management and systems; content, curriculum and learning materials; educator training and support; and approaches and entry points. EDUCAIDS has developed a Framework for Action outlining the essential components of a comprehensive education sector response, provided implementation support in more than 80 countries, and produced guidance and resources, including practical guidelines for supporting EDUCAIDS implementation and a series of technical briefs that provide clear guidelines to countries on a range of issues relating to a comprehensive education sector response. An independent evaluation of EDUCAIDS in 2009 found that progress has been made, in particular in policy development, planning, coordination, integration of HIV into curricula for teachers and secondary school students, and care and support for learners, and that EDUCAIDS has contributed through provision of resources, strengthening coordination and sharing best practice.

UNESCO also provides capacity-building support for national partners. For example, the UNESCO Regional Bureau for Education in Africa held a workshop in Ghana in April 2009 on educational planning and management. The workshop brought together representatives from education ministries, faculties of education and training centres in Anglophone West Africa to train educational planners and administrators to analyse the interaction between HIV and educational planning and to develop strategies to mitigate the impact of the epidemic on the sector.





4

IMPLEMENTING THE STRATEGY

As a specialised UN agency, UNESCO plays a key role in policy advice and dialogue, benchmarking, monitoring and reporting, and capacity development. UNESCO’s current biennial plan gives particular emphasis to setting standards and building the capacity of Member States and UNESCO’s role as a laboratory of ideas, a clearinghouse and a catalyst for international cooperation. UNESCO will take forward the strategy for HIV and AIDS through the following core functions.



UNESCO's Core Functions

- **Leadership and advocacy** – UNESCO advocates at global, regional and national levels for political and financial commitment to the role of education in national responses to HIV and mainstreaming of HIV within education sector policies and plans, and for culturally appropriate and scientifically sound responses.
- **Policy and programmatic guidance** – UNESCO plays a key role in providing normative guidance and practical tools and resources to education and other sector ministries, and to other national partners.
- **Technical support** – UNESCO provides technical assistance and capacity-building for national partners to implement comprehensive, evidence-informed and rights-based responses. In line with the revised UNAIDS Technical Support Strategy, UNESCO will focus on assisting countries to identify their technical support needs, coordinating provision of technical support, and ensuring the delivery of high quality technical support. UNESCO also builds the capacity of partners outside government, including the media, scientific institutions and youth organisations.
- **Strategic information** – UNESCO supports research and action to improve knowledge and strengthen the evidence base, and promotes sharing of information, good practice and lessons learned. UNESCO also supports monitoring and evaluation of global, regional and country progress, trends and impact. UNESCO will contribute to the UNAIDS Knowledge Management Strategy, which aims to promote coherent action across the Joint Programme in tracking the epidemic and the response, building the evidence base, strengthening evaluation and articulating a clear research agenda.
- **Convening and coordination** – UNESCO brings together a range of partners to ensure coherent and coordinated action at global and country level, including through the UNAIDS IATT on Education and EDUCAIDS, and the UNAIDS Outcome Framework and Strategy, promoting coordination between initiatives with shared agendas and supporting global and national coordination frameworks and mechanisms.

Specific areas of action, for each of the strategic priorities, are summarised below.

Build country capacity for effective and sustainable education responses to HIV

UNESCO will:

- Promote evidence-informed education responses that reflect epidemic priorities, including the critical importance of Know Your Epidemic, Know Your Response. UNESCO will collaborate with UNAIDS and national partners to support the generation and use of strategic information in policy and programming. UNESCO will also continue to support research to expand the evidence base.
 - Provide technical support and capacity-building for national partners to implement and monitor education sector policies and strategies. Priority will be given to implementation support in sub-Saharan Africa, which is a global priority for UNESCO as well as the region worst affected by the epidemic, including through joint efforts with UNICEF and other partners to reinvigorate the education sector response in East and Southern Africa.
 - Support countries to implement EDUCAIDS in different epidemic contexts, through technical support, capacity-building and provision of practical tools and guidelines.
- More specifically, UNESCO will assist countries to address the gap between policy and implementation, including through support to partners that are closer to the point of delivery, for example working with municipalities in the 15 cities in East and Southern Africa which account for a third of HIV prevalence and new infections.
- Improve monitoring and evaluation of the progress and impact of comprehensive education sector responses to HIV and AIDS. Through the UNAIDS IATT on Education, UNESCO will support the implementation of a global progress survey on education sector engagement in national HIV responses, focusing on implementation bottlenecks, which will follow up on the 2004 global readiness survey of the education sector response. The IATT on Education, led by UNESCO, will also take forward work on the global M&E framework for education sector responses to HIV and AIDS, including further piloting in 2011.

Global Progress Survey on Education Sector Engagement in National HIV Responses

In October 2010, the UNAIDS IATT on Education launched the Global Progress Survey, which will provide an in-depth assessment of the appropriateness and adequacy of national education sector responses to HIV. Phase I, completed in 2010, included background research to establish data sources and identify issues to be addressed in Phase II and case studies of countries with different epidemiological contexts – The Bahamas, Kenya, Swaziland and Vietnam – which documented achievements and challenges, identified barriers to education sector engagement in national responses, implementation bottlenecks and factors affecting HIV-related learning outcomes in formal and non-formal education settings.

Phase II, to be completed in 2011, will include a survey of at least 40 countries, which will provide the basis for a progress report on education sector engagement in national responses. The report, which will be widely disseminated at global and country level, will include recommendations to improve planning, implementation, monitoring and evaluation of education sector responses to HIV and AIDS.

- Advocate for mainstreaming of HIV and AIDS into education sector policies, strategies and plans, curricula and teacher training, and for a stronger role for education within overall national AIDS responses. UNESCO will support training using the mainstreaming toolkit.
- Advocate for stronger emphasis in education sector responses on HIV education for children and young people who are not in school and in non-formal education programmes.
- Work with international partners and initiatives, including UNAIDS, EDUCAIDS and the IATT, to ensure harmonised global policies, guidelines and support for education sector responses to HIV.
- Support national coordination mechanisms and resource mobilisation, and facilitate partnerships

between education ministries, other sector ministries, civil society, the media and the private sector, for education responses to HIV. UNESCO will work in partnership with WHO, UNICEF and UNFPA to promote

stronger links between the education and health sectors at country level.

- Support efforts to strengthen school health and health promotion in schools, including using these as an entry point for HIV education.

Strengthen comprehensive HIV and sexuality education

UNESCO will:

- Promote comprehensive HIV and sexuality education in all epidemic settings to ensure that young people are well informed about HIV risk behaviours and are empowered to protect themselves from HIV infection and other sexually transmitted infections, to avoid unintended pregnancy, and to achieve better overall sexual and reproductive health. While evidence shows that comprehensive sexuality education neither accelerates sexual debut nor increases the frequency of sexual relations^{11, 12}, leadership and policy dialogue are required to promote acceptance of the evidence and to build commitment among decision-makers, educators and parents. Where unsafe injecting drug use, male-to-male sex and sex work are significant modes of transmission, UNESCO will work with other cosponsors and the Secretariat to promote integration of these issues, and related issues of stigma and discrimination, into HIV education for all children and young people.
- Contribute to protecting young drug users from becoming infected with HIV by supporting countries to implement comprehensive drug prevention and HIV education programmes for young people. UNESCO will work closely with national authorities to help ensure the systematic integration of information on drugs in HIV prevention education and of HIV education in drug prevention programmes for young people. UNESCO will also help generate improved strategic information on drug use by young people, in particular in educational settings, to influence and inform policies, regulations and interventions. UNESCO will work with UNODC to advocate for regulations and policies that enhance the protection of drug users from HIV transmission and will facilitate partnerships between ministries of health and education, teachers' unions, parents' associations, youth organisations and NGOs working on drug prevention and harm reduction.
- Support implementation of comprehensive HIV and sexuality education. UNESCO will continue, together with its UN and other partners, to provide technical guidance on how to develop and implement gender

responsive, age-appropriate, culturally relevant and rights-based HIV and sexuality education. Joint efforts will also focus on building the capacity of education managers, planners and curriculum specialists, and the skills of teachers to deliver effective HIV and sexuality education through strengthening training and curricula.

- Improve young people's access to comprehensive HIV information and to promote behaviour change through new technologies and communication channels including the internet, social networking and youth media.
- Monitor HIV and sexuality education coverage and quality, and advocate for scale-up of coverage to include all levels of the education system. This will include assisting countries to evaluate current programmes to ascertain the extent to which comprehensive HIV and sexuality education is incorporated in the curriculum at all levels and is implemented in educational settings.
- Strengthen the evidence base for comprehensive HIV and sexuality education through research on costs, effectiveness and impact, monitoring and evaluation, and documenting and disseminating lessons learned.
- Promote comprehensive HIV and sexuality education within the context of wider health promotion. UNESCO will continue to work with UN partners on the Focusing Resources on Effective School Health (FRESH) initiative. UNESCO will also work with WHO to strengthen joint efforts by the health and education sectors to promote better health for children and young people and across UNESCO sectors to strengthen health promotion at all levels of society, including addressing new and emerging health issues. UNESCO will also continue to work in partnership with UNICEF and WFP to improve children's nutrition.

11 UNAIDS IATT on Young People. *Preventing HIV/AIDS in Young People: A Systematic Review of the Evidence from Developing Countries*

12 UNESCO et al. *International Technical Guidance on Sexuality Education: An Evidence-informed Approach for Schools, Teachers and Health Educators*

Advance gender equality and protect human rights

UNESCO will:

- Work with UNAIDS to implement the Agenda for Accelerated Country Action for Women, Girls and Gender Equality and HIV. This aims to strengthen strategic guidance and support to national partners, assist countries to address the needs of women and girls in national HIV and development strategies, plans, budgets and monitoring and evaluation frameworks, and build capacity and mobilise resources to deliver measures to address the needs of women and girls in the context of HIV.
- Work with all UNESCO sectors and country HIV programmes to implement the UNESCO Gender Equality Action Plan, through gender mainstreaming in all programmes and activities and implementation of targeted action and gender-specific programmes to address the gender inequalities that drive the pandemic.
- Ensure that all UNESCO sector initiatives promote human rights in the context of HIV and AIDS and contribute to efforts to reduce stigma and discrimination. UNESCO will work with national partners to promote equality, respect, tolerance and dignity and to challenge harmful social and gender norms and practices, stigma and discrimination, and homophobia.
- Engage in policy dialogue and provide technical support to ensure that education sector responses to HIV and AIDS, including policies, strategies, plans, training and curricula, are gender transformative and advance gender equality.
- Advocate for schools to provide safe, supportive learning environments and for education sector responses to incorporate measures to eliminate discrimination, abuse, sexual harassment and violence, including gender-based violence, in educational settings. UNESCO will work with national partners to develop and implement codes of conduct and systems for reporting violence and abuse.
- Document and disseminate evidence on effective approaches and promising practices to reducing gender inequality and gender-based violence, including those that promote the active involvement of men and boys.
- Support the rights of HIV-positive learners and educators and the enforcement of laws and policies that protect against stigma and discrimination in educational settings. UNESCO will build on efforts to date to develop and implement education sector workplace policies and to facilitate networking and joint action by teacher unions and organisations of HIV-positive teachers.
- Encourage national partners, including education ministries, training institutions, professional associations and networks of people living with HIV, to ensure that HIV education takes account of the specific needs of children and young people living with and affected by HIV. UNESCO will continue to monitor the needs and educational experience of HIV-positive learners. UNESCO will also continue to work in partnership with UNICEF and others to publish the annual Children and AIDS Stocktaking Report.
- Promote the role of the education sector in care and support for children and young people living with or affected by HIV. UNESCO will continue to support mainstreaming of school care and support in the SADC region, and will work with UN and national partners to promote links with social protection programmes that enable infected and affected children to enrol and remain in school.
- Advocate for education sector responses to pay greater attention to the needs of the most-at-risk and vulnerable children and young people, including young drug users and MSM, and the children of drug users and sex workers.

Measuring Progress

UNESCO will continue to work with partners to monitor epidemic trends, the coverage, effectiveness and quality of programmes, and progress towards global and national commitments and targets. Support for monitoring and evaluation at country level will focus on building national capacity and strengthening national systems.

UNESCO reports both within UNESCO, including to the UNESCO Executive Board, and externally, on progress in delivering its mandate. Monitoring and reporting on progress with implementing UNESCO's Strategy for HIV and AIDS will use existing mechanisms to avoid duplication of effort. These mechanisms include regular reporting on the UNESCO regular programme and budget and on progress towards the MDGs, EFA and Gender Equality Action Plan outcomes, and reporting to UNAIDS on UNESCO's contribution to the UNAIDS Strategy and Outcome Framework goals as well as on the accountabilities defined in the Agenda for Accelerated Country Action for Women, Girls and Gender Equality and HIV.

UNESCO currently reports to UNAIDS against the Unified Budget and Workplan. As of 2012, this will be replaced by the Unified Budget, Results and Accountability Framework (UBRAF), which will enhance reporting on Joint Programme activities and resources and more clearly show the contributions of each cosponsor.

More specifically, as mentioned earlier, UNESCO has worked with partners to develop a comprehensive framework for monitoring and evaluation, which includes global, regional and country-level indicators and will facilitate measurement of the contribution of education responses to the overall HIV and AIDS response at each level. UNESCO will also monitor progress against regional commitments, for example, commitments on

comprehensive sexuality education made by the countries of Latin America and the Caribbean.

Finally, UNESCO will continue to conduct periodic evaluations, as well as to participate in the UNAIDS Cosponsor Evaluation Working Group (CEWG) and to contribute to the UNAIDS Monitoring and Evaluation Reference Group (MERG).



ANNEX 1:

THE UNAIDS DIVISION OF LABOUR

Division of Labour Area	Convenor(s)	Agency Partners
Reduce sexual transmission of HIV	WB, UNFPA	ILO, UNDP, UNESCO, UNICEF, WFP, WHO
Prevent mothers from dying and babies from becoming infected with HIV	WHO, UNICEF	UNFPA, WFP
Ensure that people living with HIV receive treatment	WHO	ILO, UNDP, UNHCR, UNICEF, WFP
Prevent people living with HIV from dying of tuberculosis	WHO	ILO, UNICEF, UNODC, WFP
Protect drug users from becoming infected with HIV and ensure access to comprehensive HIV services for people in prisons and other closed settings	UNODC	UNDP, UNESCO, UNICEF, WB, WHO
Empower MSM, sex workers and transgender people to protect themselves from HIV infection and to fully access antiretroviral therapy	UNDP, UNFPA	UNESCO, WB, WHO
Remove punitive laws, policies, practices, stigma and discrimination that block effective responses to AIDS	UNDP	ILO, UNESCO, UNHCR, UNFPA, UNODC, WHO
Meet the HIV needs of women and girls and stop sexual and gender-based violence	UNDP, UNFPA	UNESCO, UNHCR, UNICEF, UNODC, WFP, WHO
Empower young people to protect themselves from HIV	UNICEF, UNFPA	UNESCO, UNHCR, UNODC, WHO
Enhance social protection for people affected by HIV	UNICEF, WB	ILO, UNDP, UNHCR, WFP, WHO
Address HIV in humanitarian emergencies	UNHCR, WFP	UNDP, UNFPA, UNICEF, UNODC, WHO
Integrate food and nutrition programmes within the HIV response	WFP	UNICEF, UNHCR, WHO
Scale up HIV workplace policies and programmes and mobilise the private sector	ILO	UNESCO, UNHCR, WHO
Ensure good quality education for a more effective HIV response	UNESCO	ILO, UNFPA, WB
Support strategic, prioritised and costed multi-sectoral national AIDS plans	WB	ILO, UNDP, UNESCO, WFP, WHO

ANNEX 2:

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Caption: Local women in Magu, Tanzania. These women have empowered themselves through working together with other women to breed organic chickens and grow specialty mushrooms for sale at regional markets.

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Caption: Children entertain guests at Mildmay, a center for HIV-positive children in Uganda.

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Caption: A mother and child inside of their home in Rajasthan, India.

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Caption: A young boy in Romania has his face painted.

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Caption: A girl participates in a children's HIV/AIDS fair in rural Concepcion Chiquirichapa, Guatemala.

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The strategy summarises UNESCO's role in its capacity as a specialised agency of the UN. It provides a framework to guide the collective efforts of UNESCO at global, regional and country levels and describes how UNESCO will contribute to the goal of Universal Access and address current challenges in the response to HIV and AIDS. More specifically, it sets out UNESCO's contribution to the achievement of the goals of the UNAIDS Strategy and Outcome Framework 2011-2015 and UNESCO's role within the revised UNAIDS Division of Labour.

The strategy sets out clear priorities for UNESCO in the coming years. It gives greater emphasis to HIV prevention in the context of wider health promotion and ensuring that all girls and boys and young women and men, both in and out of formal education, have access to comprehensive HIV education. It also prioritises support to strengthening the implementation and monitoring of education responses and addressing the gender and human rights issues that hinder effective responses to HIV and AIDS.

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