

**MAINSTREAMING THE HIV/AIDS RESPONSE
IN THE VOCATIONAL TRAINING SECTOR
IN BOTSWANA**

**PROMISING PRACTICES,
LESSONS LEARNT AND
THE WAY FORWARD**

Commissioned by the Botswana Training Authority (BOTA)



and German Technical Cooperation (GTZ)



Mainstreaming the HIV/AIDS Response in the Vocational Training Sector in Botswana: Promising Practices, Lessons Learnt and the Way Forward

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FOREWORDS

(1) BY THE CHIEF EXECUTIVE OFFICER OF THE BOTSWANA TRAINING AUTHORITY (BOTA)

The Botswana Training Authority (BOTA) was established in 2000 under the Vocational Training Act of 1998. The principal objectives of the Authority are to coordinate vocational training activities in order to achieve better integration and harmonisation of the Vocational Training (VT) System, to monitor and evaluate the performance of the VT system, and to advise the Minister on policy related issues of VT.

Some of the functions of BOTA, as outlined in the VT Act, are to promote access to training opportunities in VT, to register, accredit and monitor both public and private VT institutions (including workplaces), to develop and review national training standards in cooperation with industry, to register and accredit teachers of VT, and to regulate assessment and testing.

Based on Botswana's National HIV/AIDS Strategy, BOTA has recognised its responsibility to mainstream HIV/AIDS in line with the multi-sectoral approach. BOTA developed its HIV/AIDS policy and a strategy to educate and support its employees on HIV and AIDS issues.

In addition, an HIV/AIDS Division was established in 2002 to coordinate the HIV/AIDS activities in the VT sector as well as to support the institutions with training and technical expertise. After more than one year of extensive and successful work of the division, BOTA took over the majority of the budget of the division. The extremely high commitment to HIV/AIDS is reflected in BOTA's *Strategic Plan 2004–2008* where HIV/AIDS is one of the "Key Result Areas".

In 2004, discussions were held at BOTA and at GTZ Headquarters in Germany. At GTZ the Regional Department, the Department for Planning and Development and the Sector Projects on HIV/AIDS were met with. The purpose of the meetings were: how to evaluate the achievements and impact of the first two years of BOTA's HIV/AIDS Division's activities, how to make them accessible to a wider audience, and what the way forward for BOTA could look like. As a result this study has been conducted by Vanessa Kruger of Project Evaluation and Research Services (South Africa) in October 2004.

This report illustrates how "HIV/AIDS unit standards" will be included as generic skills in the curricula of VT institutions. One of the outcomes in this report describes in detail what the division has done in the past two years, what lessons have been learnt, and which of its activities can also be used as best practices – "promising practices" – in other projects in the country and the region. In addition, a knowledge, attitude and behaviour study was commissioned by BOTA and conducted by the Botswana Institute of Development Policy Analysis (BIDPA) from January to March 2005 to further elaborate the impact of the Division's work.

This report marks yet another milestone in the work in the field of mainstreaming the HIV/AIDS response in the VT sector in Botswana. We hope that it will be of use not only to people working in the field of HIV/AIDS in Botswana, but also to people abroad in supporting the common fight against HIV/AIDS.

I would like to express my heartfelt thanks to those who made the work so successful in bringing forward the implementation of HIV/AIDS in the VT sector. Special thanks to the author of the report, Vanessa Kruger, for her accurate and detailed analysis of mainstreaming HIV/AIDS strategies within BOTA and in Botswana's VT sector.

Abel Modungwa

(2) BY THE GERMAN TECHNICAL COOPERATION (GTZ) ADVISOR AND TEAM LEADER AT BOTA

Botswana is one of the countries most hit by the HIV/AIDS pandemic. Thirty-seven and a half per cent of the pregnant women aged 15 to 49 (based on the *2003 Sentinel Surveillance Report* provided by NACA) and 17% of the total population (based on the Botswana Central Statistics AIDS Impact Survey of 2004) are estimated to be infected with HIV. The Government of Botswana is taking the matter of HIV/AIDS very seriously. A national policy on HIV and AIDS was adopted through a Presidential Directive in 1993. A National Strategic Framework for the response to HIV/AIDS has been developed and is being renewed every five years. The various organisations working in the field in Botswana are conducting their activities in accordance with this Framework. The National AIDS Coordination Agency (NACA) is coordinating the national HIV/AIDS response at various levels and sectors, commonly known as the “multisectoral approach”.

HIV/AIDS is more than a health issue. It has an impact on all aspects of society. The vocational training sector offers a unique opportunity for access to an age group most affected by HIV/AIDS as their main target group: young adults. At the same time it is this age group which contributes significantly to the development of the countries' economy. So HIV/AIDS affects the most productive part of the population. A growing economy like Botswana cannot afford young adults already becoming infected during their time of training before they enter the world of work, while in the world of work itself the demand for skilled workers rises because people fall sick or die of AIDS.

The Governments of Botswana and Germany were aware of this problem – and opportunity to act on it. But they were also aware that not much had been done in the past to target that specific sector, people in training at school-type training institutions or in training at the workplace. In October 2000, negotiations had started between the Governments of Botswana and Germany as well as the German Technical Cooperation (GTZ) and one of its project partners, the Botswana Training Authority (BOTA), to introduce an HIV/AIDS mainstreaming component into the existing project on the reform of the vocational training system in Botswana. A first result of these negotiations was a baseline study, commissioned by GTZ in 2001, to explore the framework conditions and a possible strategy for the implementation of such a component. The report was published in 2002: *Mainstreaming HIV/AIDS in the Vocational Education & Training Sector in Botswana* by Simon Muchiru and Antje Becker (BOTA/GTZ 2002).

A memorandum of understanding was signed between BOTA, GTZ and the German Development Service (DED) in November 2001 to introduce an HIV/AIDS Division at BOTA, responsible for the mainstreaming of HIV prevention and care strategies into the vocational training institutions in order to reduce the spread of HIV in the sector. A development worker was seconded by DED to BOTA as coordinator of the division. GTZ took over the financing of all activities, the necessary equipment and the salary of a local HIV/AIDS field officer. The work of the division started in September 2002 with the arrival of the German HIV/AIDS Coordinator.

This evaluation study and report was commissioned by GTZ and BOTA and sponsored by the GTZ Sector Project “AIDS Control in Developing Countries” and the BACKUP initiative.

GTZ recognises the challenge posed by the HIV/AIDS pandemic to its mission. To prevent its further spread and to mitigate its negative effect, GTZ aims to integrate HIV/AIDS-related measures that need to be addressed by all sectors. Today, there is still a window of hope for many regions if governments and development actors in all sectors acknowledge the exceptionality of the HIV/AIDS crisis and devise sector-specific responses to it. To contribute towards the fight against HIV/AIDS, the sector project AIDS-Control in Developing Countries supports the documentation and distribution of relevant practices with the hope that other national and international partners can use these experiences to develop, improve or extend their own approach to tackling the problem of HIV/AIDS after adapting them to the social, cultural and political framework of the relevant context. Cultural norms and beliefs must be addressed, recognising both the key role they may play in supporting prevention and treatment efforts and the potential they have to undermine them.

Stefan Erber

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LIST OF ABBREVIATIONS

AIDS	Acquired Immunodeficiency Syndrome
BACKUP	GTZ BACKUP Initiative: Building Alliances – Creating Knowledge – Updating Partners
BBCA	Botswana Business Coalition against AIDS
BNVQF	Botswana National Vocational Qualifications Framework
BOTA	Botswana Training Authority
BHRIMS	Botswana HIV/AIDS Response Information Management System
CEO	Chief Executive Officer
CBO	Community Based Organisation
DED	German Development Service (Deutscher Entwicklungsdienst)
DMSAC	District Multi-Sectoral AIDS Committees
DVET	Department of Vocational Education and Training
GTZ	German Technical Cooperation (Deutsche Gesellschaft für Technische Zusammenarbeit GmbH)
HIV	Human Immunodeficiency Virus
IEC	Information, Education and Communication
KAB	Knowledge, Attitudes and Behaviour
MLHA	Ministry of Labour and Home Affairs
NAC	National AIDS Council
NACA	National AIDS Coordinating Agency
NGO	Non-governmental Organisations
NSF	National Strategic Framework
RQF	Regional Qualifications Framework
SWBL	Structured Work-Based Learning
VMSAC	Village Multi-Sectoral AIDS Committees
VT	Vocational Training

EXECUTIVE SUMMARY

This report documents the findings and recommendations of a three-week short-term assignment in October 2004, commissioned by the German Technical Cooperation (GTZ) and the Botswana Training Authority (BOTA) to provide them with input on knowledge management concerning mainstreaming the HIV/AIDS response in the vocational training (VT) sectors, and introducing HIV/AIDS workplace concepts into vocational training at the workplace.

Section 1 provides a brief overview of the terms of reference of the assignment, and summary details of the process followed in order to address the terms of reference. This section also includes a brief overview of the German contribution to BOTA and HIV/AIDS interventions. The section concludes with a summary of HIV/AIDS in Botswana, with specific reference to the Botswana National Strategic Framework for HIV/AIDS.

Section 2 provides a brief overview of BOTA and its roles and functions, with specific reference to its strategic direction and the location of HIV/AIDS in the organisational framework.

Section 3 presents the findings of the data collection process as per the terms of reference.

The current mainstreaming concepts, structures and strategies are described and discussed under four main headings, namely:

- (a) Formal institutionalisation of HIV/AIDS into the structures and strategic direction of BOTA
- (b) Inclusion of HIV/AIDS into the formal learning processes
- (c) Promotion of coordination and linkages with key stakeholders, and
- (d) Provision of support to public and private training institutions.

Promising practice examples and lessons learnt were identified and documented, and include:

- The inclusion of HIV/AIDS as a key result area in the BOTA strategic plan
- The inclusion of HIV/AIDS in the Botswana National Qualifications Framework (BNVQF)
- The participatory development of guidelines for preparing curricula
- A compulsory HIV/AIDS policy and activity requirement for registration and

accreditation of training institutions

- The provision of support to training institutions to adopt and operationalise a broad definition of mainstreaming (including the establishment of requisite structures)
- The development of a model HIV/AIDS policy for training institutions to cover both learners and staff
- The use of 'edutainment' as a HIV/AIDS awareness raising tool
- The production and dissemination of the HIV/AIDS newsletter *Emang*, a learner driven publication aimed at awareness-raising.

Lessons learnt or issues to consider have been identified as:

- The need for more systematic BOTA inter-departmental cooperation
- The need to integrate HIV/AIDS with other "cross-cutting themes", that is, within all learning areas
- The need to review the development process of the HIV/AIDS 'unit standards' (including outcome statements as the basis for the curriculum, and assessment) and their level of complexity
- The need to clarify roles precisely so as to ensure that interventions are not outside the mandate
- The need to develop different strategies for the different categories of training institutions.

Achievements and constraints in project coordination are discussed with specific focus on the role that BOTA plays in ensuring alignment with the HIV/AIDS National Strategic Framework coordination requirement.

Section 3 also provides a brief analysis of current impact monitoring systems, makes proposals on how extracurricular activities could possibly be transformed into formal curricula, and raises issues to consider in the extension of concepts to training programmes in companies.

The section concludes with a brief overview of possible knowledge management, with particular reference to contributions to the GTZ Product Oriented Knowledge Management Process and Strategy for Technical Education and Vocational Training in sub-Saharan Africa.

Section 4 sets out the conclusion drawn and recommendations proposed. In respect of the institutionalisation of HIV/AIDS into BOTA, the following areas of focus have been identified :

- Matching capacity with strategic interventions
- Role clarification to ensure activities are within its mandate
- Development of more systematic linkages of HIV/AIDS to BNVQF.

In respect of inclusion of HIV/AIDS into the formal learning process, the following focus areas have been identified :

- Review and simplification of Levels 1, 2 and 3 Unit Standards
- Development of other HIV/AIDS-related qualifications
- Capacity building of training institutions to deliver programmes linked to unit standards
- Integration with gender and equity/access cross-cutting themes.

Focus areas related to coordination and linkages with key stakeholders:

- Continued representation and participation of BOTA in NACA
- Continued convening of the National HIV/AIDS VT committee by BOTA
- Support organisations to report back systematically to constituencies
- Establish a regional forum to promote a Regional Qualification Framework (RQF) including HIV/AIDS issues
- Promotion of networking between organisation and training institutions
- Promotion of networking between learners through the *Emang* tool.

It is proposed that support to public and private training institutions be restructured to provide for the needs of the following categories

- Public training institutions – reduce level and nature of support
- Private training institutions – focused support to ensure that a broad definition of mainstreaming is adopted
- Training programmes in companies – promote alignment with the BNVQF.

BOTA appears to be well positioned to become a centre of excellence for the mainstreaming of the HIV/AIDS response in the VT sector, and other institutions in the region could make use of BOTA's promising practices and lessons learnt for their own activities in the field of combatting HIV/AIDS in VT.

SECTION 1: OVERVIEW AND BACKGROUND

1.1. TERMS OF REFERENCE FOR THE ASSIGNMENT AND PROCESSES

In October 2004, the Sector Project “AIDS Control in Developing Countries” of the German Technical Cooperation (GTZ) and the HIV/AIDS Division of the Botswana Training Authority (BOTA) commissioned Vanessa Kruger of Project Evaluation and Research Services (South Africa) to undertake a three week short-term assignment in Botswana. This assignment was financed by the BACKUP initiative.¹

The focal areas of the assignment were “Knowledge management concerning the mainstreaming of the HIV/AIDS response in the vocational training sector”, and “Introducing HIV/AIDS concepts into vocational training at the workplace”.² The terms of reference were as below.

The focal areas of the assignment were “Knowledge management concerning the mainstreaming of the HIV/AIDS response in the vocational training sector”, and “Introducing HIV/AIDS concepts into vocational training at the workplace”.

Task 1: Knowledge management – Mainstreaming the HIV/AIDS response in the vocational training sector

- Analyse “Mainstreaming the HIV/AIDS response in the vocational training sector in relation to existing concepts, structures and strategies”:
 - Identify and document promising practice
 - Identify achievements and constraints as a coordinating body.
- Analyse the existing monitoring systems regarding the impact of HIV/AIDS interventions
- Assist in defining the role of BOTA's HIV/AIDS Division in the transformation process of HIV/AIDS extracurricular activities into the HIV/AIDS curricula in the vocational training sector
- Develop modules for mainstreaming of the HIV/AIDS response in vocational training that can be transferred to other countries/projects/organisations
- Develop ideas on how mainstreaming the HIV/AIDS response in the vocational training sector can be included in the GTZ Strategy for Technical Education and Vocational Training in sub-Saharan Africa.

Task 2: Extension/adaptation of existing concepts to also incorporate mainstreaming HIV/AIDS activities into structured work-based learning in companies

- Assess the current implementation of HIV/AIDS activities in structured work-based learning in companies:
 - Define ways of adapting existing HIV/AIDS concepts from school-type vocational training institutions to HIV/AIDS interventions in structured work-based learning in companies.
- Develop effective strategies of knowledge management and networking at the national level
 - Assist in improving strategies of knowledge transfer on the national level (two way information)
 - Improve strategies in sharing promising practices on the national level
 - Expand strategies in mainstreaming the HIV/AIDS response in vocational

¹ Supporting partner countries to make better use of global financing mechanisms in the fight against HIV/AIDS, TB and Malaria – (www.gtz.de/backup-initiative)

² As per the Terms of Reference for the assignment

- training on the regional and international level
- Choose strategies that ensure effective management of knowledge on the international level.
- In order to address the terms of reference, two main data collection methods were adopted, these being:
 - Semi-structured interviews with BOTA personnel and key stakeholders,³ and
 - Review relevant documents from BOTA and elsewhere.⁴
- Interviews were conducted with BOTA personnel who are responsible for different aspects of mainstreaming HIV/AIDS responses, and with personnel who provided information on the functions and operations of BOTA
- Interviews were conducted with representatives of some Ministries, the National AIDS Coordination Agency (NACA), and other related external stakeholders
- A sample of public and private training institutions were visited, and the HIV/AIDS coordinators and/or members of HIV/AIDS committees were interviewed
- A sample of businesses with training wings operating in Gaborone were either visited or interviewed telephonically
- The terms of reference and assignment work plan were discussed and agreed to by a reference group constituted by:
 - Ulla Tschoetschel German Development Service (DED) seconded to BOTA as HIV/AIDS Coordinator
 - Mothebe Madanika BOTA HIV/AIDS Field Officer
 - Stefan Erber GTZ Advisor and Team Leader at BOTA.

This reference group provided process management of the assignment, set up interviews, and provided relevant documentation and comments on the draft report. In agreement with the reference group, the terms of reference were refined, the assignment work plan developed, and the structure of the report agreed to.

1.2. THE GERMAN CONTRIBUTION TO BOTA AND HIV/AIDS INTERVENTIONS IN BOTSWANA

GTZ coordinates two projects in terms of the bilateral development cooperation agreement between the German and Botswana Governments. GTZ provides technical assistance to BOTA through the project 'Reform of the Vocational Training Sector in Botswana'. The HIV/AIDS component of this project constituted the focus of this assignment. The German Development Service (DED) provides additional German support to this intervention, through the placement of a full-time HIV/AIDS Coordinator in BOTA for a three-year period. DED supports a number of other development interventions in Botswana at district and Government level.

The second main GTZ supported project is that of 'AIDS Control in Botswana'. This project aims at building the multi-sectoral approach to HIV/AIDS management and control in Botswana at district level.

1.3. HIV/AIDS IN BOTSWANA

The prevalence of HIV/AIDS in Botswana is well documented and Botswana is considered to be one of the countries with the highest HIV/AIDS infection rate in the world. The Botswana 2003 Second Generation HIV/AIDS Surveillance Report⁵ calculates the national

GTZ coordinates two projects in terms of the bilateral development cooperation agreement between the German and Botswana Governments.

Botswana is considered to be one of the countries with the highest HIV/AIDS infection rate in the world. The Botswana 2003 Second Generation HIV/AIDS Surveillance Report calculates the national HIV prevalence at 37.4%.

³ See Appendix 1: List of persons interviewed

⁴ See Appendix 2: List of documents reviewed

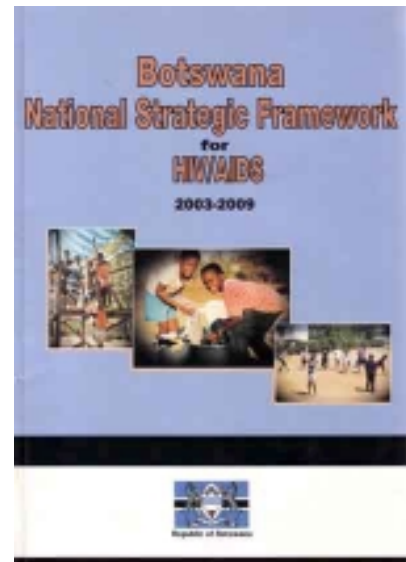
⁵ Surveillance is conducted through the National AIDS Coordinating Council (NACA), located within the Ministry of State President and is carried out in collaboration with national and international organisations

The Botswana Government has recognised the epidemic proportions of HIV/AIDS and has formalised its commitment and intervention ...

HIV prevalence at 37.4%. The highest prevalence is recorded in the 25–29 year-old category, with women having significantly higher prevalence rates than men.

The Botswana Government has recognised the epidemic proportions of HIV/AIDS and has formalised its commitment and intervention through the development and implementation of a *National Strategic Framework for HIV/AIDS 2003–2009*. The purposes of this framework⁶ are to:

- Articulate, disseminate and educate the public at large on agreed national priorities and strategies
- Provide clear guidance for government Ministries, districts, non-governmental organisations (NGOs) and the private sector to enable them to work in a collaborative manner in achieving the intended goal of the National Response to



The Botswana National Strategic Framework for HIV/AIDS 2003–2009

HIV/AIDS (i.e. to eliminate the incidence of HIV and reduce the impact of AIDS in Botswana).

NACA has been tasked with management of the operationalisation of the National Response in line with the National Strategic Framework.

The President of the Republic of Botswana formally provides the political leadership of the national response by chairing the National AIDS Council (NAC), which is:



BOJA Delegation at the World AIDS Day 2004 in Gaborone

“... the highest national level coordinating body mandated to advise government on HIV/AIDS matters in the country, concerned with oversight and guiding the expanded national response to HIV/AIDS”⁷

HIV/AIDS interventions at district and local (village) level are coordinated through DMSAC and VMSAC

HIV/AIDS interventions at district and local (village) level are coordinated through District Multi-Sectoral AIDS Committees (DMSAC) and Village Multi-Sectoral AIDS Committees (VMSAC).

⁶ p.9, Botswana National Strategic Framework for HIV/AIDS 2003–2009.

⁷ Ibid, p. 18

SECTION 2: BOTA AND THE HIV/AIDS DIVISION

2.1 OVERVIEW OF BOTA

Based on the Vocational Training Act of 1998, BOTA was established in 2000 as a parastatal under the Ministry of Labour and Home Affairs (MLHA) and has been given the mandate to develop, coordinate and promote vocational training up to certificate level.

The BOTA **Mission** is to “coordinate an integrated vocational training system that meets the needs of learners and industry through the development of standards, quality assurance, policy advice, and monitoring and evaluation”.

BOTA is governed by a Board of Directors and managed by a Chief Executive Officer (CEO). The organisational structure reflects four Departments,⁸ these being

- The Office of the CEO
- Quality Assurance Department
- Finance and Administration Department
- Planning and Research Department



BOTA office building in Gaborone

BOTA was established in 2000 as a parastatal under the Ministry of Labour and Home Affairs (MLHA) and has been given the mandate to develop, coordinate and promote vocational training up to certificate level.

Within the Planning and Research Department, the organisational structure also provides for the post of an HIV/AIDS Coordinator and Field Officer.

The **main activities** of BOTA are to:⁹

- Promote access to training opportunities on an equitable basis
- Accredite, register and monitor all training institutions to ensure that they adhere to the required standards and quality of training
- Develop and review national training standards for the level within the framework to form a clear and consistent system that is relevant to Botswana’s economy
- Guide the development of curricula and learning material in vocational training
- Register trainers and assessors for vocational training to ensure that standards of teaching and assessment are maintained.

2.1.1 Botswana National Vocational Qualification Framework (BNVQF)

BOTA is responsible for the establishment of the Botswana National Vocational Qualifications Framework (BNVQF),¹⁰ which sets out three main levels of qualifications, these being:

- BNVQF Level 1 (National Foundation Certificate)
Broad-based initial training reflecting competence to perform, under supervision, a limited range of work activities
- BNVQF Level 2 (National Intermediate Certificate)

BOTA is responsible for the establishment of the Botswana National Vocational Qualifications Framework (BNVQF) which sets out three main levels of qualifications, BNVQF Levels 1, 2 and 3.

⁸ A fifth department was added in April 2005 – the Structured Work-Based Learning Department.

⁹ BOTA information pamphlet: The new vocational training system of Botswana

¹⁰ BOTA information pamphlet August 2004: Curriculum Division and Training Standards Division

Competence to perform, with minimum guidance and supervision, routine jobs and some non-routine jobs

- BNVQF Level 3 (National Certificate)
Competence to perform tasks associated with skilled jobs of non-routine and complex nature and indicating potential for supervisory functions.

Each level of the BNVQF has a predetermined number of credits required as set out

Level	Credit requirements	
Level 1: National Foundation Certificate	Literacy	8
	Numeracy and/or Technology	8
	Communication and/or Interpersonal	8
	HIV/AIDS	2
	Vocational skills	14
	Total credits	40
Level 2: National Intermediate Certificate	Related to specific field	20
	Level 2 or above	40
	Total credits	60
Level 3: National Certificate	Related to specific field	80
	Level 3 or above	40
	Total credits	120

below.

Generic skills (i.e. Literacy, Numeracy and/or Technology, Communication and/or Interpersonal, and HIV/AIDS) credit requirements are compulsory at Level 1. At Level 2 and 3, the HIV/AIDS credit requirements is optional and learners are able to elect in which areas they will acquire the required credits.

One credit is equivalent to 10 notional hours which includes formal tutoring, practical work, information retrieval, self-directed study, work-based activities that lead to formal assessment, practice (gaining, applying and refining skills), undertaking all forms of assessment, and counselling, mentoring and reflection.

Accreditation regulations allow for the accreditation of training institutions for the delivery of non-BNVQF programmes. Criteria for the validation of these training programmes have been established.

2.1.2 Vocational training institutions

Vocational training is offered by a number of different training institutions in Botswana. A training institution according to the Vocational Training Act means, "A private or public centre, organisation, employer or person, providing vocational training". These institutions can be broadly classified as below.

Training at the workplace

A number of companies operating in Botswana have their own in-house training programmes, designed specific to meet the internal skills development needs. The use of the workplace as a learning environment will gain more and more importance in the near future.

Institutional or formal training institutions

These are formal colleges that fall under the various government Ministries. The Technical Colleges are managed by the Ministry of Education and are the administrative responsibility of the Department of Vocational Education and Training (DVET). Other Ministries manage their respective colleges (e.g. the Ministry of Health is responsible for nursing colleges).

A training institution according to the Vocational Training Act means, "A private or public centre, organisation, employer or person, providing vocational training".



Introduction of BOTA's IEC material at the Botswana Power Cooperation (BPC) Training Center in Gaborone

Brigades

These are community-based training institutions, which fall under the Ministry of Education and obtain administrative support from DVET. The Brigades are government subsidised (at a specified amount per month per registered student) and are required to undertake their own additional fundraising efforts through production and other activities. Community representatives govern the Brigades.



Visit of the BOTA HIV/AIDS Division at the Moseitse Brigades near Francistown

The Brigades offer vocational training in line with trade test requirements and curricula, and some also offer an academic programme, on a part-time basis, to allow adult learners access to school leaving certificates.

Private training institutions

There are a number of private training institutions which offer different vocational training programmes. These programmes are generally accredited through institutions and organisations outside Botswana, and are offered in Botswana on a franchise basis. BOTA

has begun a process of registration of these institutions and the validation/accreditation of the programmes offered.

Accreditation of qualifications

Within the vocational training sector accreditation takes a number of different forms, amongst which are:

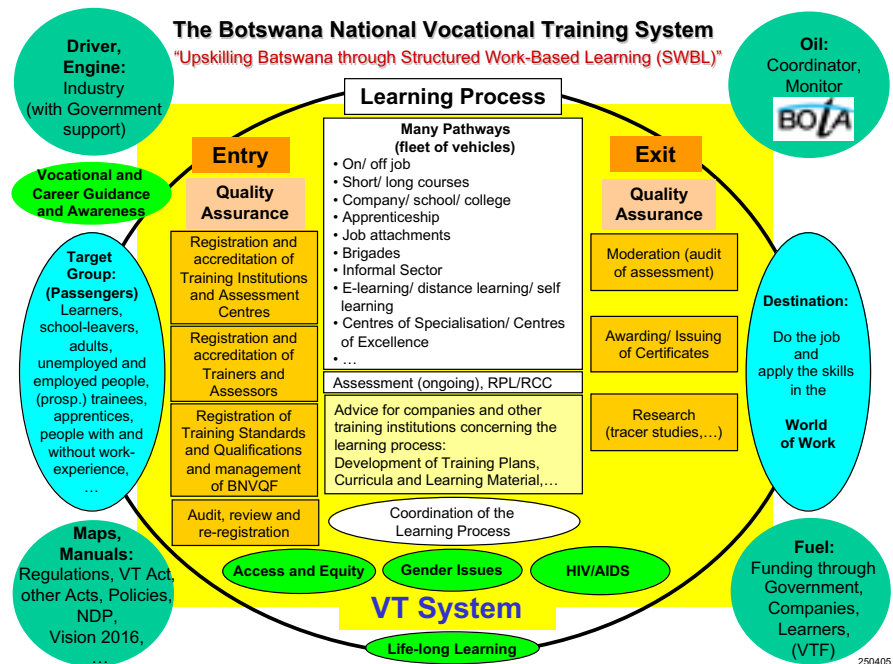
- BNVQF certification (in the process of being developed)
- Non-BNVQF aligned certifications, which include:
 - Trade certification
 - Certification through Ministries (e.g. registration with Nursing Councils)
 - Private training institution certification (through the franchising system)
 - In-house company certification (recognised within the company only).

BOTA's scope of activity is to integrate all vocational training in line with a national vocational qualifications framework, the BNVQF.

2.1.3 Structured Work-Based Learning (SWBL) concept

As stipulated in its Mission Statement, BOTA has the responsibility to coordinate and integrate vocational training that meets the needs of learners and industry, through the development of standards, quality assurance, policy advice, and monitoring and evaluation. Integral to this definition and successful implementation is the Structured Work-Based Learning (SWBL) approach.

The Structured Work-Based Learning concept provides for a range of learning pathways, linked to established quality assurance processes.



The Botswana National Vocational Training System: “Upskilling Batswana through Structured Work-Based Learning”

In summary,¹¹ the SWBL concept/approach is based on the following underlying principles and definitions:

- *Structured* learning means that learning should be planned, systematic and coherent and based on agreed processes and outcomes that are quality assured and monitored.

¹¹ Summary extracted from BOTA presentation on “Upskilling Batswana through SWBL”, 11 October 2004

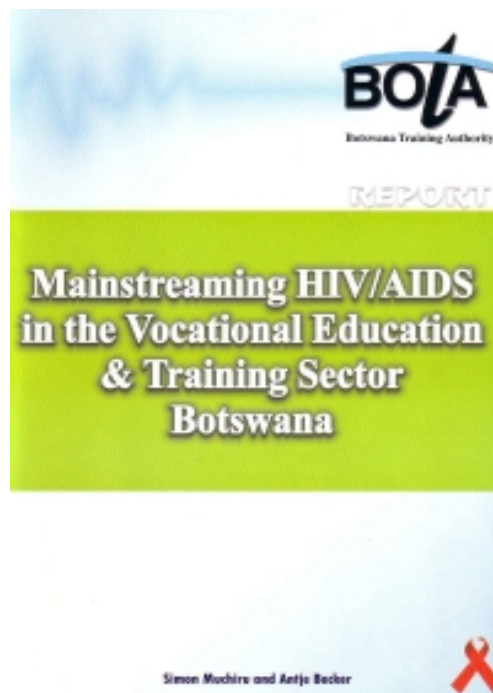
- The term *work-based* refers to the approach whereby learning should be based on the requirements of the workplace, in relation to both content and, wherever possible, the physical delivery of training. Training can be delivered at either the workplace or any other school-type training institutions (public or private) but must be related to the requirements of the workplace.
- The use of the term *learning*, as opposed to ‘training’ or ‘education’, reflects a conceptualisation based on outcomes rather than inputs. It is important that learning takes place so that learners acquire additional skills and competencies that make them ready for the world of work. A learner has to acquire not only technical learning,¹² but also methodological, human and social¹³ competencies to be able to do the job effectively.

The SWBL concept provides for a range of learning pathways, linked to established quality assurance processes. The learning process is underpinned by principles of access and equity, gender and HIV/AIDS consideration, as well as the promotion of lifelong learning.

2.2. BOTA HIV/AIDS DIVISION

The BOTA HIV/AIDS Division was established through an agreement between the Botswana and German Governments in October 2002 to add an HIV/AIDS prevention component to BOTA, with the goal of support the integration or ‘mainstreaming’ of HIV/AIDS prevention and care strategies into existing vocational training institutions, in order to reduce the spread of HIV and STDs in the sector.

The BOTA HIV/AIDS Division is located within the Planning and Research Department of BOTA and is staffed by a coordinator, funded by the German Development Service (DED)¹⁴ and a HIV/AIDS Field Officer employed directly by BOTA. The Memorandum of Understanding between BOTA, GTZ and DED focuses on HIV/AIDS awareness, development of strategies, policies and activities, development of information, education and communication materials, and the coordination and integration of HIV/AIDS interventions within the vocational training sector, in accordance with the national HIV/AIDS policy and objectives and *Vision 2016*.¹⁵ Core activities include policy development, establishing networks, provision of technical support and programme development and evaluation.



BOTA/GTZ HIV/AIDS Baseline Study Report 2002

Until March 2004, GTZ has funded all the activities and equipment of the HIV/AIDS Division. With the implementation of the Second Strategic Plan 2004–2008, BOTA itself has taken over full responsibility for its HIV/AIDS activities and is funding the majority of the HIV/AIDS activities out of its own budget.

The term work-based refers to the approach whereby learning should be based on the requirements of the workplace, in relation to both content and, wherever possible, the physical delivery of training.

The BOTA HIV/AIDS Division was established through an agreement between the Botswana and German Governments in October 2002 to add an HIV/AIDS prevention component to BOTA, with the goal of support the integration or ‘mainstreaming’ of HIV/AIDS prevention and care strategies into existing vocational training institutions, in order to reduce the spread of HIV and STDs in the sector.

¹² Learning competencies: life long learning/learn and work independently/problem solving

¹³ Human and social competencies: team work/accepting responsibility/safety and environmental aspects

¹⁴ The position of HIV/AIDS Coordinator will be handed over to a BOTA employee in September 2005.

¹⁵ Republic of Botswana (1997) *Vision 2016. Towards Prosperity for All: Long Term Vision for Botswana*. Gaborone: Presidential Task Group.

BOTA has identified the mainstreaming of HIV/AIDS responses as a Key Result Area and has developed four goals that are to be met within this key result area.

2.3. HIV/AIDS WITHIN BOTA'S STRATEGIC DIRECTION

The BOTA *Second Strategic Plan and Plan of Operations 2004–2008* sets out seven 'Key Result Areas'. BOTA has identified the mainstreaming of HIV/AIDS responses as a Key Result Area (No. 4) and has developed four goals that are to be met within this key result area. Responsibility for the achievement of the different goals has been allocated to different departments.

Key Result Area 1	Implement the Botswana National Vocational Qualifications Framework (BNVQF)
Key Result Area 2	Support quality systems in vocational training
Key Result Area 3	Extend and maintain national, regional and international strategic partnerships
Key Result Area 4	Mainstream HIV/AIDS into the vocational training system in accordance with the National Strategic Framework
Key Result Area 5	Broaden the funding base for vocational training
Key Result Area 6	Improve communication and knowledge management in vocational training
Key Result Area 7	Strengthen BOTA's organisational capacity

Goal		Driver
Goal 4.1	To drive the coordination of HIV/AIDS interventions amongst training institutions and key stakeholders	HIV/AIDS Coordinator
Goal 4.2	To support and augment the efforts of training institutions in HIV/AIDS interventions and programmes	HIV/AIDS Coordinator
Goal 4.3	To promote the inclusion of HIV/AIDS unit standards in vocational training	Training Standards Coordinator & Curriculum Coordinator
Goal 4.4	To mainstream HIV/AIDS within BOTA	Human Resources Manager & HIV/AIDS Coordinator

Indicators, targets and activities for the 2004 – 2008 planning cycle have been developed for each of the goals as set out below.

Goal 4.1: To drive the coordination of HIV/AIDS interventions amongst training institutions and key stakeholders

<i>Indicators</i>	<i>Summary of annual targets</i>	<i>Activities</i>
Effectiveness of communication	Establishment of required committees, networks etc. and effective operations, increased independence and functioning without BOTA support	4.1.1. Support the set-up and work of HIV/AIDS committees, networks etc. amongst training institutions and stakeholders, and monitor their performance 4.1.2. Support joint activities between training institutions, stakeholders and local or district HIV/AIDS organisations
Number of joint activities with local and district HIV/AIDS organisations	Increased cooperation with institutions and implementation of activities by institutions with local or district HIV/AIDS organisations	

Goal 4.2: To support and augment the efforts of training institutions in HIV/AIDS interventions and programmes

<i>Indicators</i>	<i>Summary of annual targets</i>	<i>Activities</i>
Number of training institutions having HIV/AIDS interventions and programmes	Increased number of training institutions supported	4.2.1. Assist training institutions (including work-based) in counselling training, peer education and extra-curricular activities 4.2.2. Promote use of IEC materials 4.2.3. Evaluate the HIV/AIDS KAB amongst learners
HIV/AIDS awareness/knowledge amongst learners	Knowledge, attitudes and behaviour (KAB) study done and positive change noted	

Goal 4.3: To promote the inclusion of HIV/AIDS unit standards in vocational training

<i>Indicators</i>	<i>Summary of annual targets</i>	<i>Activities</i>
Quality Assurance Committee/Board approval of HIV/AIDS unit standards as compulsory component of national awards	Board approval obtained and HIV/AIDS unit standards registered and reviewed	4.3.1. Quality assure HIV/AIDS unit standards and register them 4.3.2. Assist vocational training institutions in the integration of the HIV/AIDS unit standards into their curricula
Number of vocational training institutions integrating HIV/AIDS education into curricula	HIV/AIDS Level 1 curriculum and learning materials developed, pilots conducted and increased number of institutions that have integrated HIV/AIDS into curricula increased.	

Goal 4.4: To mainstream HIV/AIDS within BOTA

<i>Indicators</i>	<i>Targets</i>	<i>Activities</i>
BOTA HIV/AIDS strategy developed, implemented and evaluated. Representation of HIV/AIDS issues in departmental activities	Strategy developed, implemented and evaluated	4.4.1. Develop BOTA HIV/AIDS strategy 4.4.2. Implement BOTA HIV/AIDS strategy in all BOTA departments 4.4.3. Evaluate BOTA HIV/AIDS strategy

SECTION 3: FINDINGS

3.1. MAINSTREAMING CONCEPTS, STRUCTURES AND STRATEGIES

The mainstreaming approach has been informed by, and is in alignment with, the National Strategic Framework for HIV/AIDS (NSF).

The mainstreaming approach has been informed by, and is in alignment with, the National Strategic Framework for HIV/AIDS (NSF).¹⁶ In summary, this framework requires :

- Actively engage in the National AIDS Coordinating Agency (NACA), through consistent representation, to ensure coordination of efforts



NACA office building in Gaborone

- Promote coordinated responses through the development of strategic partnerships and/or forums
- Share information and knowledge across the sector
- Include HIV/AIDS as part of the core business of the organisation, as part of the actual workplace environment and in relation to client population.

BOTA's HIV/AIDS activities can be divided into four groups, these being:

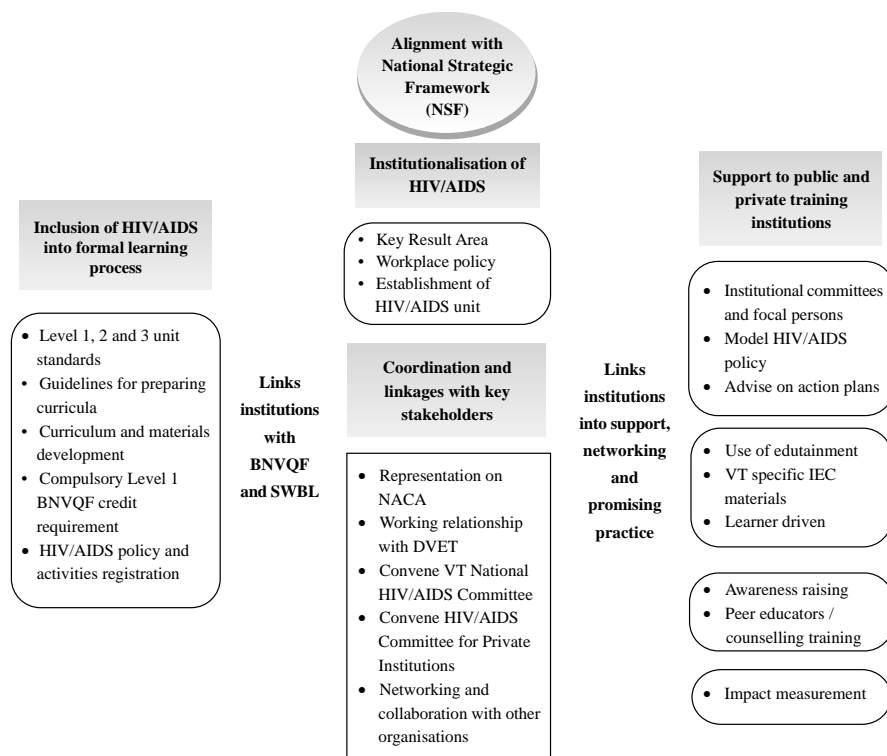
- Inclusion of HIV/AIDS into the formal learning process
- Promotion of coordination and linkages with key stakeholders
- Provision of support to public and private training institutions
- Formal institutionalisation of HIV/AIDS into the structures and strategic direction of BOTA.

Each of these strategies has involved the implementation of specific activities, as illustrated in the diagram below. BOTA has also identified impact measurement as a key activity to ensure that the strategic targets are reached.

The BOTA mainstreaming approach, which characteristically extends beyond mainstreaming in formal curricula, allows for linkages to be established between key stakeholders, the training institutions within the NSF. The coordination interventions

¹⁶ See Chapter 9: Roles and Responsibilities of Parastatals, pp.74 – 80, National Strategic Framework for HIV/AIDS

BOTA's HIV/AIDS Mainstreaming Concepts, Structures and Strategies



ensure and promote a linkage between key role-players, the BNVQF and the SWBL approach. The support provided to training institutions links individual institutions to the BNVQF, promotes networking and sharing of information and promising practice.

A number of the above concepts, structures and strategies can be considered to be *promising practices* and are documented in detail below.

3.2. PROMISING PRACTICES

Promising practices are, according to the Guidance Note for Submissions to the GTZ HIV/AIDS Collection of Relevant Practices,¹⁷

“...cutting edge approaches that reflect current thinking in the field, add a new dimension to existing knowledge about HIV/AIDS prevention and care, are successful in a localised setting but have not been replicated elsewhere”.

Lessons learnt are defined as:

“...valuable learning experiences [that] often arise when well-planned initiatives do not evolve according to plan, and when a thorough analysis identifies the factors contributing to the unexpected development or failure”.¹⁸

3.2.1 HIV/AIDS as a key result area

BOTA has formalised mainstreaming HIV/AIDS responses by including them as a key result in its strategic plan. Current practice, in many organisations which are grappling with the mainstreaming concept, is to ‘add-on’ HIV/AIDS, either as a cross-cutting theme/consideration, or as an additional activity in a broader key result area. Inevitably, HIV/AIDS activities are limited, remain un-resourced and institutional responsibility is not allocated. Similarly, for organisations involved in the training and education sector,

Promising practices are ...cutting edge approaches that reflect current thinking in the field, add a new dimension to existing knowledge about HIV/AIDS prevention and care, are successful in a localised setting but have not been replicated elsewhere.

¹⁷ p.4, GTZ HIV/AIDS Relevant Practices Collection – Guidance Note for the Submission for Proposals, GTZ (November 2004) internal document.

¹⁸ Ibid

inclusion of HIV/AIDS into curricula is often considered to be an adequate indicator of mainstreaming. BOTA has extended its concept of mainstreaming beyond that of inclusion into the formal curriculum and has made mainstreaming HIV/AIDS responses part of its core business.



BOTA HIV/AIDS Day 2004 – “We care”

The identification of HIV/AIDS as a key result area within BOTA has had a number of structural and organisational implications. Responsibility for the implementation of HIV/AIDS-related activities has been formally spread across the organisation and is thus monitored through the internal quality assurance functions located in the Office of the CEO.

BOTA, in its commitment to mainstreaming the HIV/AIDS response, has gone a step further than other institutions, by establishing and staffing an HIV/AIDS Division (within the Research and Planning Department). This has meant that resources (including budget line items) have been allocated to the mainstreaming process. This Division is tasked to:

- Drive the coordination of HIV/AIDS interventions amongst training institutions and key stakeholders;
- Support and augment the efforts of training institutions in HIV/AIDS interventions and programmes.

Responsibility for inclusion of HIV/AIDS in formal curricula lies with the Curriculum Coordinator in the Quality Assurance Department.¹⁹ A number of specific promising practices (documented separately below) can be identified in relation to the inclusion of HIV/AIDS into the formal learning process.

Responsibility for mainstreaming the HIV/AIDS responses into BOTA has been allocated to the Human Resource Manager (Office of the CEO). This has included the development and implementation of a workplace strategy and policy, in line with current practice and aligned within the National Strategic Framework for HIV/AIDS, with specific reference to the Minimum Internal Package.



BOTA HIV/AIDS Day 2004

The BOTA HIV/AIDS Division is tasked to drive the coordination of HIV/AIDS interventions amongst training institutions and key stakeholders and support and augment the efforts of training institutions in HIV/AIDS interventions and programmes.

¹⁹ With effect from April 2005, the curriculum coordinator is responding to the Director of the Structured Work-Based Learning Department

3.2.2 Inclusion of HIV/AIDS in BNVQF

BOTA has ensured that HIV/AIDS has been included in the BNVQF. Unit standards for all three levels of the BNVQF have been developed and registered. The HIV/AIDS credit requirement has been made compulsory at Level 1 of the BNVQF. This means that every learner who goes through a BNVQF certification process will receive at least 20 notional hours on HIV/AIDS in the formal curricula. The unit standards have been structured as below.²⁰

Every learner who goes through a BNVQF certification process will receive at least 20 notional hours on HIV/AIDS in the formal curricula.

Level 1: Demonstrate awareness of HIV/AIDS

People credited with this unit standard will be able to:

- Demonstrate knowledge of HIV/AIDS
- Demonstrate knowledge of personal precautions to reduce the risk and spread of the infection
- Demonstrate knowledge of dealing with an HIV infected or AIDS affected person.

Level 2: Demonstrate awareness of HIV/AIDS in the workplace

People credited with this unit standard will be able to:

- Demonstrate knowledge of HIV/AIDS
- Demonstrate knowledge of personal precautions to reduce the risk and spread of infection
- Demonstrate knowledge of dealing with an HIV infected or AIDS affected person
- Demonstrate knowledge of occupational risks associated with HIV/AIDS.

Level 3: Develop and implement HIV/AIDS policies for a workplace

People credited with this unit standard will be able to:

- Analyse organisational and individual needs related to HIV/AIDS
- Develop HIV/AIDS policies for a workplace
- Develop and promote HIV/AIDS prevention strategies for a workplace, and
- Review the effectiveness of workplace HIV/AIDS policies and strategies.

Unit standards have been developed according to current international practice and include specifications on quality assurance requirements, elements and performance criteria.

BOTA is piloting the Level 1 unit standards in 2004, for full implementation in 2005.²¹ The Curriculum Division is currently in the process of developing a curriculum related to BNVQF Level 1 HIV/AIDS unit standards. This Division and the HIV/AIDS Division are coordinating the development of the learning materials for this curriculum. Curriculum and learning material development is not a line function of BOTA. BOTA's task is to provide guidelines and training on the development of curricula and learning material. A decision has been taken to engage in these activities to use them as a sample for the development of other curricula and learning material.

The HIV/AIDS unit standards can be considered to be valuable regional resource for other vocational training institutions in sub-Saharan Africa to formalise HIV/AIDS into their curricula. Few, if any, countries in the region have developed unit standards related to HIV/AIDS, and the experience that BOTA has obtained would be useful to share. Furthermore, the compulsory credit requirement at Level 1 is clearly an identified promising practice. Again, Botswana must be one of the few countries in the region that has formalised its response to HIV/AIDS by including HIV/AIDS in the formal qualifications framework, thus ensuring that every learner within the sector is exposed to knowledge and training on HIV/AIDS prevention, treatment and care.

The HIV/AIDS unit standards can be considered to be valuable regional resource for other vocational training institutions in sub-Saharan Africa to formalise HIV/AIDS into their curricula.

²⁰ BOTA Unit Standards Unit ID HIV01

²¹ BOTA Awareness of HIV/AIDS BNVQF Level 1 Programme, June 2004

3.2.3 Guidelines for preparing curricula

BOTA engaged in a participatory consultative process in order to generate guidelines on developing curricula linked to unit standards.²²

This comprehensive set of guidelines allows institutions to "...develop common but not standardised alignment of their curricula with unit standards".²³ The guidelines provide institutions, *inter alia*, with examples of:

- Curriculum and alignment models
- Instruments that can be used to assist the alignment process
- Training and learning approaches and aids
- Delivery and learning models.

These guidelines are generic and can be used for the development of curricula linked to any unit standard. However, the HIV/AIDS unit standards were used as an example to develop these guidelines. As such, training institutions in the vocational training sector in Botswana are well positioned to align their current HIV/AIDS training programme with the BNVQF unit standards.

Once again, these guidelines would also serve as a valuable regional resource to assist vocational training institutions in transforming extracurricular activities to formal curricula.

3.2.4 HIV/AIDS policy and activity requirement for registration

BOTA has also included an HIV/AIDS requirement as part of the validation process for registration and accreditation of training institutions.

Training institutions are required to have an HIV/AIDS policy and activities in place in order to obtain registration and accreditation within the BNVQF. HIV/AIDS policies should relate to both staff and learners and clearly indicate the role that the institution will play in minimising the impact of HIV/AIDS. The HIV/AIDS activity requirement includes the existence of HIV/AIDS committees, the implementation of extracurricular activities and indications of engagement in non-learning site-based HIV/AIDS interventions.

Provision has been made to provide support and assistance to institutions that do not meet the HIV/AIDS requirements on registration. Full registration will be awarded on the meeting of the HIV/AIDS requirements. The BOTA HIV/AIDS Division has an important role to play in the provision of support to institutions to meet these HIV/AIDS requirements.

3.2.5 Model HIV/AIDS policy for training institutions

The BOTA HIV/AIDS Division has developed a model HIV/AIDS policy for vocational training institutions. The model has been structured in such a way that individual institutions can use it as guideline or framework to develop an institutional specific policy.

It is a comprehensive document that allows institutions to recognise the HIV/AIDS pandemic and the threat that this poses to staff and learners. It further provides the framework for individual institutions to articulate their role in minimising the HIV/AIDS threat. The model policy has been developed to ensure that it covers both learners and staff and promotes the integration of current and planned HIV/AIDS activities into formal and extracurricular programmes.

It further provides a set of objectives, which include:



HIV/AIDS Debate 2004 at the Automotive Trades Technical College (ATTC) in Gaborone

BOTA has also included an HIV/AIDS requirement as part of the validation process for registration and accreditation of training institutions.

The BOTA HIV/AIDS Division has developed a model HIV/AIDS policy for vocational training institutions. The model has been structured in such a way that individual institutions can use it as guideline or framework to develop an institutional specific policy.

²² BOTA Guidelines for preparing curricula linked to units standards, March 2004

²³ Ibid, p.11

- The articulation of the institution's position and practice in relation to HIV/AIDS
- Ensuring that the uninfected remain HIV free
- Establishing the foundation for a HIV/AIDS education programme including prevention and positive behavioural changes.

The model policy guides institutions on general principles that are necessary to adopt in order to achieve the objectives. Included amongst these principles are those of equity, integration, recruitment (access), confidentiality, and rights and competence.

Included in the model are policy issues to address in relation to the creation of a non-discriminatory and caring environment. The model provides practical policy interventions in respect of:

- HIV/AIDS voluntary testing
- Confidentiality and disclosure
- Prevention
- Care and support
- Education and awareness programmes
- Coordination responsibilities and implementation (e.g. the establishment of committees, the appointment of coordinators, and the participation of learners) .

The model policy is in line with the National Strategic Framework for HIV/AIDS and adheres to general accepted current workplace policy development practices.

3.2.6 Support to institutions to mainstream HIV/AIDS measures

The mainstreaming approach has included the provision of support to institutions to develop strategies and implement HIV/AIDS activities (e.g. model HIV/AIDS policies). Using IEC strategies, education and promotion of HIV/AIDS information/materials, a number of these activities (edutainment – see below – and a learner-driven HIV/AIDS awareness raising publication) have been identified as examples of promising practices and are discussed separately below.

Of significance here is the support that has been provided to training institutions to establish institution-based HIV/AIDS committees and structures.²⁴ These committees take a number of different forms and are either separate committees or sub-committees of broader committee structures (e.g. Counselling and Guidance Committees).

Functions of these committees include awareness raising, development and implementation of HIV/AIDS policies, and engagement and networking with HIV/AIDS organisations and structures in the district in which the training institutions are located. The BOTA HIV/AIDS Division has further supported institutional based committees to develop and submit action plans to the relevant structures.

The BOTA HIV/AIDS Division has encouraged the representation of learners in the institutional-based HIV/AIDS committees, and has also supported the participation of staff and learners in peer education and counselling training programmes, offered by other service providers.

The inclusion of HIV/AIDS into the curriculum will be an important component of the mainstreaming approach. However, a number of other strategies has been developed and implemented in order to ensure that HIV/AIDS responses are mainstreamed comprehensively.

3.2.7 Use of edutainment as an awareness-raising tool

The BOTA HIV/AIDS Division has adopted an innovative awareness raising strategy – that of the use of drama or theatre as one form of edutainment (entertainment that is educational in nature).

The objectives²⁵ of the BOTA HIV/AIDS Division in relation to the edutainment concept are:

The BOTA HIV/AIDS Division has encouraged the representation of learners in the institutional-based HIV/AIDS committees, and has also supported the participation of staff and learners in peer education and counselling training programmes, offered by other service providers.

²⁴ The institutional based HIV/AIDS committees are discussed in more detail in section 3.4.

²⁵ See BOTA Project proposal document: National Drama Arts Festival for the vocational training institutions – Theatre overcoming HIV/AIDS Stigma and Discrimination (2004)

The BOTA HIV/AIDS Division supported the participation of a selection of learners from both private and public training institutions in drama-coaching workshops.

- To educate the public through entertainment by use of drama
- To build effective drama groups within vocational training institutions in Botswana to effectively disseminate HIV/AIDS information in their institutions and communities, and
- To sustain the HIV/AIDS project momentum within vocational training institutions through the use of theatre.


The BOTA HIV/AIDS Division supported the participation of a selection of learners from both private and public training institutions in drama-coaching workshops. Outside service




HIV/AIDS Drama Competition Final in Gaborone 2004

BOTA


BOTA Fights HIV/AIDS Stigma & Discrimination through theatre




Chief Adjakaton - V. Otshile



Mr. Tshengwa - DNET Representative and Mrs. Tshengwa BOTA Training Standards Division Coordinator



Kgaleng Group in action



Botswana Training Authority (BOTA) HIV/AIDS division organised theatre competition on Friday evening at West Wood School. The event which was held under the theme "theatre overcoming HIV/AIDS stigma and discrimination" gave voice to students from vocational training institutions around the country to stage drama plays that would relay the message effectively to the audience who filled the West Wood nicely erected hall

Chief Executive Officer of BOTA, Mr Abel Modungwa said HIV/AIDS is an important subject that needs to be addressed to the public. He said it is important that the youth complement the efforts made by the President of the country, Mr Festus Mogae in fighting HIV/AIDS. "As the youth you must contribute effectively to the fight, this can be through educating the public and spearheading awareness campaigns," he said. Drama is one of the key ways of

HIV/AIDS Drama Competition Final in Gaborone 2004 (The Gazette 01/09/2004)

providers were commissioned to take participants through aspects of drama production and acting. The Division also facilitated a national drama competition for public and private vocational training institutions, with sponsorship from the private sector (and GTZ).



HIV/AIDS Drama Performance by the Kgatleng Brigade Development Trust at the IVETA Botswana 2005 Conference in Kasane

The use of the edutainment concept has had a number of visible outcomes. HIV/AIDS-related theatre productions have been held at vocational training institutions and in the community. Furthermore, institution-based drama groups reported that they have used the edutainment skills developed in the HIV/AIDS drama coaching workshop and productions in other areas (e.g. environmental education). The approach adopted has also encouraged learner and staff collaboration around HIV/AIDS issues, with learners attending coaching workshops together and developing and staging the theatre productions.

The encouragement of the private sector to sponsor the national drama competition must have, to some extent, also contributed to an increased awareness of BOTA and its roles and functions.

3.2.8 *Emang* – A learner driven publication

*Emang*²⁶ is a learner-driven HIV/AIDS awareness publication, coordinated by the BOTA HIV/AIDS Division. The aim of the publications is to improve communication and cooperation around



HIV/AIDS Newsletter Emang

Emang is a learner-driven HIV/AIDS awareness publication, with the aim of improving communication and cooperation around HIV/AIDS issues, given the large distances between the training institutions.

²⁶ *Emang* means “stand up” in Setswana, the national language of Botswana

HIV/AIDS issues, given the large distances between the training institutions.

The BOTA HIV/AIDS Division requests and coordinates inputs and leaves content unchanged except for minor corrections to grammar, style and spelling. This publication is produced on a quarterly basis and to date two editions have been completed, with the third in the production phase. Journalism learners from one of the vocational training institutions constitute the editorial board.

Emang is an eight to ten page, full colour and well laid-out document and is easy to read. It includes art poems, letters and other inputs elicited from learners of the different vocational training institutions.

The production, publication and dissemination of *Emang* has allowed learners a space to air their points of view on HIV/AIDS-related issues. It has also ensured that appropriate information is widely disseminated. The appropriateness of the information stems directly from the fact that it is being produced by learners for learners. *Emang* has further allowed learners to strengthen their information, education and communication (IEC) capacities.

3.2.9 Development of VT specific IEC materials

The BOTA HIV/AIDS Division has developed a set of IEC materials for the vocational training sector. The IEC materials are generic in nature, focusing on information provision and awareness-raising messages. The materials clearly display the BOTA logo and its commitment to mainstreaming the HIV/AIDS response.

3.3 RECOMMENDATIONS, LESSONS LEARNT OR ISSUES TO CONSIDER

The process of identifying and extracting promising practice examples pointed to a number of recommendations and important lessons learnt as set out below.

3.3.1 Learner driven publication – *Emang*

Consideration needs to be given to more ‘content assurance’ of this learner-driven publication. Currently, the majority of the articles and inputs focus on A, B, C (“Abstinence”, “Be faithful” and “Condomise”). Whilst A, B and C are important education inputs, this publication is well-positioned to extend the discussion and debate beyond A, B, C.

Emang could be effectively used to stimulate discussion around issues of sexuality, gender and power relations, disclosure, stigmatisation, etc. A more interactive approach, other than merely publishing submissions from learners, could also be considered.

Emang could be effectively used to stimulate discussion around issues of sexuality, gender and power relations, disclosure, stigmatisation, etc.



Gaborone Technical College

Interviews with people living with AIDS or with learners on specific topics (e.g. how to say “No”, being assertive, etc.) could be included. More directed inputs on particular themes (e.g. ‘what do you think about disclosure?’) could be elicited from learners.

3.3.2 Development of VT specific IEC materials

Whilst the production of HIV/AIDS awareness-raising IEC materials is important, a number of other organisations already produce materials with similar messages. Again, it requires consideration as to whether the production of generic HIV/AIDS awareness materials is within the scope of BOTA’s activities.

Consideration could be given to increasing the vocational training *specific* content of the IEC materials. Information about mainstreaming the HIV/AIDS response in vocational training and links to the BNVQF and SWBL approach could, for example, be considered.

3.3.3 Importance of BOTA inter-departmental cooperation

The existing internal capacity on HIV/AIDS of the HIV/AIDS Division should also be used in other departments of BOTA.

First of all the experience in mainstreaming the HIV/AIDS response should be used by BOTA internally in cooperation with the Human Resource Division. HIV/AIDS activities at BOTA internally so far are:

- BOTA has developed an HIV/AIDS policy
- Condoms are available free of charge
- Some HIV/AIDS-related materials are displayed
- BOTA is organising an internal HIV/AIDS day every year and is participating in the World AIDS Day activities.

The HIV/AIDS Division should intensify its activities with the Human Resources Department and make use of its experience and expertise in policy development and implementation and innovative approaches to mainstream the HIV/AIDS response within BOTA.

Furthermore the structures set up by the HIV/AIDS Division, in particular the National VT HIV/AIDS Committee and the Private Providers HIV/AIDS Committee that are convened and chaired by BOTA, provide an ideal forum for BOTA to promote the BNVQF and SWBL approach. Staff from other BOTA Departments have already made presentations for these committees. A more systematic and focused strategy should be considered to engage more effectively with these established structures.

The BOTA HIV/AIDS Division should also support the BOTA division that is responsible for registration and accreditation of training institutions. Training institutions are required to provide their HIV/AIDS policy when applying for registration and accreditation with BOTA. The BOTA HIV/AIDS Division gave input to the initial criteria for the validation process, but the registration and accreditation process, and the institutions themselves, could benefit even more from the Division's input when it comes to reviewing the content of the institutions' HIV/AIDS policies.

The HIV/AIDS Division should intensify its activities with the Human Resources Department and make use of its experience and expertise in policy development and implementation and innovative approaches to mainstream the HIV/AIDS response within BOTA.

3.3.4 Integration with other cross-cutting themes

The SWBL approach includes three important cross-cutting themes, these being:

- HIV/AIDS
- Gender, and
- Equity and access.

The recognition of the relationship between gender and HIV/AIDS is very important and a concerted effort should be made to align the gender and HIV/AIDS interventions for maximum impact.

3.3.5 HIV/AIDS unit standards

Two issues were noted in relation to the HIV/AIDS unit standards, these being:

- The process of generating unit standards, and
- The level of complexity of the unit standards.

It was reported that the process followed for generating the HIV/AIDS unit standards involved commissioning a consultant to develop draft standards that were then taken to the existing forums for discussion and input.

Whilst it is recognised that the HIV/AIDS unit standards were the first to be developed and registered, the importance of the participation of training institutions and other stakeholders in the development process must be noted. The generating of HIV/AIDS unit standards presented a good opportunity for BOTA to test the creation and functioning of standard generating bodies (i.e. task forces).

Whilst it is recognised that the HIV/AIDS unit standards were the first to be developed and registered, the importance of the participation of training institutions and other stakeholders in the development process must be noted.

The performance criteria of the HIV/AIDS unit standards, particularly at BNVQF Level 3 are complex. Learners are required to be able to develop policies and use a range of fairly sophisticated data collection and analysis tools. Consideration needs to be given to an assessment of the appropriateness of the performance criteria to a vocational training certificate. BOTA does have a unit standards review process in place and the HIV/AIDS unit standards will be subject to this review.

3.3.6 Precise role clarification

BOTA's primary function is that of coordination and integration of training within the vocational training sector. Role clarification within the BOTA HIV/AIDS Division is particularly important given the staffing capacity (one coordinator and one field officer) and the wide range of integration and coordination tasks that are their responsibility. Strategic decisions need to be made as to whether or not the BOTA HIV/AIDS Division should in fact be acting as an implementer (e.g. providing awareness-raising and training sessions) or as a coordinator.

3.3.7 Multiplicity of HIV/AIDS structures and organisations

As with many sub-Saharan countries, there are a large number of HIV/AIDS-related structures and organisations operating in Botswana. All government Ministries and Departments have specific HIV/AIDS intervention strategies. There are a number of local and international organisations implementing a variety of different HIV/AIDS activities.

Consideration could be given to the identification of strategic partnerships, in order to prevent duplication of activities. BOTA's engagement with NACA does go a long way towards the prevention of duplication. Particular consideration could be given to the identified gap areas (e.g. in the area of curriculum and learning materials development and the development of unit standards for other HIV/AIDS-related qualifications). BOTA's expertise may be more effectively utilised in closing capacity gaps as opposed to the implementation of activities that could be carried out by other organisations with support from BOTA.

Consideration could be given to the identification of strategic partnerships, in order to prevent duplication of activities.

3.3.8 Different strategies for the different categories of training institutions

BOTA services a range of different training institutions. Consideration needs to be given to the development of a different strategy – by the BOTA HIV/AIDS Division – for its engagement with the different categories of training institutions.

HIV/AIDS issues at Technical Colleges and Brigades are dealt with by DVET, which has specific indicators and targets in relation to HIV/AIDS. The BOTA HIV/AIDS Division and DVET have established a working relationship to coordinate their interventions in the Technical Colleges and Brigades, but, both carry out similar coordination and integration functions with these institutions. Given that a strong working relationship already exists, consideration could also be given to geographical or activity-based allocation of tasks. The BOTA HIV/AIDS Division could, for example, take responsibility for the integration of HIV/AIDS into formal curricula, whilst DVET could concentrate on the establishment and effective operation of institutional HIV/AIDS committees or Guidance and Counselling Committees driven by DVET.

A different strategy could be considered for other public training institutions in the vocational training sector. Working relationships with the Ministries/Departments responsible for these training institutions could be more systematically and formally established, and coordinated implementation plans developed.

The BOTA HIV/AIDS Division appears to be ideally positioned to address mainstreaming of the HIV/AIDS response amongst the private training institutions. The Division also constitutes one of the most important linkages between these institutions and the BNVQF. Support to these institutions to establish HIV/AIDS committees and to network with other HIV/AIDS organisations remains an important function of the BOTA HIV/AIDS Division's engagement. Consideration could be given to developing a detailed integrated BOTA strategy to ensure that these institutions are brought into the BNVQF as quickly as possible.

The BOTA HIV/AIDS Division appears to be ideally positioned to address mainstreaming of the HIV/AIDS response amongst the private training institutions. The Division also constitutes one of the most important linkages between these institutions and the BNVQF.

Mainstreaming of the HIV/AIDS response in company training requires a completely different strategy than that used for the public and private school-type training institutions. This issue is discussed in more detail in section 3.7 below. However, of importance here is that training in companies cannot be considered to be in the same category as training in other training institutions. The objectives and needs vary significantly.

Mainstreaming of the HIV/AIDS response in company training requires a completely different strategy than that used for the public and private school-type training institutions.

3.4 COORDINATION ACHIEVEMENTS AND CONSTRAINTS

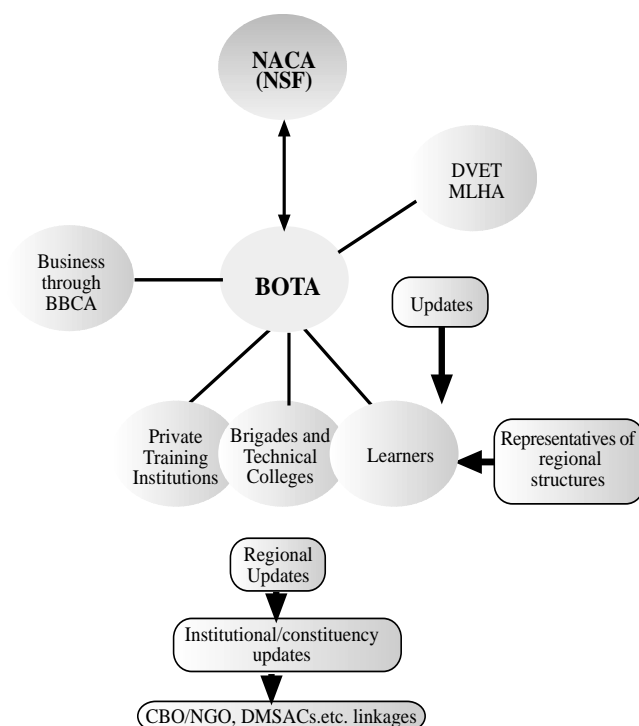
The National Strategic Framework (NSF) on HIV/AIDS sets out a number of coordination and mainstreaming guidelines for parastatals.²⁷ BOTA has gone a long way towards meeting these requirements through its engagement with various structures and institutions.

3.4.1 Representation on NACA

The BOTA HIV/AIDS Division has formal representation on the NACA Board. This ensures alignment with the NSF and promotes the establishment of coordinated responses.

3.4.2 National VT HIV/AIDS Committee

The BOTA HIV/AIDS Division chairs the National HIV/AIDS Vocational Training Committee. NACA is a stakeholder in this Committee, ensuring the alignment with the NSF. BOTA and other stakeholders' representatives provide the report-back conduit from the committee to BOTA, the stakeholders and NACA. The committee brings together representatives of umbrella bodies of private training institutions, Brigades and Technical Colleges in the vocational training sector, and learner representatives, at national level. These representatives are tasked with providing information and reporting back to their regional structures, which in turn, report to their constituencies and/or institutions. Linkages with CBOs, NGOs, DMSACs etc., are at institutional level.



The National VT HIV/AIDS Committee has also drawn in representatives of various Ministries involved in the vocational training sector. The committee provides the different Ministries and Departments with a forum within which updates and reports to the sector can be made. Business is involved through participation of the Botswana Business Coalition against AIDS (BBCA)

²⁷ See pp.74 –75, National Strategic Framework for HIV/AIDS for HIV/AIDS 2003–2009

The National VT HIV/AIDS Committee constitutes an important coordination platform and is a forum for information sharing. There are, however, a number of constraints which can be identified in relation to the objective of effective coordination and integrated responses, as below.

Ensuring adequate representation of different sectors on the committee

As representation is on the basis of participation in regional structures, e.g. Northern and Southern Learner Representative Committees, the effectiveness of the representation on the National Committee is dependent on the effectiveness of the regional or umbrella structure.

Ensuring regional, institutional and constituency reporting back

Reporting back processes – from representatives on national structures to regions, institutions and constituencies – are inherently flawed. Convenors on national structures have little, if any, control over the reporting back process.

Recommendation: Consideration could be given to developing a structured format for reporting to the national structure and a standardised reporting back process.

Promoting business participation

The National VT HIV/AIDS Committee has gone a long way in promoting business participation through the inclusion of the BBCA. Again, it is not absolutely clear if this is the correct forum, or if BBCA is the ideal organisation for the most effective engagement with business in relation to the mainstreaming of the HIV/AIDS responses.

Recommendation: Consideration could be given to the creation of a separate forum that pulls together company HIV/AIDS coordinators and training units to assist companies in mainstreaming the HIV/AIDS response, and provide an information-sharing platform to serve the specific interests of this sector.

Consideration could be given to the creation of a separate forum that pulls together company HIV/AIDS coordinators and training units to assist companies in mainstreaming the HIV/AIDS response, and provide an information-sharing platform to serve the specific interests of this sector.

3.4.3 Private Providers HIV/AIDS Committee

The BOTA HIV/AIDS Division convenes and chairs a Private Providers²⁸ HIV/AIDS Committee. This Committee includes representatives of private training institutions, businesses and other parastatals. Invitations to participate in this Committee are at an



Computer Training at NIIT in Gaborone

²⁸ The term 'providers' is used by BOTA in relation to this committee. The need to standardise terminology to avoid confusion is recognised and BOTA has now begun to use the term "training institutions" as opposed to "training providers". However, as this committee is referred to "Private Providers" on the BOTA documents reviewed, this term has been retained in the report when referring to this particular committee.

institutional level. The BOTA HIV/AIDS Division has established, and continually updates, a database of possible participants. There are currently no specific terms of reference for the Committee.

This Committee has met regularly once every two months in 2004 and has served as a forum for information sharing (e.g. guidelines for managing infected or affected learners), exposure to BNVQF, and promotion of networking and linkages with other HIV/AIDS-related organisations and structures.

One of the strengths of this Committee (and others of a similar nature chaired by BOTA) is that it provides BOTA with a structured forum that can be used to systematically promote the BNVQF and the SWBL approach. The effective use of this (and similar structures) requires an integrated intervention strategy to be adopted and supported by all Departments/ Divisions within BOTA.



Gaborone Institute for Professional Studies

A number of constraints can be identified in BOTA's effort to coordinate private training institutions. Encouraging participation may possibly be identified as the most important constraint. Training institutions need to be clear on benefits that will be gained through their participation in the Committee. The fact that no specific terms of reference are in place contributes to the lack of clarity with regard to the possible benefits of participation. Furthermore, as representation on this Committee is on an individual institutional basis, participation will vary considerably, and could, theoretically, become too large to manage.

A difference in levels of awareness of BNVQF and the role of a training authority may also impact on the effectiveness of the Committee. Again, this may possibly be addressed through the finalisation of terms of reference for the Committee and through the development and implementation of an integrated BOTA strategic intervention plan.

One of the biggest constraints facing this Committee is the possibility of different interests and needs of private training institutions and companies that are involved in training. The strategy for mainstreaming the HIV/AIDS response for private training institutions can, in fact, be similar, if not identical, in approach to that used in public training institutions. Mainstreaming of the HIV/AIDS response in companies that are involved in training requires a different strategy, as different environmental conditions exist.²⁹

3.4.4 Coordination at institutional level

The BOTA HIV/AIDS Division has provided coordination support at an institutional level to Brigades, Technical Colleges, other public training institutions and to private institutions. This support has included the promotion of the establishment of institutional HIV/AIDS Committee structures, and the identification of HIV/AIDS focal persons or coordinators. These institutional structures have been supported to improve

Training institutions need to be clear on benefits that will be gained through their participation in the Private Providers HIV/AIDS Committee.

²⁹ See section below: *Extension of mainstreaming concepts in companies*

the effectiveness of their operations, and to engage more systematically with other structures (e.g. with the DMSACs and other NGOs/CBOs operating in the localities). Coordination efforts at institutional level are also faced with a number of constraints and challenges, as set out below.

Institutional expectations and BOTA's mandate

The expectations of the role of the BOTA HIV/AIDS Division within individual institutions may not necessarily be aligned with the mandate of BOTA. There is a strong possibility that BOTA is seen as an implementer, source of funding for HIV/AIDS activities, a provider of training, etc.³⁰ There is not necessarily a common understanding of the meaning of mainstreaming amongst the different institutions. This non-alignment of expectations and BOTA's mandate may negate the positive impact of building and strengthening coordination at institutional level.

Possible conflating of DVET and BOTA by institutions

The possibility of institutions conflating the roles of DVET and BOTA in the mainstreaming of the HIV/AIDS response exists primarily with the Brigades and Technical Colleges.³¹ The intervention plans of DVET and BOTA's HIV/AIDS Division, aimed at coordination of mainstreaming efforts in the Brigades and Technical Colleges, are, to a certain extent, identical. This creates confusion within the individual institutions and points to the need for the BOTA HIV/AIDS Division to develop a specific strategy to provide support to Brigades and Technical Colleges only where there is a gap.

Capacity of other structures to assist institutions

In order for institutional coordination structures to effectively carry out their role, they require support from other organisations and structures such as DMSACs, VMSACs, NGOs/CBOs, etc. Institutions are required, for example, to submit work plans for the funding of HIV/AIDS activities to DMSACs. If the specific DMSAC is not yet operating effectively, this will have implications for the ability of the institutions to implement its work plan. Similarly, if no effectively operating CBOs and NGOs exist in a particular locality, the institution will find it difficult to operate in isolation.

Internal institutional capacity

There are different levels of internal institutional capacity to plan, implement, monitor and evaluate HIV/AIDS interventions, and thus different institutions require different forms of support.

One of the key issues to consider here is the voluntary nature of engagement by staff in HIV/AIDS coordination activities. In general, it appears that HIV/AIDS functions are an 'add-on' to other specific job functions. As such, HIV/AIDS activities are addressed once other job requirements (e.g. teaching, etc.) have been fulfilled.

The success of the coordination and implementation of HIV/AIDS interventions and mainstreaming relies heavily on the commitment of top management, i.e. Brigade coordinators, Technical College principals, private training institution directors and managing directors of companies.

3.4.5 Networking with other structures

The BOTA HIV/AIDS Division has established partnerships and relationships with a number of related Ministries and their respective departments, and with a range of HIV/AIDS organisations. As noted above, given the multiplicity of organisations and structures, it is essential for the BOTA HIV/AIDS Division to modify or establish strategic partnerships based on its mandate and an analysis of its own internal capacity.

One of the key issues to consider here is the voluntary nature of engagement by staff in HIV/AIDS coordination activities. In general, it appears that HIV/AIDS functions are an 'add-on' to other specific job functions.

³⁰ This position was confirmed during the field work and interviews undertaken with the different institutions

³¹ As above

3.5 IMPACT MONITORING

Impact monitoring refers to a monitoring of desired change that has been brought about by the interventions that have been undertaken. For interventions aimed at mainstreaming the HIV/AIDS response into the vocational training sector, impact monitoring can be an extremely difficult process.

The monitoring of inputs (activities) and outputs (results) is generally standard procedure in interventions.³² These process indicators are generally easily quantifiable (e.g. the number of institutions that have been supported to establish committees – at input level, and the number of institutional committees that are operating effectively – at output level).

At the next level (i.e. what is referred to as purpose level) it is still possible to measure outcomes of the interventions by monitoring what the target group does to bring about the desired change, as a result of what has been provided. For example, in this Division's intervention, a measure of the extent to which HIV/AIDS responses have been mainstreamed into the formal curriculum and organisational structures, may serve as an indicator.

At development goal or overall objective level, impact indicators need to be identified.

In the HIV/AIDS terrain, impact is most commonly indicated through quantitative measures such as prevalence rates, decrease in new infections, increase in lifespan of people living positively with AIDS, etc. However, there is often a gap in logic in the identification of impact indicators. Impact indicators for an intervention aimed at mainstreaming the HIV/AIDS response in the vocational training sector are often identified as a decrease in prevalence for the country as whole. This is not necessarily correct. The intervention may contribute to this change, but attributing a particular impact to a particular intervention is very difficult as impact occurs beyond the specific inputs and outputs and is influenced by a number of variables (e.g. other IEC campaigns, access to health services, etc.).

Impact also refers to the extent of the reach of the interventions and to issues of replicability. The question as to how many people have in fact benefited from the intervention is an important one to ask. Similarly, one needs to ask if the model and approaches can be replicated in other sectors or regions.

Impact measures are very often restricted to a quantitative amount (e.g. percentage decrease, percentage increase etc.). The use of qualitative measures of impact (e.g. the benefits that the target group attribute to the interventions) is becoming more common in the development sector.

Impact monitoring refers to a monitoring of desired change that has been brought about by the interventions that have been undertaken. For interventions aimed at mainstreaming the HIV/AIDS response into the vocational training sector, impact monitoring can be an extremely difficult process.



BOTA Poster: "Living positively with HIV/AIDS"

³² This discussion draws on log frame or project planning matrix terminology to illustrate the argument

BOTA already has an internal audit system and tools in place. This system focuses on performance monitoring at process level (i.e. inputs and outputs based on submitted work-plans). A system for impact measurement of BOTA's interventions is under development.

The BOTA HIV/AIDS Division is in the process of commissioning a knowledge, attitudes and behaviour (KAB) base-line study, specific to the vocational training sector. A number of issues can be raised in relation to this KAB study, included amongst which are those below.

3.5.1 The generally recognised difficulty in measuring or quantifying behaviour

Levels of knowledge can be measured accurately through a series of true and false types of questions – if the questions are clear and unambiguous. Attitudes can be gauged through agree/disagree types of questions or statements, scenario setting etc. Data obtained in relation to attitudes can be distorted by factors such as respondents providing responses that they think the interviewer wants to hear. The quantification of behaviour is altogether a different task. It is extremely difficult to establish behaviour change trends through the use of traditional data collection techniques (e.g. questionnaires, focus groups, interviews etc.).

Recommendation: An alternative would be considering a study which includes partners and adopts methodologies such as regular focus group discussions, asking participants to keep sexual activity diaries, scenario setting role-plays, etc.

3.5.2 Benchmarking exercise that requires longitudinal approach

The KAB study will serve to provide the BOTA HIV/AIDS Division with data on which to focus its coordination and integration interventions within the sector. If the study is to be used as an impact monitoring process, it must be designed as such from the outset and provision must be made for the implementation of a longitudinal study, with the same set of respondents over a predetermined period of time. It is difficult to attribute the impact (desired change) to a specific intervention due to a multiplicity of interventions.

3.5.3 Botswana HIV/AIDS Response Information Management System (BHRIMS)

Under the auspices of NACA, BHRIMS carries out national monitoring of the HIV/AIDS response. BHRIMS manages a quarterly department performance reporting system and focuses on outputs of Ministries and their respective departments' programmatic activity (e.g. condom distribution, use of voluntary counselling and testing centres, etc.). Impact is not monitored through this system.

NACA coordinates the Annual HIV/AIDS Surveillance in collaboration with national and international organisations. This survey provides data on the status of the epidemic in order to guide programming, interventions and policies.

The most recent (2003) Surveillance Report, made a number of recommendations,³³ included amongst which are:

“There is a need to scale up HIV/AIDS intervention programmes especially among young persons so as to reduce the rate of new infections. Such programmes should include school as well as out of school youth”,

and

“In addition to sentinel surveillance, there is a need to closely evaluate the extent of the scourge and the impact of the national response through special population-based surveys”.

The Botswana HIV/AIDS Response Information Management System manages a quarterly department performance reporting system and focuses on outputs of Ministries and their respective departments' programmatic activity

“In addition to sentinel surveillance, there is a need to closely evaluate the extent of the scourge and the impact of the national response through special population-based surveys”.

³³ p 55. Botswana 2003 Second Generation HIV Surveillance Report, op. cit.

These recommendations point to two important issues. Firstly, the BOTA HIV/AIDS Division's interventions remain important and relevant, particularly in relation the target group (i.e. young people) within the vocational training sector. Secondly, the need for systematic impact monitoring has been recognised and remains as an important challenge to ensure that the correct strategies (i.e. those with maximum impact) are adopted.

The BOTA HIV/AIDS Division needs to make strategic decisions in relation to impact monitoring. There are a number of questions that need to be answered before a strategy on impact monitoring can be developed. Included amongst these question are:

- What is the precise impact that BOTA expects to achieve through the mainstreaming of the HIV/AIDS response in the VT Sector?
- Should BOTA be involved in the monitoring of national level impact indicators?
- Is it within the scope of BOTA's activities and capacity to collect data on indicators such as prevalence rates?

The mainstreaming of the HIV/AIDS response may result in increased levels of awareness of the target group, the members of which may in turn – in the long-term – change their behaviour and practices in order to either remain uninfected or live more positively (and longer) with the virus.

What remains unclear is if the range of current interventions undertaken by various institutions and organisations (at local, national and international level) is in fact achieving the desired impact of eradicating the spread of the HIV/AIDS virus. Surveillance studies indicate that despite the variety of awareness raising and knowledge dissemination interventions, the incidence of new infections has not decreased significantly, if at all.

Consideration could be given to focusing the BOTA impact monitoring process on the reach and replicability of the intervention, and on the formalisation of HIV/AIDS structures and processes within the training institutions.

3.6. TRANSFORMING EXTRACURRICULAR ACTIVITIES INTO FORMAL CURRICULA

BOTA has made significant progress in the transformation of extracurricular activities into formal curricula through the inclusion of HIV/AIDS into the BNVQF, specifically in relation to the compulsory credit requirement at BNVQF Level 1.

The continued promotion of BNVQF within the Brigades, Technical Colleges and private training institutions, and their subsequent registration as accredited training institutions and assessment centres, will ensure that HIV/AIDS is, in the long-term, included in the curricula.

The following additional strategies could also be considered.

3.6.1 More use of already existing activities as assessment for certification

Guidelines on assessment have been provided within the BNVQF Level 1 HIV/AIDS programme and include the use of drama as an assessment method.

Consideration could be given to encouraging accredited institutions to make more use of the existing HIV/AIDS-related extracurricular activities in the assessment process. Learners are already involved in the use of drama, peer education activities, contributions to *Emang*, etc. These HIV/AIDS-related activities could form part of the learner assessment portfolios.

HIV/AIDS-related activities could form part of the learner assessment portfolios.

3.6.2 Capacity of staff to deliver delivery programmes linked to unit standards

The BOTA HIV/AIDS Division has already facilitated training of staff from various training institutions in HIV/AIDS-related competencies such as counselling skills. However, staff in the different training institutions will have to be able to develop and deliver programmes linked to the HIV/AIDS unit standards. HIV/AIDS activities in training institutions are generally carried out by committed staff on a voluntary basis who draw on their own

experiences and understanding of the issues. The staff who are currently involved in HIV/AIDS in the different institutions have not completed any formal HIV/AIDS training programmes.

Capacity to deliver programmes linked to unit standards will have to be built amongst the various training institutions. BOTA could play a role in facilitating the development of this capacity through supporting a training of trainers programme.

3.6.3 Identification and accreditation of other HIV/AIDS-related training organisations

There are a number of non-governmental organisations that offer training in various HIV/AIDS-related activities. These organisations offer training in awareness raising, peer education, counselling skills, etc. These organisations could be supported in developing formal programmes in line with the HIV/AIDS BNVQF unit standards. Partnerships could be encouraged between these organisations and training institutions where the capacity to deliver programmes linked to unit standards may not currently exist.

The BOTA HIV/AIDS Division could also consider developing a strategy to identify other organisations involved in HIV/AIDS training activities for possible registration and accreditation. These organisations could then service other training institutions either by offering BNVQF aligned programmes or training staff in the institutions to offer the programmes themselves.

3.6.4 Registration of unit standards of HIV/AIDS-related programmes

BOTA has an important role to play in the registration of unit standards for the wide range of HIV/AIDS-related programmes that are currently offered by a large number of diverse service providers. There is also a need to identify HIV/AIDS learning programme areas that are currently not being adequately addressed, e.g. home based care, men's constructive engagement in reproductive health, gender and power relations, etc.

Currently, there are no unit standards or qualifications for the various programmes that are being offered by different organisations. There is no quality assurance process in place, and in short, anyone can claim to be competent in any particular field. This is particularly relevant in relation to counselling skills. Incompetent and poorly trained counsellors could have a negative and damaging effect on the psychological and physical well being of people they are counselling.

BOTA could make an important national and international contribution to the struggle against HIV/AIDS by identifying a set of core HIV/AIDS-related qualifications and developing the related units standards. The identified qualifications could focus on one of the following examples of learning areas, as a specific qualification or as combination of several learning areas such as those below.

- Peer education
- Counselling
- Life planning skills
- Work place policy development and management
- Training of trainers
- Gender and power relations
- Reproductive health under gender aspects
- Home based care
- Community mobilisation
- Information, education and communication
- Impact monitoring and evaluation.

3.6.5 Promotion of debate on formalisation of HIV/AIDS posts

Currently, HIV/AIDS responsibilities at the different training institutions are added on to other job functions. The formalisation and creation of posts dedicated to HIV/AIDS remains the prerogative of the training institutions. BOTA is not in the position to ensure that HIV/AIDS posts are formalised into organisation structures. However, BOTA could have a

BOTA could make an important national and international contribution to the struggle against HIV/AIDS by identifying a set of core HIV/AIDS-related qualifications and developing the related units standards.

role to play in promoting a debate on the feasibility of, and value in, the formalisation of HIV/AIDS posts in public and private training institutions.

3.7 EXTENSION OF CONCEPTS TO TRAINING IN COMPANIES

BOTA is in the process of engaging systematically with training in companies to link these programmes to the BNVQF and the SWBL approach.

HIV/AIDS activities in companies are generally³⁴ located within the human resource management function. These activities fall within the employee health and welfare function and are informed by the policy guidelines and requirements as set out by the Ministry of Health (Occupational Health Unit). Employee health and welfare units are responsible for HIV/AIDS interventions whereas training units are responsible for meeting the job-specific training needs. In fact, in the limited number of interviews conducted during the assignment, there did not appear to be any link at all between the HIV/AIDS formal interventions and the training programmes.

Companies have either a specific HIV/AIDS workplace policy, or HIV/AIDS is included as a component of the health, safety and welfare policy of the company. Individual staff members have been appointed as HIV/AIDS coordinators as part of their human resource management functions.



Cluster "A" Peer Educators- Northern Region of Botswana

HIV/AIDS activities include the presentation of regular awareness raising sessions, condom distribution and the display of IEC materials. HIV/AIDS coordinators do, in some cases, provide HIV/AIDS inputs as part of the new employees' induction programmes. Some companies have implemented peer education programmes and have appointed focal persons in branches and departments. Companies generally use private service providers for the provision of specific HIV/AIDS training programmes. It is important to note that there are a wide range of HIV/AIDS-related activities already in place in companies.

One of the key characteristics of the company HIV/AIDS intervention strategies is that the focus is on full-time employees. The BOTA HIV/AIDS Division has been engaging with the company HIV/AIDS coordinators or focal persons, through invitations to participate in the Private Providers HIV/AIDS Committee. There is, however, a very limited awareness of BOTA, the BNVQF and the SWBL amongst the company HIV/AIDS coordinators. Given that their focus is on the health and safety of full-time employees, little if any attention is given to trainees (i.e. job-attachments).

³⁴ Only a limited number of company representatives were visited or interviewed telephonically during the short-term assignment. The discussion in this section is therefore a broad generalisation.

The mainstreaming of the HIV/AIDS response in training in companies requires a different strategy to that which is adopted for the other private and public training institutions.

Company HIV/AIDS coordinators are invited to participate in the Private Providers HIV/AIDS Committee. The linkage with the persons responsible for training in the companies needs to be strengthened.

Company HIV/AIDS coordinators do not recognise the benefits of engagement in the Private Providers HIV/AIDS Committee. The link between vocational training and meeting the health and safety needs of employees is not clear. The mainstreaming of the HIV/AIDS response into training activities is not the responsibility of the company HIV/AIDS coordinators.

It needs to be recognised, at the outset, that companies already have many HIV/AIDS activities in place and are guided by the Minimum Internal Package for the Private Sector.³⁵ The mainstreaming support that the BOTA HIV/AIDS Division gives to other training institutions (both public and private) does not appear to be needed in companies.

The mainstreaming of the HIV/AIDS response in training in companies requires a different strategy to that which is adopted for the other private and public training institutions and could include consideration of the issues below.

3.7.1 Inclusion of training coordinators in the HIV/AIDS forums

Currently, the Botswana Business Coalition against AIDS (BBCA) represents companies or businesses on the National HIV/AIDS Vocational Training Committee. Company HIV/AIDS coordinators are invited to participate in the Private Providers HIV/AIDS Committee. The linkage with the persons responsible for *training* in the companies needs to be strengthened.

Even if the relationships with the persons responsible for training is strengthened, the question to address is whether or not the current forums are appropriate to achieving the mainstreaming of the HIV/AIDS response in the company training programmes. It appears that company training units do not have the same set of interests and needs as the public and private training institutions, whose core business is training. Those institutions (both public and private) whose core business is training have a similar set of issues to address in relation to mainstreaming the HIV/AIDS response. For example: which structures should be put in place? How should the HIV/AIDS policy reflect the interests of both staff and learners? What extracurricular activities can be included to enhance the formal learning process?

Mainstreaming of the HIV/AIDS response in company training programmes requires a strengthening of the alignment between the programmes offered and the BNVQF, to ensure that HIV/AIDS is covered at Level 1 and offered at Levels 2 and 3. The focus of the engagement with the companies' training programmes should be a continuation of the promotion of awareness of the vocational training, HIV/AIDS and BNVQF linkage. This engagement has to include the persons responsible for the training programmes, as well as the current focus on HIV/AIDS coordinators. A separate forum for training units could be considered.

Once companies have aligned their programmes to the BNVQF, the mainstreaming of the HIV/AIDS response into formal curricula will take place through the structure and content of the three levels of the BNVQF. The various learning pathways proposed in the



Work-based learning at the Construction Industry Trust Fund (CITF) in Gaborone

³⁵ p. 72. Botswana National Strategic Framework for HIV/AIDS 2003–2009

SWBL approach will ensure that learners will complete the HIV/AIDS credit requirement at least at Level 1 of the BNVQF.

The BOTA HIV/AIDS Division, in collaboration with the other Departments/ Divisions in BOTA, could consider formulating an *internal* mainstreaming in companies concept/strategy document, which focus on the promotion of the BNVQF within companies. Part of this strategy could include the identification and accreditation of HIV/AIDS training institutions/ organisations to support a company-mainstreaming approach. Capacity to offer HIV/AIDS curricula may have to be built within the training sections of the different companies.

Consideration could also be given to the development of unit standards for an HIV/AIDS workplace coordinator's qualification.



Training at Botswana Power Cooperation (BPC)

3.7.2 Possible links between the BOTA mainstreaming experiences and other HIV/AIDS workplace programmes

There are a number of programme initiatives aimed at managing the HIV/AIDS response in the workplace, amongst which is a GTZ supported regional workplace programme called AIDS Control in Companies in Africa (ACCA). This initiative focuses on workplace programmes and the impact of HIV/AIDS on the world of work. The ACCA Toolbox has been produced as a guide for the implementation and maintenance of comprehensive HIV/AIDS workplace programmes.³⁶

Certain aspects of the BOTA experience in mainstreaming the HIV/AIDS response can be transferred to ACCA and other similar workplace programmes. However, it must be noted that the most important “promising practices”, identified in the BOTA experiences so far mainly relate to mainstreaming the HIV/AIDS response in vocational training in public and private school-type training institutions. Targeting the actual workplace as a training environment is part of BOTA's current activities under BOTA's Second Strategic Plan 2004–2008.

The promising practices and lessons learnt from the mainstreaming of the HIV/AIDS response in the vocational training sector could be transferred directly to those companies that have formal training units in place. Companies with training units are encouraged to align their internal programme to the national qualification framework, BNVQF. These companies are encouraged to use the services of registered and accredited training institutions or get registered and accredited as training institutions and assessment centres themselves and ensure that all HIV/AIDS issues are included in their formal and informal training programmes.

The promising practices and lessons learnt from the mainstreaming of the HIV/AIDS response in the vocational training sector could be transferred directly to those companies that have formal training units in place.

³⁶ See www.gtz.de/aids-at-the-workplace and www.acca-toolbox.org

Another possible link between the BOTA experiences and workplace programmes is the importance of the institutionalisation of HIV/AIDS mitigation posts with the organisation or company to ensure that HIV/AIDS issues are not neglected but rather focused on in a structured and systematic manner.

Initiatives aimed at developing and strengthen workplace programmes may benefit from the existence of a formal qualification in the managing of the HIV/AIDS response in the workplace. BOTA has gone some of the way towards developing unit standards, and in developing and implementing HIV/AIDS polices for the workplace (at BNVQF Level 3). These unit standards could be further built on and further developed with the intention of creating a core of skilled, trained and competent staff members of companies to manage and implement effective HIV/AIDS responses.

3.8 KNOWLEDGE MANAGEMENT

Knowledge management for the purpose of this short-term assignment is defined as the dissemination and sharing of implicit and explicit knowledge aimed at mainstreaming the HIV/AIDS response. The knowledge management process thus would include information on strategies and models adopted, identification of promising practices and details of lessons learnt, networking and cooperation with other persons/organisations, etc.

3.8.1 Possible knowledge management strategies or activities

A BOTA HIV/AIDS knowledge management strategy would need to focus on a number of different levels, these being internal to the organisation itself in the first place, and secondly at national, regional and international levels.

BOTA is currently in the process of reviewing its internal knowledge and records management processes. The outcomes of this review will provide guidelines for the management of knowledge across the different sections of the organisation. However, certain immediate steps have been identified in order to begin a process of knowledge management.

Systematic and formal internal cooperation

Increased formal cooperation between the BOTA HIV/AIDS Division and the BOTA Divisions will ensure that the knowledge held by staff of the BOTA HIV/AIDS Division is fed into the other Divisions. BOTA HIV/AIDS Division staff are well positioned to feed into development of unit standards for HIV/AIDS-related programmes, comment on the appropriateness of HIV/AIDS policy as part of the registration and accreditation requirements, feed back lessons learnt in coordination efforts, and provide information of levels of understanding of the BNVQF amongst stakeholders with whom they work.

Use of existing forums to promote BNVQF the mainstreaming of the HIV/AIDS response

The existing forums (i.e. the National HIV/AIDS VT Committee, and the Private Providers HIV/AIDS Committee) are prime targets for BOTA to use to expand the reach of the BNVQF. A BNVQF information sharing session could be included as a standing item on the agenda of these meetings.

Similarly, the mainstreaming of the HIV/AIDS response could be made a standing item on the agenda of forums convened by other BOTA divisions, e.g. the Marketing and Promotions Division.

Reporting framework

An important contribution to the knowledge management process would be the development of a reporting format for the HIV/AIDS committee structures. This would allow knowledge to be gathered on particular issues in some kind of standardised format. It would also allow for the different stakeholders to report back more easily and systematically to their own constituencies.

Increased formal cooperation between the BOTA HIV/AIDS Division and the BOTA Divisions will ensure that the knowledge held by staff of the BOTA HIV/AIDS Division is fed into the other Divisions.

Promising practice publication

BOTA has already planned the dissemination of promising practices and lessons learnt in a hardcopy and electronic publication. This will serve to share information and experiences on all levels.

Mainstreaming in vocational training IEC materials

The production of posters and pamphlets on the mainstreaming model (concepts, structure and strategies) would be a useful information dissemination tool. These materials could provide institutions with guidelines on the types of issues that need to be considered in the mainstreaming of the HIV/AIDS response, processes that need to be undertaken, structures that need to be established, and networks that can be utilised. In short, a step-by-step guide to mainstreaming could be developed and set out.

Multi-media recording of use of drama

Video recordings of the various drama coaching workshops, the different productions and processes that are followed in using edutainment as a awareness raising concept would be a useful knowledge management process. These materials could be used to both raise HIV/AIDS awareness and provide guidelines on the use of edutainment in the mainstreaming of the HIV/AIDS response.

Expanded *Emang* concept

The learner-driven publication, in an expanded form (as discussed above), could serve as a useful information dissemination tool both nationally and regionally. This publication could also be used as a regional networking tool, whereby debates and exchange between learners from the countries in the region could be promoted and encouraged.

Database of HIV/AIDS service providers

Consideration could be given to the establishment of a database of HIV/AIDS services providers related to VT interventions that operate at a national, regional and international level. The establishment of this database could include the creation and management of a website and/or electronic newsletter³⁷ that provides information on new approaches, organisational activities, events, publications and key sector networks.

Regional forum with other training authorities

BOTA is well positioned to contribute to a regional forum on mainstreaming the HIV/AIDS response with specific reference to the development of unit standards and HIV/AIDS-related qualifications.

The possibility of sharing unit standards between different qualification authorities would contribute to the development of a regional qualifications framework (RQF).

3.8.2 GTZ Product-Oriented Knowledge Management

The mainstreaming of the BOTA HIV/AIDS response into the vocational training system can contribute significantly to the GTZ Product-Oriented Knowledge Management Process. It would appear that the BOTA process could contribute modules to the following products:³⁸

062 Umfassende HIV/AIDS Arbeitsplatzprogramme (Extensive HIV/AIDS programme at the Workplace)

073 HIV/AIDS und Bildung (HIV/AIDS and Education)

Possible modules for the above products may include those below.

Product	Module
HIV/AIDS in the workplace	Incorporating HIV/AIDS into formal training programmes offered by companies/businesses.

IEC materials could provide institutions with guidelines on the types of issues that need to be considered in the mainstreaming of the HIV/AIDS response, processes that need to be undertaken, structures that need to be established, and networks that can be utilised.

The mainstreaming of the BOTA HIV/AIDS response into the vocational training system can contribute significantly to the GTZ Product-Oriented Knowledge Management Process.

³⁸ GTZ Produkte-Datenbank (Product Database) extracted from GTZ Intranet 18.10.2004

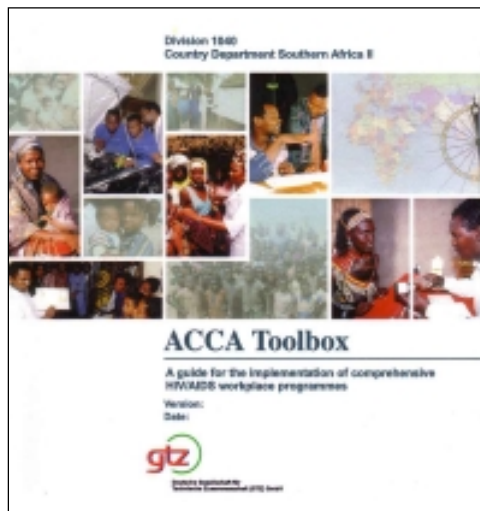
Promoting a broad definition of mainstreaming the HIV/AIDS response into educational processes

Staff and partners

- (see above).

Methods and instruments

- Concepts, structures, strategies and model for mainstreaming the HIV/AIDS response
- Supporting organisations to institutionalise HIV/AIDS response programmes
- Including HIV/AIDS response programmes into formal learning processes
- Identification and coordination of key role-players
- Support institutions to establish necessary structures and put the required processes in place.



Empirical knowledge

- Institutional progress reviews
- KAB study
- Success of institutional mainstreaming approaches.

GTZ ACCA Toolbox (CD): AIDS Control in Companies in Africa

3.8.3 GTZ strategy for Technical Education and Vocational Training (TEVT) in sub-Saharan Africa

GTZ is currently in the process of developing and implementing a strategy for GTZ interventions in TEVT for the year 2005–2010 in order to position GTZ as one of the key players in the field of TEVT interventions in sub-Saharan Africa.

HIV/AIDS prevention and mitigation interventions have to be included in a broader Sub-Saharan strategy for technical education and vocational training. HIV/AIDS not only impacts on the wellbeing of the learners, but on the economic and social development of the region as a whole. HIV/AIDS will have an impact on the overall skills pool in relation to the newly qualified, the already qualified and the trainers themselves.

The mainstreaming of the HIV/AIDS response is a vital component of a broad skills development strategy for the region. HIV/AIDS prevention and mitigation, through the implementation of the broad concept of mainstreaming (i.e. an extension of the concept beyond inclusion into the formal curriculum) has to be included as a main implementation concept of the strategy.

HIV/AIDS prevention and mitigation interventions have to be included in a broader sub-Saharan strategy for technical education and vocational training.

3.9 GENERAL RECOMMENDATIONS FOR VT AUTHORITIES TO INTEGRATE HIV/AIDS

The BOTA experiences in mainstreaming the HIV/AIDS response has provided other VT authorities with possible activities, approaches and strategies to adopt to enhance their own efforts in mainstreaming the HIV/AIDS response. The possible activities, approaches and strategies, as set out below, have been extracted and summarised from the foregoing discussions.

3.9.1 Inclusion of HIV/AIDS responses as part of the organisation's strategic objectives

Inclusion of HIV/AIDS responses as part of the organisation's strategic objectives would mean that the HIV/AIDS responses becomes part of the core business of the organisation.

This would ensure that the HIV/AIDS response is resourced in terms of both funding allocations and staffing (i.e. institutional responsibility would be allocated), and that performance measures could be established and monitored. This may contribute to addressing the usual scenario where the HIV/AIDS response, considered to be a cross-cutting issue, is not dealt with systematically by any one person in the organisation, or – in some cases – not dealt with at all.

3.9.2 HIV/AIDS-related credit requirements as compulsory within the qualifications framework

VT authorities could consider making HIV/AIDS-related programmes compulsory credit requirements for the different qualification levels. Unit standards such as those developed by BOTA could be piloted and adjusted, where necessary. The guidelines for developing curricula and the actual curricula could be used, evaluated and adjusted where necessary to ensure appropriateness to the specific geographical/cultural location of the different VT authorities.

3.9.3 HIV/AIDS policy and activity requirements for registration of training institutions

VT authorities could consider adopting the HIV/AIDS policy and activity requirement as a prerequisite to registering and accrediting institutions as training providers. These prerequisites could include:

- The existence of HIV/AIDS policies applicable to all staff and learners, with non-discrimination, prevention and support clauses and procedures
- Articulated HIV/AIDS awareness activity programme
- Existence of representative structures at the institutions to address HIV/AIDS issues and develop responses, and
- Existence of learners and staff support services to deal with the physical, social and psychological needs of affected or infected students and staff (either on the campus or as referrals).

3.9.4 Support to VT institutions to meet registration and accreditation requirements and to ensure that capacity to deliver HIV/AIDS-related programmes exists

VT authorities could consider providing structured and formal support to VT institutions to meet the registration and accreditation requirements in relation to the institutions' response to HIV/AIDS. This could include providing institutions with model HIV/AIDS policies, assisting the establishment of representative structures, providing VT institutions with planning guidelines and assistance, and ensuring that databases on referral agencies are available. Capacity to deliver accredited HIV/AIDS-related programmes would also have to be built. This may include ensuring that the staff's knowledge base is adequate and that the ability to develop curricula and materials exists.

3.9.5 Integration with other cross-cutting themes and assessment of content and impact of current HIV/AIDS programmes

It is well documented that the impact of the HIV/AIDS epidemic cannot be addressed without taking into consideration issues such as gender equity, power relations, access etc.

Consideration could be given to ensure that these and related issues are included in HIV/AIDS programmes, both within the formal qualifications framework and as extracurricular activities within the different institutions. Any adjustment to unit standards or the development of new unit standards will need to take these other cross-cutting issues into consideration.

In general, results of KAB studies indicate that there are relatively high levels of knowledge in relation to HIV/AIDS prevention and transmission, yet the infections rate continues to rise. Current programmes need to be assessed for impact and the focus of these programmes may have to change from providing basic knowledge to providing

It is well documented that the impact of the HIV/AIDS epidemic cannot be addressed without taking into consideration issues such as gender equity, power relations, access etc.

learners with more general life skills (such as assertiveness training, decision-making skills, etc.) and breaking down gender stereotypes.

3.9.6 Defining the strategic partnerships, target groups and the role of the VT authorities in mainstreaming HIV/AIDS response in the VT sector

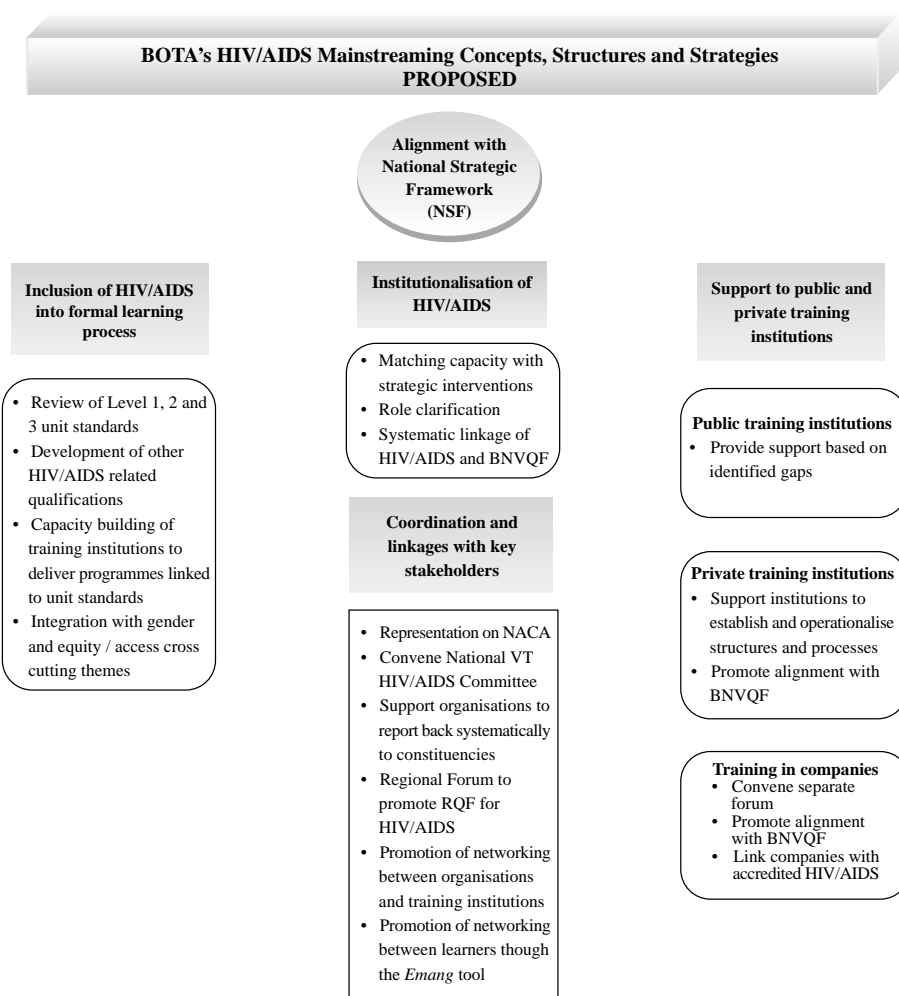
The abundance and multiplicity of different organisations, both governmental and non-governmental, operating within the field of HIV/AIDS presents any VT authority with the need to make strategic decisions on partnerships. VT authorities need to be very clear as to which target group they serve and what the mandate of the VT authority is in relation to HIV/AIDS mitigation. The target group and mandate of the different VT authorities will be country specific. However, irrespective of possible different target groups and mandates, in order for the VT authorities to develop any coherent response it should stay focused on its primary target group and within its mandate.

3.9.7 Registration of additional HIV related qualifications within national qualification frameworks

VT authorities may have an important role to play in what can be considered a much needed quality assurance process of the wide range of HIV/AIDS programmes on offer. Currently, there is little or no quality assurance of the numerous HIV/AIDS-related training programmes on offer. HIV/AIDS counselling, management of HIV/AIDS in the workplace, caring for people living with AIDS, and so on, are examples of some of the possible areas in which VT authorities could support the development of unit standards and registration of formal qualifications.

SECTION 4: CONCLUSION AND RECOMMENDATIONS

This section summarises the content and discussions presented in this report in the form of a series of recommendations. The diagram below indicates a possible revised strategic focus for mainstreaming of the HIV/AIDS response, as per the model set out in section 3.1 of this document. The proposed strategic focus builds on the current promising practices and lessons learnt.



4.1 INSTITUTIONALISATION OF HIV/AIDS MEASURES

4.1.1 Matching capacity with strategic interventions

The current staffing capacity of the BOTA HIV/AIDS Division (one coordinator and the field officer) places a number of constraints on what is possible to achieve in the mainstreaming of HIV/AIDS responses. The importance of mainstreaming the HIV/AIDS response has been recognised, and any organisational restructuring will need to take this recognition into account. Planned interventions need to be prioritised within the mandate of the organisation.

4.1.2 Role clarification

Part of this prioritisation process and identification of strategic interventions includes a role clarification process, guided by the mandate of BOTA. It is strongly recommended that the BOTA HIV/AIDS Division moves away from an implementation role into a facilitating role. A key example here would be reducing the amount of time and energy spent on

awareness raising/training processes and converting this to a greater focus on identifying other services providers who can support VT institutions.

Similarly, BOTA's mandate would be more effectively carried out in the facilitation of the development of curriculum and materials, through capacity building and provision of support to potential service providers.

4.1.2 Systematic linkage of HIV/AIDS to BNVQF

The mainstreaming process would benefit from more detailed internal BOTA cooperation. This could include joint planning and target setting between the BOTA HIV/AIDS Division and other Divisions for the different engagement processes undertaken.

4.2 INCLUSION OF HIV/AIDS INTO THE FORMAL LEARNING PROCESS

4.2.1 Review of HIV/AIDS unit standards, Levels 1, 2 and 3

The HIV/AIDS unit standards are subject to a piloting and review process. The outcomes of this process will determine if the unit standards require changes.

4.2.2 Development of other HIV/AIDS-related qualifications

BOTA is extremely well positioned to use its experience and current organisational commitment to mainstreaming the HIV/AIDS response to develop a series of HIV/AIDS-related qualifications. These could be recognised as promising practices in the region.

4.2.3 Capacity building of training institutions to deliver HIV/AIDS programmes linked to unit standards

BOTA could, within its mandate, play an important role in the building of capacity within institutions to deliver HIV/AIDS programmes linked to unit standards. Interventions could be aimed at training institutional staff, as well as the identification of other HIV/AIDS-related organisations that could act as service providers to the training institutions.

4.2.4 Integration with gender and equity/access cross-cutting themes

The integration of the gender and equity/access cross-cutting themes remains an important area of focus. Gender and equity/access need to be integrated with the HIV/AIDS activities. All three cross-cutting themes need to be integrated into all learning areas as well as into the related unit standards development process.

BOTA could, within its mandate, play an important role in the building of capacity within institutions to deliver HIV/AIDS programmes linked to unit standards.

4.3 COORDINATION AND LINKAGES WITH KEY STAKEHOLDERS

4.3.1 Representation on NACA

The participation of BOTA in NACA remains a key intervention to ensure alignment with the national strategy.

4.3.2 Convene National VT HIV/AIDS Committee

The engagement in the National VT HIV/AIDS Committee also remains a very important coordination intervention. One key aspect to address is the inclusion of HIV/AIDS focal persons as representatives of training units of companies/businesses in this structure.⁴⁰

4.3.3 Support organisations in reporting back systematically

A set of tools needs to be developed to support organisations in reporting back systematically from the National VT HIV/AIDS Committee. This committee serves as a linkage between the different interventions and the National Strategic Framework for HIV/AIDS.

⁴⁰ This is discussed in section 4.4. below

The tools should allow BOTA to feed information into the monitoring of the national response (coordinated by NACA) and to allow organisations to ensure that the interventions of their constituencies are in line with the national response. A tool kit could include a reporting format (i.e. criteria against which to report), monitoring of report back processes), as well as knowledge management kits (e.g. newsletters, publications, information posted on websites, etc.).

4.3.4 Regional forum to promote Regional Qualifications Framework (RQF)

BOTA can make an important contribution to the struggle against HIV/AIDS in the region as a whole by sharing its experience and expertise in mainstreaming the HIV/AIDS response in the vocational training sector.

Cooperation with other training authorities in the region on HIV/AIDS issues could result in the sharing of, for example, unit standards across countries, avoidance of duplication of energies in different countries, and the promotion of the inclusion of HIV/AIDS unit standards in a RQF.

Given the prevalence and negative impact of HIV/AIDS on the region as a whole, a focus of HIV/AIDS-related qualifications and unit standards would appear to be an obvious choice to strengthen the development of a RQF. Furthermore, HIV/AIDS-related qualifications constitute a relatively new field and would provide the ideal subject matter to develop regionally appropriate qualifications.

4.3.5 Promotion of networking between organisations and training institutions

The BOTA HIV/AIDS Division needs to retain its focus on the promotion of networking between HIV/AIDS-related organisations and VT institutions. A specific focus should be placed on identifying and promoting strategic partnerships between the twos. Included in this focus, should be the identification of gap areas (i.e. where no appropriate service providers exists) and the development of capacity within the areas.

4.3.6 Promotion of networking between learners through the *Emang* tool
Emang may be more appropriately considered to be a networking tool rather than an awareness raising interventions. The expanded concept of *Emang* could be utilised to promote networking between learners within the VT sector in Botswana and with learners in the region.

As part of the BOTA HIV/AIDS Division's role clarification process, skills in the production and management of *Emang* should be transferred to a relevant and capable outside service provider.

4.4 SUPPORT TO PUBLIC AND PRIVATE TRAINING INSTITUTIONS

It is recommended that the support to public and private training institutions focus on the mainstreaming of the HIV/AIDS response within the BOTA mandate and in line with the national strategy. This means that current awareness-raising activities, provision of training, etc., would fall outside the scope of BOTA's activity.

It is further recommended that distinct strategies should be developed for the different categories of training institutions.

4.4.1 Public training institutions

BOTA may need to consider reducing the amount of support currently given to Brigades, Technical Colleges and other training institutions in the vocational training sector.

Given that the relevant Ministries support the different institutions, they are already aligning mainstreaming processes with the National Strategy. Activities related to the establishment of structures and the operationalisation of processes should be left to the respective Ministries. BOTA could support the Ministries on request or where significant

BOTA can make an important contribution to the struggle against HIV/AIDS in the region as a whole by sharing its experience and expertise in mainstreaming the HIV/AIDS response in the vocational training sector.

Distinct strategies should be developed for the different categories of training institutions.

gaps have been identified. BOTA should not take on the mainstreaming role of these Ministries.

BOTA's engagement with these institutions should focus on ensuring that the programmes offered are aligned with the BNVQF and that capacity exists to deliver the programme.

4.4.2 Private training institutions

BOTA could consider increasing its engagement with the private training institutions. The Private Providers HIV/AIDS Committee should be considered to be a forum through which support to these institutions can be delivered, as opposed to serving a coordination function.

Support to these institutions needs to focus on the establishment and operationalisation of structures and processes to enable them to adopt a broad definition of mainstreaming and the promotion of the alignment with the BNVQF.



Female Learner at the Electrical Workshop- Construction Industry Trust Fund (CITF)

4.4.3 Companies that provide training

It is strongly recommended that a separate forum be created for companies that provide training. A forum of this nature would need to bring company training departments and HIV/AIDS coordinators together. The BBCA could prove to be a strategic partner in the promotion and operationalisation of this forum.

This forum would serve to link current training programmes with the National Strategic Framework for HIV/AIDS. It could further be used to promote alignment with BNVQF and to link companies with accredited HIV/AIDS service providers.

4.5 CLOSING REMARKS

This short-term assignment has identified a number of promising practices in the BOTA HIV/AIDS response mainstreaming approach. These practices could benefit the region as a whole. Recommendations have been developed based on possible strategies to build on current promising practices.

In conclusion, BOTA appears to be well positioned to become a centre of excellence for the mainstreaming of the HIV/AIDS response into the vocational training sector in the region.

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APPENDIX 1: LIST OF PERSONS INTERVIEWED

Date	Time	Person(s)	Issues
04.10.04	08h00	Abel Modungwa – CEO, BOTA	Formal introduction/welcome
	08h30	Stefan Erber – GTZ Technical Advisor, BOTA Ulla Tschoetschel – HIV/AIDS Coordinator, BOTA	Review of terms of reference and background information of BOTA and the mainstreaming of the HIV/AIDS responses
05.10.04	12h30	Peter Fleming – Director Quality Assurance, BOTA	BNVQF
	14h00	Rose Masisi – Curriculum Coordinator, BOTA	Development of HIV/AIDS units standards and curriculum guidelines
06.10.04	15h00	Ulla Tschoetschel Mothebe Madanika – HIV/AIDS Field Officer, BOTA Stefan Erber	Review of and agreement on assignment work plan
08.10.04	10h00	Ulla Tschoetschel Mothebe Madanika	Overview of the BOTA HIV/AIDS Division and identification of possible promising practice examples
	11h00	Ulla Tschoetschel Mothebe Madanika Stefan Erber	Process management
11.10.04	09h00	Dr. Peter Stegmann – Programme Planning Adviser, NACA	NACA structure and coordination role
	10h00	Dr. Fidzani, BHRIMS	Monitoring and evaluation of HIV/AIDS status and interventions
	14h30	BOTA presentation Stefan Erber Tom Mphele- Apprenticeship and Industrial Training Coordinator, BOTA	Structured Work-Based Learning (SWBL)
12.10.04	09h00	Mosetsana Kosiemang – HIV/AIDS Coordinator, DVET Rosemary Gitau – Counselling and Guidance Coordinator, DVET	HIV/AIDS functions of DVET and relationship to BOTA HIV/AIDS Division
13.10.04	09h00	Training Manager, HIV/AIDS Coordinator and other staff and learners – Ramotswa Brigades	HIV/AIDS activities and relationship with BOTA HIV/AIDS Division
	12h00	Angela Munkombwe – HIV/AIDS Coordinator – Mega Size Computer College	HIV/AIDS activities and relationship with BOTA HIV/AIDS Division
	14h00	Principal, HIV/AIDS Coordinator, staff and students – Vocational and Creativity Institute	HIV/AIDS activities and relationship with BOTA HIV/AIDS Division

Date	Time	Person(s)	Issues
14.10.04	14h00	HIV/AIDS Coordinator and staff – Lobatse Brigades Centre	HIV/AIDS activities and relationship with BOTA HIV/AIDS Division
15.10.04	10h00	HIV/AIDS Coordinator and staff KDB – Mochudi Brigades	HIV/AIDS activities and relationship with BOTA HIV/AIDS Division
18.10.04	14h00	Dr. Chipfakatcha – EPOS/GTZ, Ministry of Local Government – DMSAC support project	Operations of DMSACs and linkage to BOTA
	15h00	C. Seretse – Health Coordinator, First National Bank	HIV/AIDS activities in the workplace and as part of in-house training programme/knowledge of BOTA
19.10.04	09h00	C. Legodi – Health Coordinator, Botswana Telecommunications	HIV/AIDS activities in the workplace and as part of in-house training programme/knowledge of BOTA
	11h30	Ulla Tschoetschel Mothebe Madanika Stefan Erber	Process management
	12h30	Stefan Erber	Product oriented knowledge management and GTZ strategy for TEVT in sub-Saharan Africa
		Telephone interviews (conducted by Ulla Tschoetschel) Barclays Bank – HIV/AIDS Coordinator Botswana Water Utilities Cooperation – HIV/AIDS Coordinator METSEF – HIV/AIDS Coordinator	HIV/AIDS activities in the workplace and as part of in-house training programme knowledge of BOTA
22.10.04	11h30	BOTA staff	Presentation of draft report for input and discussion

APPENDIX 2: LIST OF DOCUMENTS REVIEWED

List of BOTA documents reviewed

Annual Report 2003/4
Awareness of HIV/AIDS – BNVQF Level 1 Programme (June 2004)
BOTA News
Discussion Paper: The role of the HIV and AIDS Divisions under BNVQF (June 2004)
Guidelines for Preparing Curricula linked to Unit Standards (March 2004)
HIV/AIDS Model Policy for Vocational Education and Training Institutions (May 2003)
BOTA HIV/AIDS Policy (Nov.2003)
BOTA HIV/AIDS Strategy (2003)
Information Pamphlet: Curriculum Division and Training Standards Division
Minutes of the HIV/AIDS Committee Meetings for Private Training Providers (27th May and 22nd August 2004)
Minutes of VT HIV/AIDS Committee Meeting (27th July 2004)
BOTA Plan of Operations 2001 – 2004
Report on Field Visit – Assessment of HIV/AIDS Activities in VET Institutions, June 2003, Mothebe Madanika and Ulla Tschoetschel
Report on Peer Education Training (July 2004) HIV/AIDS Field Officer
BOTA Second Strategic Plan and Plan of Operation 2004 – 2008
Tender for a Consultancy on the Knowledge, Attitude and Behaviour study toward HIV/AIDS in the Vocational Training Sector in Botswana (#BOTA PR 11/04)
Terms of Reference of the VT HIV/AIDS Committee (March 2003)

Other documents reviewed

ACCA Toolbox: A guide for the implementation of comprehensive HIV/AIDS workplace programmes Version 2.4, Date 11.08.2004 (CD Rom)
Botswana 2003 Second Generation HIV/AIDS Surveillance, NACA, December 2003
Botswana National Strategic Framework for HIV/AIDS 2003–2009, Ministry of the State President, Republic of Botswana
Emang – Quarterly HIV/AIDS newsletters November 2003 and April 2004
GTZ HIV/AIDS Relevant Practices Collection: Guidance Note for the Submission of Proposal, November 2004
GTZ Products: HIV/AIDS and Education (Short Description) #073
Guidelines on Streamlining Sectors for Effective National Response, BHRIMS, NACA, April 2002
HIV/AIDS Case Reporting in Botswana 2000–2002, BHRIMS, NACA November 2002
Memorandum of Understanding between BOTA, GTZ and DED on cooperation regarding the Project Mainstreaming HIV/AIDS in the Vocational Education and Training Sector, 11th September 2001
Ministry of Education: Department of Vocational Education and Training – Annual Performance Plan 2003
Mphele, T. and Erber, S. (2004) Upskilling Botswana through Structured Work-based Learning (SWBL) – summary document and presentation
Muhiru, S. and Becker, A. Mainstreaming HIV/AIDS in the Vocational Training Sector: Situational Analysis, Organisational Landscape and Operational Plan, 2001
Simon Muchiru, Notes on HIV/AIDS in Botswana for BOTA HIV/AIDS Coordinator, December 2003
Product Oriented Knowledge Management: Manual for Sector Networks and Projects, GTZ, Eschborn, 2003
Roesch, G., Erber, S., Schroter, H. and Przyklenk, K. Project Progress Review of the Project “Reform of the VET- System in Botswana”, Gaborone, Botswana, December 2003
Status of Botswana’s National Response (October 2003 – June 2004). Summary Report, BHRIMS, NACA
Status of the 2002 National Response to the UNGASS Declaration of Commitment on HIV/AIDS, NACA, March 2003

APPENDIX 3: TERMS OF REFERENCE

HIV/AIDS SHORT-TERM CONSULTANT – BOTSWANA TRAINING AUTHORITY (BOTA)

KNOWLEDGE MANAGEMENT CONCERNING MAINSTREAMING HIV/AIDS IN THE VOCATIONAL TRAINING SECTOR AND INTRODUCING HIV/AIDS WORKPLACE CONCEPTS INTO VOCATIONAL TRAINING AT THE WORKPLACE

1. BACKGROUND

Botswana belongs to the countries with the highest HIV/AIDS infection rate world wide. In 2003, the prevalence rate was estimated at 37.4% in the age group of the 19–49 year-old people. Only in recent years has the country adopted a consistent strategy to control the HIV/AIDS epidemic with considerable national input and massive assistance from bilateral and multilateral as well as private donors. The Government of Botswana has declared HIV/AIDS a national crisis and has asked all public and private institutions to implement HIV/AIDS interventions.

Although Botswana has lost its status as a “partner country“ for the German Ministry of Economic Cooperation and Development (BMZ) due to its advanced status of development, there are still two bilateral projects coordinated by the German Technical Cooperation (GTZ) in Botswana: The project on the “Reform of the Vocational Training Sector of Botswana” which is based at the Botswana Training Authority (BOTA), a parastatal under Botswana’s Ministry of Labour and Home Affairs and, since May 2004, a new project for the support of HIV/AIDS interventions on district level “AIDS control in Botswana”, which is placed at the Aids Coordination Unit (ACU) and the District Multi-sectoral AIDS Committees (DMSACs) under Botswana’s Ministry of Local Government, implemented on behalf of GTZ by the German consultancy company EPOS. Furthermore a number of development workers of the German Development Service (DED) are working in Botswana in various sectors, among them education and previously also HIV/AIDS.

Since September 2002, the Botswana Training Authority (BOTA) has integrated an HIV/AIDS component in their Plan of Operations, following recommendations by GTZ and in line with the National Strategic Framework for HIV/AIDS. This component was implemented with the personnel support of the DED and the financial support for the programmes by GTZ. One DED Development Worker, Mrs. Ulla Tschötschel, is seconded as HIV/AIDS Coordinator to BOTA and is closely working together with a Botswana HIV/AIDS Field Officer, Mr. Mothebe Madanika.

The Vocational Training Sector had almost been neglected when the work of BOTA’s HIV/AIDS Division started. A baseline study, conducted in 23 training institutions in 2001 showed that most of the training institutions did not implement any HIV/AIDS activities – nor was their staff trained in that field (see also the consultants report: “Mainstreaming HIV/AIDS in the Vocational Education and Training Sector Botswana”, Simon Muchiru and Antje Becker, 2002)

The aim of BOTA’s HIV/AIDS Division is to implement and coordinate HIV/AIDS activities and programmes in the Vocational Training Sector countrywide. This includes public and private training institutions. A training institution according to the Vocational Training Act 1998 means “a public or private centre, organisation, employer or person, providing vocational training.” It also includes the workplace and companies as a location where vocational training takes place.

So far BOTA’s HIV/AIDS Division could implement and achieve the following:

- A national Vocational Training HIV/AIDS Committee and a committee for private training institutions could be established. These committees are also responsible for integrating effective HIV/AIDS programmes in the Vocational Training Sector. In the meantime most training institutions cooperate with committees on district and community level. BOTA emphasises the fact that trainees as the learners should be involved in that process.
- BOTA has developed an HIV/AIDS policy for the Vocational Training Sector which has been introduced to the training institutions.

- Further training in “Mainstreaming HIV/AIDS”, “HIV/AIDS Counselling” and “Peer Education” could be offered countrywide for trainers and trainees (learners)
- BOTA has developed HIV/AIDS Training (Unit) Standards that build the basis for the development of curricula in the training institutions
- Posters and brochures got developed and distributed in the training institutions
- Participation in the 1. GTZ/ACCA Workshop in South Africa in 2002
- The HIV/AIDS Newsletter *Emang* was conceptualised: Trainees write and draw about their perception of HIV/AIDS- the second edition just got printed and distributed
- Planning and development of HIV/AIDS awareness and information days for BOTA staff in collaboration with BOTA's HR division
- Extracurricular activities: Drama performances in conjunction with a “Sponsored HIV/AIDS Walk” and in collaboration with other HIV/AIDS organisations
- Further training of trainees in theatre pedagogy – a national drama competition has just started

With the beginning of the last phase of the project “Reform of the Vocational Training System”, that is the “phasing out” phase to conclude 10 years support of Botswana in its reform of the Vocational Training System and that will last till February 2007; BOTA's concept for “Mainstreaming HIV/AIDS in the Vocational Training Sector” has also been further developed. Taking ownership and mainstreaming HIV/AIDS also within BOTA seriously, BOTA has taken over most of the financial contributions to the activities of BOTA's HIV/AIDS Division. BOTA will also mainstream the HIV/AIDS response within its own organisation by including HIV/AIDS issues in activities of all departments (BOTA Plan of Operations 2004–2008, Key Result Area 4). Promoting “Structured Work-Based Learning (SWBL)” as the key element of the new, reformed Vocational Training System in Botswana, BOTA will also address companies as an integral part of the group of training institutions providing vocational training in the country in their HIV/AIDS activities. Within Key Result Area 6 (“Improve Communication and Knowledge Management in Vocational Training”) to use a knowledge management system (KMS) for sharing best practice across the vocational training system has been set as a goal which also includes HIV/AIDS.

HIV/AIDS has become an important topic within the work of BMZ and GTZ. All GTZ projects in Africa are asked to include HIV/AIDS issues into their project work. GTZ HQ has introduced a Sector Project on HIV/AIDS (“AIDS Control in Developing Countries”) as well as a project on HIV/AIDS at the workplace (“AIDS Control in Companies in Africa”- ACCA). Knowledge management and transfer of “best practices” within the region are of high importance.

HIV/AIDS workplace programmes developed in other countries often don't fit to the needs in Botswana. The majority of companies in Botswana are of small, micro and medium size (SMMEs). There are no big international companies in Botswana. These programmes also don't address the specific needs of learners in the companies. Nevertheless, the HIV/AIDS Division at BOTA has started to cooperate with workplace training institutions such as First National Bank, Construction Industry Trust Fund (CITF), Botswana Water Utilities and Botswana Power Corporation.

2. TASKS OF THE CONSULTANT

The aim of the consultancy is to help to identify, develop and share best practices concerning HIV/AIDS in the VT Sector and at the workplace between BOTA, DVET, the GTZ Sector Projects (ACCA and AIDS Control in Developing Countries), other donors/organisations being active in that field and the GTZ Regional Sector Network (WIRAM Africa). Concepts developed by BOTA and DVET for HIV/AIDS in school-type vocational training institutions should be combined with concepts developed by ACCA and other organisations/projects for HIV/AIDS at the workplace. Both concepts could meet in the common target area of both, which is vocational TRAINING at the WORKPLACE.

The overall task of the consultant can be divided into two main tasks which would be conducted in close cooperation with the GTZ BOTA Team Leader, the DED Coordinator and Field Officer for

HIV/AIDS at BOTA and other BOTA staff as well as the GTZ HIV/AIDS sector projects:

Task one: Knowledge Management “Mainstreaming the HIV/AIDS response in the Vocational Training (VT) Sector”

- Analyse, structure and document the work that has been done by the BOTA HIV/AIDS Division and the Department for Vocational Education and Training (DVET) in the Ministry of Education in mainstreaming HIV/AIDS activities in the (school placed part of the) Vocational Training (VT) system so far (Concept, strategy, activities, results, impact, lessons learnt and best practice, description of processes) in close cooperation with BOTA.
- Development of modules for ‘Mainstreaming the HIV/AIDS response in VT’ that can be transferred to other countries/projects/organisations (Sample structure for these modules has been developed by GTZ and can be applied here)
- Develop ideas on how “Mainstreaming the HIV/AIDS response in the VT Sector” can be included in the GTZ Strategy for Technical Education and Vocational Training (TEVT) in sub-Saharan Africa (together with the BOTA GTZ Advisor).

Task two: Extension/Adaptation of existing concepts to also incorporate “Mainstreaming HIV/AIDS activities in structured work-based Vocational TRAINING in COMPANIES”

- Develop concepts, strategies and activities on how to fine-tune the concepts for workplace HIV/AIDS activities to specific needs of TRAINING at the workplace.
- Benchmarking and analysis of existing workplace programmes (also from other donors) in Botswana, the (SADC) region and world wide (also included company projects, projects of Ministry of Health, GTZ projects “ACCA”, “HIV/AIDS Prevention”, Malawi, Martin Kade and “Basic Education Programme”, Malawi, Wilfried Goertler), adaptation of workplace programmes to specific VT needs in line with the national strategy on HIV/AIDS).
- Support BOTA in widening the focus of mainstreaming the HIV/AIDS response in the VT Sector by adding training in companies as a target field in addition to school-based VT.
- Evaluate opportunities for networking and sharing best practice between the various projects in the region addressing HIV/AIDS at the workplace and in Vocational Training.

Expected outcomes of the assignment

The assignment consists of the two tasks described above: (“Knowledge Management” (Task 1) and “Adaptation of existing concepts to also incorporate mainstreaming HIV/AIDS activities in structured work-based Vocational TRAINING in COMPANIES” (Task 2) and shall be documented and published as part two of the brochure “Mainstreaming HIV/AIDS in the Vocational Education and Training Sector”. The first part of the brochure, published in 2002, had summarised the results of the baseline mission in 2001/2 and formed the basis of the work of BOTA's HIV/AIDS Division. The second part of the brochure should then document the analysis of the work done at BOTA and DVET in the meantime (Task 1) as well as a description of the new concept developed by the consultant (Task 2).

The report should consist of 40–50 pages.

The consultant should have experience with knowledge management and HIV/AIDS workplace concepts as well as some basic understanding of vocational education and training in vocational schools and at the workplace.

The BOTA HIV/AIDS Division should be involved in all stages of the consultancy to benefit from the professional expertise and to ensure BOTA's absorption of recommendations and activities. 3. Organisational set-up for the assignment

Proposed duration: 3 weeks on site including travel (03–23.10.04) and 4 days report compilation.

Costs involved: The costs for the consultant (salary, daily allowances, hotel, travel costs) will be provided by the GTZ HIV/AIDS Sector Project “AIDS Control in Developing Countries”.

Other parties/resource persons involved:

BOTA:	Ulla Tschoetschel	DED HIV/AIDS Coordinator
	Mothebe Madanika	BOTA HIV/AIDS Field Officer
	Maria Overeem	BOTA Director Planning and Research
GTZ Botswana:	Stefan Erber	GTZ Team Leader at BOTA
GTZ HQ:	Yvonne Schoenemann	Sector Project “AIDS Control in Developing Countries”
	Elisabeth Girrback	ACCA (AIDS Control in Companies in Africa)
	Annemarie Koenecke	Regional Manager and Coordinator, HIV/AIDS Mainstreaming in Africa
	Klaus Przyklenk	TEVT Planning and Development Unit

4. LITERATURE

“Botswana National Strategic Framework for HIV/AIDS 2003–2009“

“Mainstreaming HIV/AIDS in the Vocational Education and Training Sector Botswana” (Simon Muchiri and Antje Becker, GTZ, 2002)

“The Botswana Training Authority’s Second Strategic Plan and Plan of Operations 2004–2008” (BOTA, 2004)

“The German Contribution to the fight against HIV/AIDS in Botswana” (S. Erber, U. Tschoetschel, V. Chipfakacha, 2004)

“The Botswana National Vocational Training System – Upskilling Botswana through structured work-based learning (SWBL)” (S. Erber, T. Mphele, BOTA, 2004)

“HIV/AIDS und berufliche Bildung in Botswana – Abriss und grundlegende Informationen” (Klaus Przyklenk, GTZ, 12/2003)

13/08/2004 Stefan Erber, GTZ Advisor and Team Leader at BOTA (updated)

APPENDIX 4: WORK PLAN

HIV/AIDS short-term consultant- Botswana Training Authority (BOTA)

Knowledge Management concerning Mainstreaming HIV/AIDS in the Vocational Training Sector and Introducing HIV/AIDS Workplace Concepts into Vocational Training at the Workplace Consultancy from 4–22 October 2004

Task	Time frame	Resources	Contact persons/ organisations	Remarks
1. To analyse "Mainstreaming HIV/AIDS in VT sector" in relation to existing concepts, structures and strategies 1.1. Identify and document best practices 1.2. Identify achievement and constraints as coordinating body and the implementation in training institutions	5 days	<ul style="list-style-type: none"> National Strategic Framework HIV/AIDS 2003–2009 Mainstreaming HIV/AIDS (Muchiri/Becker GTZ, 2002) Plan of Operation 2001–2004 and 2004–2008 BOTA Annual Performance Plan 2003 and 2004 – DVET Work plans of the HIV/AIDS Divisions Selected VT institutions (Gaborone & Mochudi) Project review report GTZ 2003 	Ulla Tschoetschel HIV/AIDS Coordinator BOTA Mrs. Kgosiemang HIV/AIDS Coordinator DVET Stefan Erber GTZ	
2. To analyse the existing monitoring systems regarding the impacts of HIV/AIDS interventions	2 days	<ul style="list-style-type: none"> Monitoring system of BOTA Monitoring system of NACA 	Stefan Erber GTZ Olivia Mokgatle BOTA Mr. Gaborone AYA BHRIMS NACA UNAIDS? BOTUSA? Terms of Reference KAB study	Critical situation – monitoring of the impacts of HIV/AIDS activities and programmes

<p>3. To assist in defining the role of BOTA's HIV/AIDS Division in the transformation process of HIV/AIDS extracurricular activities into the HIV/AIDS curricula in the VT sector of the VT system</p>	2 days	<ul style="list-style-type: none"> • Work plans of the HIV/AIDS Division • HIV/AIDS Unit standards • HIV/AIDS Curricula – draft • Discussion paper 03/04 HIV/AIDS coordinator • Article “The national Vocational training system of Botswana” 	<p>Ulla Tschoetschel HIV/AIDS Coordinator, BOTA Rose Masi – Curricular Coordinator, BOTA</p>	
<p>4. To assess the current implementation of HIV/AIDS activities in structured work-based learning in companies To define ways of adopting existing HIV/AIDS concepts from school-type VT institutions to HIV/AIDS interventions in structured work-based learning in companies</p>	4 days	<ul style="list-style-type: none"> • ACCA; GTZ Projects • Literature research • Interviews of key stakeholders (HIV/AIDS at the workplace MOH; BBKA; ILO) • Situation analysis in selected companies 	<p>Stefan Erber GTZ Ulla Tschoetschel HIV/AIDS Coordinator, BOTA</p>	<p>BOTA does not know what companies expect in regard to assist them in the implementation of HIV/AIDS activities. The special situation of trainees is not reflected in the concepts of HIV/AIDS at the workplace.</p>
<p>5. To develop effective strategies of knowledge management and networking at the national level 5.1 To assist in improving strategies of knowledge transfer at the national level (two way information) To improve strategies in sharing best practice at the national level 5.2 To expand strategies in mainstreaming HIV/AIDS in VT on the regional and international level To choose such strategies which ensure effective management of knowledge on the international level</p>	3 days	<ul style="list-style-type: none"> • ACCA; GTZ Projects • Literature research • Information Management System NACA • Internet; e-learning etc. 	<p>Stefan Erber GTZ Ulla Tschoetschel HIV/AIDS Coordinator, BOTA NACA Dutch senior expert – Development of a knowledge management strategy for BOTA</p>	<p>Knowledge transfer is fragmented. Particularly, private schools and structured work-based training companies have limited networking in place. Concepts of knowledge management should integrate the ‘grassroots level’.</p>