

## Concept Note

### UNAIDS Inter-Agency Task Team on Education and School Health

#### Symposium and Member's Meeting 2017

**Theme: *Lessons from implementing HIV and school health initiatives: exploring gaps and opportunities for gender-responsive programming in education***

### Background and Rationale

The 2016 Global Education Monitoring Report (GEMR), in examining the central role of education in the realization of all Sustainable Development Goals (SDGs), and the development of individual knowledge and skills to promote sustainable development and global citizenship, underscores the interrelated nature of sexual and reproductive health, gender equality and human rights. The report notes that 'comprehensive sexuality education' is one of the most pressing and universal priorities for the health, well-being and development of young people. Recent evidence indicates that such education not only plays an important role in preventing negative sexual and reproductive health outcomes, but also offers a platform to discuss gender issues and human rights, and promote respectful, non-violent relationships'.<sup>i</sup> Indeed, a 2015 Population Council study found that sexuality and HIV education programs that address gender and power in intimate relationships are five times more likely to be effective in reducing STIs and/or unintended pregnancy than programmes that do not.<sup>ii</sup> Recent implementation experiences furthermore provide increasing evidence that institutionalization of comprehensive sexuality education, and the strengthening of linkages between education and sexual and reproductive health (SRHR) health facilities play a key role in sustainable SRHR outcomes.

A 2015 review of the status of comprehensive sexuality education (CSE) across 48 countries, published by UNESCO in partnership with UNFPA and UNAIDS, found that almost 80 per cent of the countries included in the assessment have policies or strategies that support CSE, but despite this increased political will, a significant gap remained between the numerous global and regional policies in place and the actual implementation on the ground. Implementation challenges cited include the adequacy of teacher training and capacity, nature and extent of parent and community engagement, along with operational issues of delivery such as the position of CSE in national curricula. The same review found that issues of gender and rights are almost consistently absent or inadequately covered through current curricula across all regions of the globe.<sup>iii</sup> In West and Central Africa, where the Sexually Education Review and assessment (SERAT) tool was used to assess 10 out of 13 national sexuality education programmes, fewer than half of the curricula met global standards for required content across all age groups, with gender and social norms identified as the weakest areas.<sup>1</sup>

Beyond sexuality education, the opportunities for learners to engage on gender transformative education content in schools has also been lacking. The GEMR 2016 report revealed that, in a review of over 110 national curriculum framework documents for primary and secondary education in 78 countries for 2005–2015, the concept of gender equality is poorly reflected: less than 15% of the countries integrate key terms such as gender empowerment, gender parity or gender-sensitive, while half mention gender equality.

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<sup>1</sup> Developed by UNESCO in 2012, the Sexuality Education Review and Assessment Tool (SERAT), provides a framework for assessing the scope, content and delivery of sexuality education both in, and out of school.

Highlighting the relationship between education and young people's health and well-being, forms part of the mandate of UNAIDS Inter-Agency Task Team (IATT) on Education and School Health. Created in 2002, the UNAIDS IATT on Education and School Health<sup>2</sup> maintains that education is part of the foundation for successful HIV programmes, as individuals need the requisite knowledge, attitudes, values and skills to adopt healthy behaviours to protect themselves and others from HIV infection, and to act against discrimination.

The evolution of HIV education in response to the shifting landscape of the epidemic has meant that HIV education is being increasingly situated within a broad skills-based health education approach, that is contextually and age-appropriate and gender sensitive, and that addresses CSE, gender-based violence, sexual and reproductive health, stigma and discrimination, and substance use, among other issues that affect HIV risk and promote the healthy development of learners. Taking into consideration this shifting landscape, the IATT is in the process of updating its strategic approach and objectives on HIV education, in recognition of the emerging strategies and opportunities for enhancing education sector responses to broader issues affecting the health and well-being of young people. This update will also enable the IATT to align its efforts to the SDG framework, specifically to SDG 3 on health and well-being, as well as other relevant SDG goals, including Goal 4: quality education; Goal 5: gender equality; and Goal 10 on reducing inequalities.

### **IATT members' meeting and symposium**

As part of its practice, the IATT aims to convene approximately one meeting per year rotating locations among host members. The IATT members volunteer to take turns to host the IATT meetings and symposia, so as to facilitate the engagement, ownership and participation of the IATT members in the meetings to address a wide range of issues from multiple perspectives. Each meeting includes a symposium of approximately one day on a theme of interest to both the host and the other IATT members and critical to advancing the goal and mandate of the IATT. This is coupled with an internal member's meeting where member activities and joint action points are discussed to ensure continued dialogue for better coordination, alignment and harmonization among the members of the IATT.

In light of the foregoing, the proposed thematic focus of the 2017 IATT Symposium is suggested to be '**Lessons from implementing HIV and school health initiatives: exploring gaps and opportunities for gender responsive programming<sup>3</sup> in education**'. The exploration of this theme will build on the last two symposia of the IATT: *Good Quality Education for Adolescent Girls for an AIDS-Free Future* (Washington DC, 2015); *The Role of Schools and the Education Sector in Sexual Violence Prevention* (Cape Town, 2014). The symposium will also present an opportunity for discourse on the evidence and lessons of implementing HIV and health education programmes; efforts towards strengthening interlinkages between education and health sector responses (multisectoral approaches); and, the positioning of approaches that are gender responsive within these efforts - all towards the achievement of SDG goals and targets. Examples of programmes and their implementation lessons will have a particular, although not

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<sup>2</sup> The IATT on Education and School Health was formerly known as the IATT on HIV and Education. Its name and mandate was changed in 2015 to reflect evolving education responses to the HIV epidemic.

<sup>3</sup> The World Health Organization (WHO) defines a gender-responsive policy or programme as one that 'considers gender norms, roles and inequality with measures taken to actively reduce their harmful effects'. It has developed a gender responsive assessment scale (GRAS) in which gender responsiveness can be assessed along a continuum. The WHO GRAS includes five levels: gender unequal; gender blind; gender sensitive; gender specific and, gender transformative – but only the last three of the continuum are considered desirable (WHO. 2011. Gender mainstreaming for health managers: a practical approach. Geneva: WHO).

exclusive focus on Africa.

As in previous years, the IATT annual symposium will be twinned with an internal member's meeting to facilitate member updates, stocktaking and planning, along with the discussion of management, communication and financial matters of the IATT.

### **Symposium Objectives**

- To explore the experiences and lessons learned from implementing HIV and health education programmes, particularly in Africa, and specifically exploring case examples in the host country of Zambia;
- To critically reflect on the gaps and opportunities in gender responsive programmes as part of these HIV and health education initiatives;
- To examine the entry points for applying the lessons, tools and promising practice of gender responsive programming in HIV and health education.

### **Location and Duration**

- IATT Symposium on 10 and 11 May, 2017
- IATT Member's meeting on 12 May, 2017

All meetings will be held in Lusaka, Zambia. Specific location and venue to be confirmed.

### **Participants**

Between 70 and 100 participants are expected to attend the symposium which is open to more than the IATT members. As with previous symposia, the profile of participants will include IATT members, representatives of bilateral and multilateral development organizations, practitioners and researchers from the fields of education – particularly from Ministries of Education and Teacher's Associations, health, and gender, and substantively, representatives of national/regional programme implementing partners of IATT agencies based in the host country and those neighbouring.

### **Outcomes**

- Strengthened knowledge among participants on the successes and bottlenecks of implementing HIV and health education programmes, particularly in Africa
- Strengthened knowledge among participants on the evidence and promising practice of gender responsive HIV and health programmes, based on implementation in the African region
- Needs and priorities identified for supporting governments to incorporate gender responsive approaches into CSE and other prevention programming
- Increased awareness of opportunities and entry-points at national and regional levels to apply gender responsive tools and approaches to existing or future interventions on HIV and health education

## Draft Agenda

The meeting will be a combination of presentations, plenary discussion and facilitated group work to ensure maximum participation and inputs from all stakeholders.

Wednesday 10 May	Thursday 11 May	Friday 12 May
<b>IATT Symposium Day (Day 1)</b>	<b>IATT Symposium Day (Day 2)</b>	<b>IATT Member's meeting</b>
Welcome and Introduction	School-related gender-based violence: evidence, impact and approaches for a holistic response	Welcome and Introduction
Evidence and lessons from implementing HIV and health education programmes, highlighting gender responsive approaches	Promising practices and tools on gender responsive programming	Review of Symposium: specific outputs and next steps
Field visit & Mobile seminar to dialogue with practitioners on implementation experiences	Group discussion on entry points in current or planned HIV and health education interventions in the African region: applying lessons learned	Initiatives and events relevant to the IATT (member updates on key initiatives)
		Updating the IATT <i>A Strategic Approach: HIV &amp; AIDS Education</i>
	<i>Plenary Debrief</i>	Steering Committee and Secretariat update
Group Debrief on Field visits  <i>End of Symposium Day 1</i>	<i>Wrap up and closure</i>  <b>End of Symposium</b>	IATT moving forward
		Wrap up and closure  <b>End of Member's Meeting</b>

<sup>i</sup> UNESCO. 2016. Global Education Monitoring Report 2016. Education for people and planet: Creating sustainable futures for all. Paris, UNESCO. (op. it.)

<sup>ii</sup> Haberland, N.A. 2015. The case for addressing gender and power in sexuality and HIV education: A comprehensive review of evaluation studies. *International Perspectives on Sexual and Reproductive Health*, Vol. 41, No. 1, pp. 31–42.

<sup>iii</sup> UNESCO. UNFPA. UNAIDS. 2015. Emerging evidence, lessons and practice in comprehensive sexuality education. A global review. Paris: UNESCO.