

THE ROLE OF EDUCATION IN THE PROTECTION, CARE AND SUPPORT OF ORPHANS AND VULNERABLE CHILDREN LIVING IN A WORLD WITH HIV AND AIDS



UNICEF/HQ92-0262/LAUREN GOODSMITH



THE ROLE OF EDUCATION IN THE PROTECTION, CARE AND SUPPORT OF ORPHANS AND VULNERABLE CHILDREN LIVING IN A WORLD WITH HIV AND AIDS

FOREWORD

This paper has been prepared by a working group of the UNAIDS Inter-agency Task Team on Education and HIV/AIDS. It began as a discussion paper for the Global Partners Forum for Children Orphaned and Made Vulnerable by HIV/AIDS, in Geneva, October, 2003.

This document elaborates the contribution of education to the protection, care and support of orphans and other vulnerable children, as set out in the *Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV/AIDS*, and should be read with the UNAIDS global strategy on *HIV/AIDS and Education: A Strategic Approach*¹. It is intended to provide guidance for investments and interventions by presenting the broad lines of action considered necessary for education-related responses to orphans and other children made vulnerable by HIV/AIDS. The content of this paper has been drawn from available data and literature, and from the experiences of partner agencies and governments. While HIV/AIDS is certainly not new, coordinating an effective response to the impact of HIV/AIDS on education systems, and assisting education systems to better meet the need of orphans continue to pose major challenges. In particular, this paper draws upon and seeks to logically relate education responses to the overlapping commitments made in the United Nations General Assembly Special Session on HIV/AIDS² (2001), the Millennium Development Goals³, Education For All⁴, and the Convention on the Rights of the Child⁵.

PREFACE

More than 14 million children under the age of 15 have lost one or both parents to AIDS, the vast majority of them in sub-Saharan Africa. By 2010, the number of children orphaned by AIDS globally is expected to exceed 25 million. But that is just a fraction of the number of children whose lives will have been radically altered by the impact of HIV/AIDS on their families, communities, schools, health care and welfare systems and local and national economies. With rates of HIV infection on the rise in many regions of the world, this crisis for children will persist for decades, even as prevention and treatment programmes are expanded.

Education, in particular, can leverage significant improvements in the lives of orphans and vulnerable children. Besides conferring knowledge and life skills, schooling can contribute to a child's psychosocial development and provide a safe, structured environment in turbulent times. At the World Education Forum in April 2000, the Dakar Framework for Action "Education for All" (EFA) was adopted with a major goal: "to ensure that all children, particularly girls and children in difficult circumstances and those belonging to ethnic minorities, have access to and complete free and compulsory primary education of good quality". In 2001, at the United Nations General Assembly Special Session on HIV/AIDS, a goal

¹ See website address: <http://www.unicef.org/lifeskills/StrategyFrameworkonHIVAIDSandEducation.pdf>

² http://www.unaids.org/EN/events/un+general+assembly+special+session+on+hiv_aids.asp

³ For a summary list of the MDGs, see <http://www.developmentgoals.org/> Goal #2 and Goal #3 are most relevant to this paper.

⁴ http://portal.unesco.org/education/ev.php?URL_ID=9306&URL_DO=DO_TOPIC&URL_SECTION=201

⁵ <http://www.unhchr.ch/html/menu3/b/k2crc.htm>

for children orphaned and made vulnerable by HIV/AIDS was endorsed by member states: “to ensure equal rights to education, shelter, health and good nutrition and freedom from abuse, violence and exploitation, discrimination, trafficking and loss of inheritance”. In February 2004, the *Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV/AIDS* was developed as a strategic guidance tool for orienting and strengthening partnerships for orphans and vulnerable children. A key strategy of this framework is “to ensure access for orphans and vulnerable children to essential services, including education, health care, birth registration and others”.

The priority actions for Education and Orphans and Vulnerable Children elaborated in this paper are:

- **To ensure access to education for all, including orphans and vulnerable children**, through initiatives such as abolishing school fees, reducing hidden costs and opportunity costs, establishing community networks, and monitoring progress.
- **To manage the supply and ensure the quality of education** by strengthening education management and information systems, as well as building teacher/administrator HIV/AIDS capacity, and establishing policies and practices to reduce their own risks.
- **To expand the role of schools to provide care and support to orphans and vulnerable children** through measures such as linking with community social services and networks and coordinating multi-sector and partner involvement.
- **To protect orphans and other children made vulnerable by HIV/AIDS** by developing policies and practice to reduce stigma and discrimination, as well as sexual abuse and exploitation.

This is not an agenda for the education sector alone and therefore must rely on partnerships working on behalf of vulnerable children. *A school should be seen as a central place for other sectors, institutions, and groups to deliver vital services to those who need them most.* This reality requires the development of networks to draw together international, national, and local community organisations to collaborate on both short term and long term solutions.

However, it is important not to overburden fragile systems. Not only are education systems under-utilised; they are also under-resourced. Priority actions can only be implemented if financial, human and technical resources are provided to back up recommendations. Effective action also depends on political commitment at national, sub-national, and community levels. Advocacy to promote leadership should accompany planning efforts.

The magnitude of the HIV/AIDS crisis is forcing us to consider systemic changes that will improve education for all children, especially those made vulnerable and marginalised by poverty, gender, geography, and other causes. The collective response to HIV/AIDS should be viewed as an opportunity to address long term education, health and social needs through schools. The overall strategy is to make “Education for All” work for all children, including orphans, girls and other vulnerable children.

1. Priority Actions

The Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV/AIDS provides a broad overview of actions to be taken and approaches that work to improve the lives of vulnerable children. A key strategy of this framework is “to ensure access for orphans and vulnerable children to essential services, including education, health care, birth registration and others”. This paper provides background on the key issues and ideas on providing effective responses to orphans and children affected by HIV/AIDS through education. Four priority actions are identified and elaborated:

- Ensure access to education for all, including orphans and vulnerable children.
- Manage the supply and ensure the quality of education.
- Expand the role of schools to provide care and support to orphans and vulnerable children.
- Protect orphans and other children made vulnerable by HIV/AIDS.

The international community is called upon to act collectively on these priority actions for effective education responses which benefit orphans and vulnerable children and their communities. This paper targets influential leaders and other decision makers who can rally greater support for education for orphans and vulnerable children. Together with the Framework and the EFA goals, this paper can assist:

- Governments in affected countries to review their major lines of action and strengthen their education response;
- Donor governments to assess their policy commitments and plan increased resource allocations; implementing agencies at all levels to better plan, manage and evaluate their programmes; and the
- The International community to attract new partners and to position orphans and vulnerable children high on global, national and local agendas.

2. The Scale of the Challenge

2.1 Orphans' and vulnerable children's need for education

Poverty, conflict, disability, and the spread of HIV/AIDS are significant barriers to many children getting into school, attending regularly, and achieving academically. Economic hardship and reduced parental care and protection mean that orphans and vulnerable children may lose the opportunity to go to school. Children who have been orphaned by AIDS are frequently shunned by society, denied affection and care, and left with few resources to fall back on. For economic and other reasons, many of these children drop out of school. They sometimes suffer from malnutrition and ill health and are at risk of exploitation and abuse, increasing the chances that they, too, will contract HIV/AIDS.

Efforts to improve access to education for orphans and vulnerable children⁶ are grounded in the importance of Education for All.⁷ Education is a basic human right for all children, as recognized in the Convention on the Rights of the Child, and Education for All is a compelling goal for all nations.

⁶ An orphan due to AIDS is defined as “a child who has at least one parent dead from AIDS.” (Children on the Brink 2002) Vulnerable children are defined as “children whose safety, well-being and development are, for various reasons, threatened. Of the many factors that accentuate children’s vulnerabilities, the most important are lack of care and affection, adequate shelter, education, nutrition, and psychological support. While children exposed to many facets of deprivation and poverty are vulnerable, children who lost their parents may be particularly vulnerable because they do not have the emotional and physical maturity to adequately address and bear the psychological

Education can leverage significant improvements in the lives of orphans and vulnerable children by conferring knowledge and life skills. In addition, schooling can contribute to a child's social integration and psychosocial development and provide a safe, structured environment in turbulent times. A child who knows how to read, write, do basic arithmetic, and develop life skills has a solid foundation for continued learning throughout life. Schools reach further into communities than most other public institutions and can serve as important resource centres to meet the broader needs of the community. The potential of education resources is frequently underutilised, and thus efforts must be made to employ education as a strategic means for improving the lives of children and their families, made vulnerable by HIV/AIDS.

Education improves the lives of children and the economic and social well being of countries. It can lead to an increase in the productivity of labour, reduced fertility and, improved health, and it enables people to participate fully in the economy and the development of their societies. In particular, the education of girls has been correlated with the benefits of later child bearing, better birth spacing, smaller family size, reduced poverty, and healthier, better-educated children.

The sheer number of orphans is staggering. In sub-Saharan Africa, 11 million children under 15 years have experienced the death of one or both parents due to AIDS, among a total of 34 million orphans from all causes in the region. There has also been an increase in double orphans.⁸ In several sub-Saharan African countries, more than 15% of children are now orphans. By 2010, it is expected that approximately half of the 42 million estimated orphans in sub-Saharan Africa will result from AIDS. Although HIV prevalence is generally low among those aged 5-15 years, nearly three million children under 15 are themselves infected with HIV. The scale of the crisis is masked by time lag between HIV infection, death, and orphaning. Even if all new HIV infections were to stop today, the numbers of orphans would continue to rise for at least the next 10 years. The challenge is unique and long term and requires careful planning, coordination of efforts, and resources.

The need for a gender lens is particularly important since orphan girls tend to be more vulnerable to exploitation of all kinds, including sexual exploitation, early marriage, child labour, and denial of inheritance rights, all of which give rise to an increased risk of HIV infection.⁹ In many countries in Africa where HIV/AIDS has its greatest impact, girls are disadvantaged in terms of access and achievement at school. In a world where half of new HIV infections occur among 15-24 year olds and almost two-thirds of these are among girls, education can be life-saving as it helps to prevent and mitigate the impact of HIV/AIDS.

Regional and country assessments show that HIV increases the vulnerability of children by increasing poverty and by straining the capacity of extended families to cope. Solutions that can be implemented at scale and sustained for decades are needed – and education is one of the central measures for meeting the multiple challenges that orphaning presents.

2.2 Access of Orphans and Vulnerable Children to Education

Children's access to education is affected by a wide range of factors. These include: age, sex, family structure, household wealth, economic and domestic roles, health status and access to health services,

trauma associated with parental loss.” For an elaboration of vulnerability in a social risk management framework, see Holzmann and Jorgensen (2000).

⁷ UNESCO 2000

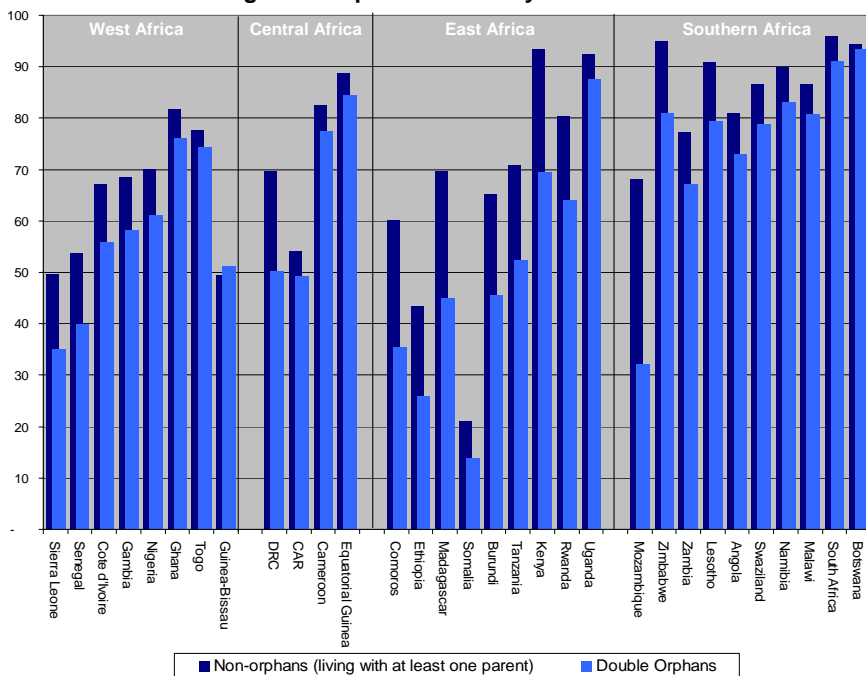
⁸ Double orphans have lost both parents, as opposed to children who have lost one parent.

⁹ Family Support Trust, Zimbabwe; Human Rights Watch, Zambia, 2002; ILO.

perceived value of education, perceived relevance of the curriculum to children’s futures, perceived safety of children (particularly girls) in school, and external factors such as the distance of the school from the home and the quality of child-centred, gender-sensitive schools. Being orphaned or made vulnerable is another factor that may affect children’s access to education. Orphans and vulnerable children stand an increased chance of being malnourished and receiving inadequate health care - factors that can adversely affect enrolment, attendance and performance.

Families and communities have shown remarkable resilience and compassion in dealing with children affected by HIV/AIDS. However, in many communities the scale of the crisis is overwhelming the ability to cope, and grandparents, faith-based organisations, and the broader community struggle to absorb the impact of AIDS-affected children. Often, poor women and the elderly shoulder the brunt of the burden. In some regions, communities and nations are experiencing the loss of their most productive members, and feeling the effects of deepening poverty, weakened capacity and increasing instability. With these challenges, the rhythm of schooling may be disrupted, and children drop out of school or never enrol because household assets are diverted to pressing needs such as medical care for AIDS-affected family members. Furthermore, the challenge of finding resources to pay for school fees and hidden costs such as uniforms or textbooks, increases the likelihood of such dire outcomes as drop out, child labour, and forms of exploitation such as “survival sex” to pay for school.

Figure-1: Orphans less likely to attend school



While being orphaned is not always positively correlated with poor enrolment, attendance and performance¹⁰, an increasing number of studies show that in many countries, being orphaned or made vulnerable has a detrimental impact on educational indicators.¹¹ UNICEF recently reviewed the effects of orphaning on schooling and labour in 20 sub-Saharan African countries. In all countries, children aged

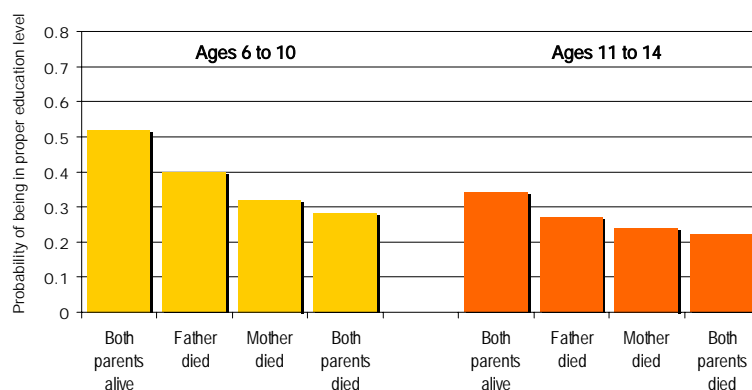
¹⁰ The interplay of multiple factors such as poverty, illness of a parent or other family member, older age, or relationship to the head of household may over-ride orphaning as the primary correlation with reduced access to education. Ainsworth & Filmer, 2002; Case, Paxton & Albeidinger, 2002.

¹¹ World Bank, PCD, UNICEF, UNAIDS 2002

5-14 who had lost one or both parents were less likely to be in school and more likely to be working more than 40 hours a week.¹² There is a significant gap in school attendance between orphans and non-orphans (Figure 1). The gap is greatest in African countries which have lower national enrolment figures. Furthermore, studies in Kenya, Zambia and Tanzania show that orphans are less likely to be at the correct education level (Figure 2).

Figure-2: Orphans less likely to be at proper education level

Probability of being at the proper education level, Kenya, Tanzania & Zimbabwe ~ 1999



Source: Dimension of the emerging orphan crisis in sub-Saharan Africa. George Bicego, Shea Rutstein, Kiersten Johnson. Social Science & Medicine.

Source: UNICEF 2003.

Lower enrolment and completion rates among orphans result from several compounding factors that HIV/AIDS exacerbates.¹³

- *Lack of affordable schooling* – a sudden increase in poverty which often accompanies the death of a parent or the onset of AIDS in a household is a significant causal indicator leading to lower enrolment rates as children are unable to pay school related costs.
- *Increased familial responsibilities* – children are increasingly relied upon to take care of siblings or ailing family members and are therefore unable to begin (or finish) school. When a family member falls ill, older children and girls are likely to drop out of school to assume household and care-taking responsibilities.
- *Family scepticism regarding the value of primary education* – some families are sceptical of the usefulness and importance of primary education to their child’s future and therefore opt not to send them to school even if they can afford to do so.
- *Poor quality education* – the lack of trained teachers and decreased teacher productivity due to AIDS have negatively affected the quality of instruction.
- *Stigma and trauma* – the emotional stress accompanying the loss of a family member or caregiver, along with the stigma attached to being an “AIDS orphan”, deters school participation.
- *Fear of infection with HIV* – many children (particularly girls) and their families are afraid of possible HIV infection through potential abuse and exploitation on school grounds and/or on their way to and from school.

¹² UNICEF, UNAIDS, USAID 2002

¹³ Kelly 2000 in Hepburn 2001

Countries and communities must identify the barriers to education and define locally appropriate strategies for attracting and keeping children in school.

2.3 The Challenge for Ministries of Education

Just as HIV/AIDS erodes the resources and capacities of families and communities, it also affects the education system itself. Teachers and administrators are dying from AIDS, leaving students with diminished numbers of educators and adults to provide guidance. It is a cruel paradox that young children who are infection-free may be at risk because HIV/AIDS is destroying the ability to deliver education as a means of prevention against HIV/AIDS.

Governments and partners should consider key questions when planning, monitoring, and financing education systems. Questions include:

- How is the supply of trained teachers and administrators affected?
- What are the additional barriers HIV/AIDS creates regarding the demand for education (e.g., due to loss of social and family support, economic constraints and opportunity costs of schooling, stigma and discrimination)?
- What are the specific ways that HIV/AIDS affects enrolment, attendance and performance of both affected teachers and students?
- How does HIV/AIDS affect ability to learn? How relevant is the curriculum in the face of HIV/AIDS?
- How do HIV/AIDS and gender-related stigma and discrimination affect schooling for boys and girls?
- How does the role of education need to change (e.g., due to the increasing number of students with basic needs unmet)?
- What resources are available for education and how are donors responding? Are they losing confidence in the sector? Are other sectors absorbing an increasing proportion of funds?¹⁴
- To what extent can non-formal educational structures (e.g., community schools) be supported without dissuading children from enrolling in formal schools?

In addition to these key questions, education planners and supporters must also consider the special needs and concerns surrounding orphans and vulnerable children:

- Psychosocial welfare and support;
- Social effects, especially stigma and discrimination;
- Increasing poverty at community and household level and loss of assets and inheritance rights;
- New stress on extended families; orphan care-giving; community and institutional care;
- Increasing demand for child labour;
- Risk of physical abuse and illness, including exposure to HIV;
- Loss of livelihood skills and indigenous knowledge passed through generations;
- Food insecurity and threats to nutrition status.

The educational response to HIV/AIDS provides the impetus for addressing long-standing social and health issues through schools. Preventing HIV/AIDS and mitigating the impact of HIV/AIDS can contribute to improved quality of education and the overall learning environment. Schools should act as the focal point of comprehensive community responses to HIV/AIDS, bringing teachers and communities

¹⁴ Shaeffer & Wijngaarden 2003

together with other resource people to identify and address the needs of vulnerable children and their families in a coordinated and effective way.

3. Guiding Principles for Action

The Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV/AIDS provides a broad overview of actions to be taken and approaches that work to improve the lives of vulnerable children. A major guiding principle in the Framework is that “Education can leverage significant improvements in the lives of orphans and vulnerable children. Besides conferring knowledge and life skills, schooling can contribute to a child’s psychosocial development and provide a safe, structured environment in turbulent times. Schools can also serve as important resource centres to meet the broader needs of the community.” The key strategy on education from this framework is to “ensure access for orphans and vulnerable children to essential services, including education...”.

Based on this guiding Framework, a number of principles should underpin actions to improve education for orphans and vulnerable children:

3.1 Partnerships are critical: Schools cannot be expected single-handedly to fulfil all the challenges proposed. Alliances among education, health, and social welfare Ministries will be critical. Faith-based leaders and organisations have a special role, particularly where they are already involved in providing education, food and shelter for vulnerable children.

3.2 A child-centred, rights-based approach to decision-making, planning, implementation and advocacy is needed. Decisions should be made in the best interests of the child, involving constructive participation by children and young people affected by HIV/AIDS.

3.3 Existing social policy should be incrementally revised to protect and promote the educational development of HIV/AIDS affected children.

3.4 Benefits to communities: Strategies to help children to access education should be directed not only to children orphaned by AIDS, but to all vulnerable children.¹⁵ These efforts need to benefit schools and communities directly. At the same time, they should support broader system-wide reform efforts. Poverty-reduction strategies and sector-specific policies and processes can benefit orphans and vulnerable children and their communities when they are implemented in a decentralised manner. This can include broad-based community involvement, such as through community grants, in order to strengthen family and community capacity in the longer term.

3.5 Phasing responses to go to scale: Programming should meet both immediate needs and longer term objectives for large scale coverage (e.g., school meals and fee abolition may take precedence over curriculum reform in the short term). This calls for short, medium, and long term planning.

3.6 Balancing attention to care, support, and prevention for orphans and vulnerable children: Responses will vary depending on the status of the epidemic and the nature of the impact. For example in emerging epidemics, greater attention may be given to prevention efforts, while sending responses to care and support of relatively small numbers of orphans and affected teachers. More advanced epidemics may require simultaneous efforts on all fronts.

¹⁵ UNICEF, UNAIDS, USAID 2002.

3.7 Keeping families together and involved: Siblings need to be kept together wherever possible and close to families, relatives or family-like environments. Education needs to reflect this principle by involving children and young people and their families and communities, including faith-based organisations, in developing solutions to challenges such as distance to school, living (and working) arrangements, economic status, the nature of the curriculum and teaching processes, and the presence of psychosocial support and adult guidance.

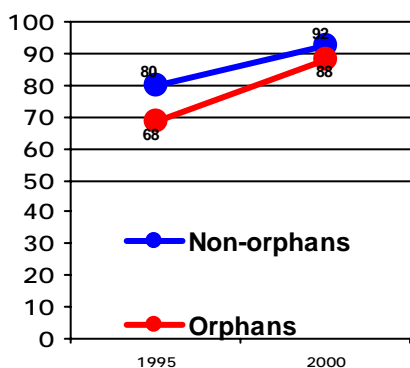
3.8 A commitment to monitoring and evaluation: Training and ongoing support for a range of partners are required at school and community levels to enable national and local indicators to be used in programming and reporting.

4. Priority Actions to Address Needs of Orphans and Other Children Made Vulnerable by HIV/AIDS

4.1 Ensure access to education for all, including orphans and vulnerable children

Removing the barriers to education and promoting “Education for All” are essential prerequisites to creating an environment in which disadvantaged children can thrive, especially in countries with low enrolment. Providing opportunities to learn and apply the necessary literacy, numeracy and life skills can be life changing for children and young people. Insisting on Education for All – which implies 100% overall national enrolment – is a strategy that can greatly benefit orphans. For example, the highly successful efforts to increase overall enrolment nationally in Uganda also was highly effective for bringing orphans to school (Figure 3). Uganda’s experience demonstrates that the response to orphans and vulnerable children should be embedded in the larger education effort.

FIGURE 3: IMPROVEMENT OF SCHOOL ATTENDANCE AMONG ORPHANS
PERCENTAGE OF CHILDREN ATTENDING SCHOOL (ORPHANS / NON-ORPHANS) UGANDA



As households and communities sink further into poverty due to the impact of HIV/AIDS, the demand for children’s labour may increase, and older children may take responsibility for the care of younger siblings. Poverty-reduction strategies and social policy should take this into account by reducing the direct costs of schooling. Fees and hidden costs of schooling are often the greatest barriers to schooling. The move to abolish school fees is critical to ensure that orphans and vulnerable children enrol and stay in school.

Interventions that address opportunity costs are also needed, and may include bursaries, loans, early childhood education and care programmes and in-school meals or supplementary food assistance for the

household. The introduction of school meals, especially in areas of food insecurity, will contribute to keeping children in school, and will provide the added benefit of improving children's nutritional status. When combined with Take-home rations, school meals also offer benefits beyond the individual child by supporting the larger household. However, school nutrition programmes need to be undertaken in full consultation with community leaders and donors, when involved, ensuring their awareness of the dangers of creating dependency.

Care is required to ensure that vulnerable children benefit from such efforts; for example, that girls come to school as well as boys, poor and orphaned children also come, new hidden costs do not emerge to replace the formal school fees, and the quality of education is maintained at acceptable levels. Specific mechanisms will be needed to monitor progress at local and national levels and to go beyond the United Nations General Assembly Special Session on HIV/AIDS (2001) global indicator on school attendance of orphans compared to non-orphans.¹⁶

Specific actions:

- **Insist on “Education for All”** as a priority and key coordinating mechanism for protecting orphans and vulnerable children from HIV/AIDS while promoting opportunities for these children and young people.
- **Abolish school fees** and replace these funds with alternatives. International support which reaches school level will be essential.
- Target interventions to **reduce non-fee costs of education** including opportunity costs, such as subsidies through schools and communities, as well as bursaries and loans, community grants, in-school meals or supplementary food assistance for the household, or other incentives.
- **Establish community networks** through training and support of teachers and village committees to identify vulnerable children – such as girls and orphans – and support them to go to school and stay in school; provide family-like environments; and provide care and support for orphans and child-headed households.
- **Expand alternatives and flexible access to quality education**, including non-formal approaches, food-based incentives, flexible instruction hours, and acceleration and catch-up programs, for example through peer and community support networks, parent-teacher associations, working environments, and street outreach.
- **Establish quality community-based early childhood care, education and development** for 0-5 year olds which promotes early identification of vulnerable children as well as quality care and support for healthy development.
- **Monitor progress at international and local levels** with respect to EFA goals and the overlapping commitments to UNGASS regarding education for orphans and other vulnerable children.

¹⁶ Ratio of current school attendance among orphans to that among non-orphans aged 10-14. (UNAIDS 2002)

4.2 Manage the Supply and Ensure the Quality of Education

In many places, HIV/AIDS is threatening recent positive gains in basic education and disabling the education sector's core functions. Parity between orphans and non-orphans in school attendance is not unlikely to be achieved, nor can the goals of Education for All be achieved, without serious action to address the impact of HIV/AIDS on the education sector.

Governments need to put in place long term system-wide responses to the impact of HIV/AIDS on all aspects of education. This should address the impact on the supply, demand and quality of education, as well as concerns about the impact on equity and gender. Strengthening education management and information systems will not only enhance their ability to forecast and plan for change, but can also inform policies and processes to address HIV/AIDS in the curriculum and the nature and location of schooling in relation to vulnerable children. Information systems are key to the sector's ability to track human resources, replace skilled professionals lost to the epidemic, and enlist substitute staff who are able to cope with the demands of orphans plus traditional responsibilities. Schools may play a role in reporting the living situation of orphans at the local level through school-community networks, which will be necessary to complement national education management information systems. Individual (student), environmental, and social factors must also be measured to untangle the complex path to increasing educational access, quality and achievement. Such information will be invaluable to education-related responses of partners.

The impact on teachers, administrators, students, and their families should be considered. Teachers have a critical role to play in keeping school-aged children free from HIV, and in providing emotional and psychosocial support. Building teacher capacity and providing supervision will make an important contribution to quality improvement in schools. Teachers also need to be protected. Government policies should support this and lead to initiatives that reduce the risks facing teachers.

Specific actions:

- **Establish management units** and processes within governments with clear lines of accountability to ensure continuity and effective education-related responses at the country level.
- **Conduct sector appraisal and analysis**, including cross-sector involvement, and insist on coordination of partners.
- **Improve education sector human resource planning** based on information systems which track teacher supply (e.g., attrition and absence), demand for education, and other education factors including costing implications of the expanded role of teachers and schools to meet basic needs as well as academic needs of vulnerable children and young people. Utilise information to improve and accelerate teacher recruitment and replacement and stabilise teaching conditions.
- **Strengthen education statistics and education management information systems** to be more comprehensive and more responsive to national and community needs.
- **Build HIV/AIDS capacity** in teacher training colleges, and train Principals/Head Teachers on school management in AIDS-affected communities, including the management of local information systems that promote local responsibility and expanded vision of schools.

- Develop comprehensive **HIV/AIDS workplace policies** in education compliant with the ILO Code of Practice on HIV/AIDS in the Workplace and utilise partnerships with Teachers Unions and others in development and implementation.

4.3 Expand the role of schools to provide care and support to orphans and vulnerable children

Education systems reach further into communities than most other public institutions, but their resources and potential tend to be underutilised and under-resourced. While the threat and reality of HIV/AIDS are significant challenges, they can also act as a catalyst for accelerating change in schools and education systems, regardless of the status of the epidemic. The sense of urgency HIV/AIDS generates might also be an impetus to transform schools into community resource centres which bridge HIV/AIDS care and prevention needs.

Measures that address HIV/AIDS will reap benefits for education systems overall. For example, creating child-friendly schools¹⁷ which effectively support children affected by HIV will create an environment which benefits all children. Structuring systems in a way that ensures school access for AIDS-affected children is likely to promote enrolment for all vulnerable children. Strengthening teacher training can include building capacity to deal with HIV/AIDS for themselves and their students.

In order to maximise their potential, schools need to facilitate and coordinate multi-sectoral approaches. For example, as described in Education For All, the FRESH framework¹⁸ illustrates how schools can be effective where they prioritise key actions which *together* can address a range of student needs. Such investments can be among the most cost-effective a nation can make to simultaneously improve education, health, and related social conditions.¹⁹

Specific actions:

- **Expand school links with community social services and faith-based organisations** to make them more child and adolescent-friendly and gender-sensitive, and to cater for specific needs of vulnerable groups with health services, food, shelter, psychosocial support and livelihood and household management skills for children without caregivers.
- **Empower Teacher-Parent-Community Associations** to support schools and become involved in school management and other initiatives, such as national school nutrition programs which serve the education, health and nutrition needs of vulnerable children and their teachers.
- Train and support school-community facilitators (including peers and teachers) to build individual knowledge, attitudes and skills for delivering **life skills-based education (especially for HIV/AIDS prevention), nutrition education, and child protection** through schools.

¹⁷ Child-Friendly Schools: go to http://www.unicef.org/girlseducation/index_focus_schools.html

¹⁸ FRESH (2000) - Focusing Resources for Effective School Health is an interagency framework jointly initiated by the UNICEF, World Bank, UNESCO, and WHO, which recommends water and sanitation, policies, skills-based health education, and health services implemented *together* through schools. Go to: <http://www.schoolsandhealth.org/FRESH.htm>

¹⁹ World Bank, PCD, UNICEF, UNAIDS 2002.

- Make school-community linkages for development of **income generation skills and other productive opportunities, such as school gardens.**
- **Coordinate multi-sector and partner involvement** in opening schools up to communities as resource centres and safe spaces for children, involving Ministries of Education, Health, Social Welfare, and Information, the National AIDS Council and United Nations and civil society organisations.
- **Develop plans, policies, and processes** to support the expanded role of schools through partnerships.
- **Advocate** at the highest levels of government, within Ministries of Education, and across sectors for quality education to reach and benefit vulnerable children.

4.4 Protect orphans and other children made vulnerable by HIV/AIDS

The Convention on the Rights of the Child clearly defines what all children deserve, including those made vulnerable by HIV/AIDS. As rights-based institutions, schools can protect students against discrimination and provide opportunities for their voices to be heard. They also provide the opportunity to address the uneven impact of HIV/AIDS on girls and boys.

Orphans in particular need special protection which schools have a responsibility to provide. Establishing and effectively implementing codes of conduct related to school staff are essential to improving the safety and security of schools, and in turn, increasing community confidence and demand for schooling. Professionals and Para-professionals drawn from the community will be important in establishing school and community norms around protection of children and young people – for example, school or community protection officers, guidance officers, and staff or community members who are skilled counsellors and are able to refer to other agencies where necessary.

Skills-based HIV/AIDS prevention education for children, young people, and staff can provide an institutional mechanism for developing the necessary local knowledge, attitudes and life skills for individuals to negotiate and manage relationships and environments which may pose risks. Given that orphans also are losing the opportunity to learn important skills from their parents, such programmes can help them manage their emotions and make positive life decisions. However life skills-based education²⁰ must go beyond HIV prevention to include other social and health issues, intertwined with the survival and development of children and young people. Violence and conflict management, the promotion of gender equality, and protection against discrimination and HIV-related stigma will be important considerations for all children and young people, and can also be made relevant to the circumstances of orphans. Specially focused programmes can help to support young heads of households.

Specific actions:

- Establish school-community campaigns to **reduce discrimination related to gender and AIDS**, especially with regard to orphans and vulnerable children – work through partners across Ministries, civil society, community leaders, families, children and young people.

²⁰ Life skills-based education refers to an interactive process of teaching and learning which enables children and young people to acquire knowledge, attitudes, and skills (i.e., psychosocial and interpersonal skills) which support the adoption of healthy behaviours such as taking greater responsibility for their own lives; making healthy life choices; gaining greater resistance to negative pressures; and minimizing harmful behaviours. Traditional “information-based approaches to education are generally not sufficient to yield change in attitudes and behaviours.

- Address stigma and discrimination in **school policies and practice**.
- **Protect against sexual abuse and exploitation**, especially of girls, by focusing on safety and security in child-friendly schools through establishing and supporting clear codes of conduct, training for school staff, community protection mechanisms and monitoring networks and services.

5. Charting the Way Forward

The increasing severity of the impact of HIV/AIDS on the lives of children is undeniable, especially in sub-Saharan Africa. The challenge of coping with the impact will stretch into the next decade.

Comprehensive action led by governments is urgently required, action that is sustained over the long term. Such action needs to encompass implementation of social policies concerning children affected by HIV/AIDS to improve their food security and their access to basic services such as education and health, to provide protection from stigma, discrimination, and exploitation, and to reduce their own vulnerability to HIV/AIDS.

Genuine and effective partnerships will be critical. Education is a basic human right, which must be central to the response as a means of addressing the life challenges faced by children affected by HIV/AIDS. However, the nature and extent of the challenges go well beyond the means and traditional scope of education. This new reality thus requires the development of networks. It requires drawing together international, national, and local communities and institutional resources in pragmatic ways to deal with “what is”, and transform it into “what should be” for children. The needs of orphans and other children made vulnerable by HIV/AIDS need to be considered in the context of broader education and social initiatives such as poverty-reduction strategies and the United Nations Girls’ Education Initiative. The Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV/AIDS will provide guidance. Partnerships with Ministries, civil society, Teachers’ Unions, communities, children and young people, can directly facilitate responses through schools and with schools.

Political commitment of national governments will be needed to enrich the role of schools. While national leadership has been essential to those countries with more substantial responses, the involvement of local leaders and grassroots organisations – traditional community leaders, faith-based leaders, and their community constituencies, youth organisations and other non-government organisations – is vital for programmes to happen on the ground. Efforts to build leadership at all levels should underpin action.

Resource mobilisation and coordination of the international community around key lines of action will be central to making a difference in the lives of orphans and others made vulnerable by HIV/AIDS. The recognition of the interplay and potential synergy that can be created across sectors and across specific interventions will be important to all players, but critical for donors and those in the international community managing resources and influencing implementation.

Monitoring and evaluation: Ultimately the worth of our collective efforts will be measured in the quality of life of orphans and other vulnerable children. Monitoring the UNGASS indicator on HIV and orphans will provide a benchmark on the comparative rate of school attendance between orphans and non-orphans. But much more information will be required to both inform quality programming for vulnerable children and for monitoring other aspects. These tools are yet to be developed.

References

- Ainsworth, M. and Filmier, D. 2002. Poverty, AIDS and Children's Schooling: A Targeting Dilemma. World Bank, Washington DC.
- Bicego, G., Rutstein, S., Johnson, S. 2003. Dimension of the emerging orphan crisis in sub-Saharan Africa. *Social Science & Medicine*, Vol. 56: 1235-1247.
- Carr-Hill, R. 2002. The Impact of HIV/AIDS on Education and Institutionalising Preventive Education. UNESCO IIEP, Paris.
- Case, A, Paxton, C, Albleidinger, J. 2002. Orphans in Africa. National Bureau of Economic Research. Massachusetts.
- Chesterfield, R, Enge, KI, Martinez-Enge, P. 2001. Girls' Education and Crisis. Prepared for USAID, Global Women in Development. Girls' Education Monitoring System.
- Family Health International. 2001. Care for orphans, children affected by HIV/AIDS and other vulnerable children: a strategic framework. Family health International, Arlington, Virginia.
- Family Support Trust, Zimbabwe. 2003. at <http://www.cindi.org.za/papers/paper5.htm>
- Hepburn, A. 2001. Primary Education in Eastern and Southern Africa: Increasing Access for Orphans and Vulnerable Children in AIDS-affected areas. At http://www.usiad.gov/pop_health/dcofwvf/reports/hepburn.html
- Holzmann R. and S.L. Jorgensen, 2000, "Social Risk Management, A New Conceptual Framework for Social Protection and Beyond". Social Protection Discussion Paper no. 0006, Washington DC: The World Bank (available at : www.worldbank.org/SP).
- Human Rights Watch. 2003. Suffering in Silence: The Links Between Human Rights Abuses and HIV Transmission to Girls in Zambia, New York: January 2003, p. 12.
- International HIV/AIDS Alliance. 2003. Building Blocks: Africa-Wide Briefing Notes for Education. London, UK.
- International Labour Organisation. 2003. On UNICEF Web site @ http://www.unicef.org/aids/index_orphans.html
- Subbarao, K. and Coury, D. 2003. Orphans in Sub-Saharan Countries: A Framework for Public Action. World Bank, Washington DC.
- UNAIDS. 1999. Reducing Girls' Vulnerability to HIV/AIDS: The Thai Approach. Geneva, Switzerland.
- UNAIDS. 2002. Implementation of the UNGASS Declaration of Commitment on HIV/AIDS: Core Indicators. Geneva, Switzerland.
- UNESCO 2000, Education for All. Dakar framework for Action. http://www.unesco.org/education/efa/ed_for_all/framework.shtml

UNICEF, Eastern and Southern Africa Region. 2002. Eastern and Southern Africa Regional Workshop on Children Affected by HIV/AIDS, Kenya.

UNICEF 2003. In Press. Africa's Orphaned Generations. New York. USA

UNICEF and World Bank. 2002. Ensuring Educational Access for Orphans and Vulnerable Children: A Training Module. New York,

UNICEF, UNAIDS, USAID. 2002. Children on the Brink 2002: A Joint Report on Orphan Estimates and Program Strategies. New York, USA.

Wijngaarden, J. and Shaeffer, S. 2003. The impact of HIV/AIDS on children and young people: Reviewing research conducted and distilling implications for the education sector in Asia. UNESCO, Bangkok.

World Bank, The Partnership for Child Development, UNICEF, UNAIDS. 2002. Ensuring Education Access for Orphans & Vulnerable Children, Washington DC,

UNICEF. 2002. Situation Assessment and Analysis of Children in Zimbabwe, Harare.