

Republic of Zambia



MINISTRY OF EDUCATION

**RECENT DEVELOPMENTS IN THE  
FIGHT AGAINST HIV/AIDS IN THE  
MINISTRY OF EDUCATION IN ZAMBIA**

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## **RECENT DEVELOPMENTS IN THE FIGHT AGAINST HIV/AIDS IN THE MINISTRY OF EDUCATION IN ZAMBIA**

### **Introduction.**

The Government of the Republic of Zambia has recently embarked on an ambitious educational reform programme named, “Basic Education Sub-Sector Investment Programme – BESSIP”. The programme aims at increasing access to and improving the quality of basic education. For all its intent and purpose, it is envisaged that Universal Basic Education comprising nine years of schooling can be attained by the year 2015.

The global spread of HIV/AIDS may make the attainment of some of the BESSIP goals difficult if not impossible. The wrath and devastation of HIV/AIDS on the Zambian society has been categorized as severe and ranks among the worst hit in the world. With an infection rate of about 20% of those between 15-49 years being infected, the epidemic represents one of the most urgent challenges to our country in general and Ministry of Education in particular. The infection rate is estimated to be 28 % in urban areas and 14 % in rural areas. The most productive people are dying, with peak infection for women occurring at 20- 29 years and for men 30-39 years.

No part of the country has been left untouched by the pandemic. All indications are that the infection rate is high, and measures that will reduce the rate of infection and create a caring environment for the infected and /or affected must urgently be put in place.

HIV/AIDS has consequently been identified as one of the most urgent problems to be addressed in BESSIP. It is planned that interventions in this area must be effected in line with the Zambia National Strategic Framework (Nov,1999) and the **Ministry of Education Statement on HIV/AIDS: Strategies for Addressing HIV/AIDS**<sup>1</sup>, and the Policy document “ **Educating Our Future**”<sup>2</sup> (1996).. The ministry of education is in a comparatively advantageous position to influence behaviour change, especially among the young children.

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<sup>1</sup> MOE(Ministry of Education) (1999) *Statement on HIV/AIDS. Strategies for Addressing HIV/AIDS*, Lusaka: Ministry of Education.

<sup>2</sup> MOE(Ministry of Education) (1996) *Educating Our Future.National Policy on Education*. Lusaka: Ministry of Education.

The infection rate among the 4-12 year olds is still low, making it very important to focus preventive activities at this age group, which has been called ‘the window of hope’.

The relatively low infection rate among the young population provides a real opportunity to attack the epidemic by ensuring that the young population is empowered with decision making and socio-psycho life skills to enable them make informed intelligent decisions, especially the girls.

According to some findings<sup>3</sup> boys and girls in Zambia are sexually active at a very young age, 13 for girls and 15 for boys. This early onset of sexual activities among school going children has serious implications for primary education. Although some studies have indicated a drop in infection rates among the youths, this drop may not be sustained.

The following findings by various surveys make the task of working out an effective and sustainable educational programme even more urgent.

### **Youth start sex early in life**

All the factors above become a complication when one thinks of the findings that

- 1) By age 19, 75% are sexually active, only 25% abstain – Demographic, Health Survey (DHS); 1997
- 2) By age 14, 71% boys and 34% girls have had sex – (UNICEF, 1997)  
For many girls the first sexual partner is an older boy or an elderly male.  
Most sexual encounters take place during school holidays, weekends or even during school hours. Some sexual contacts have been reported to take place during learning times and in home environments as well.

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<sup>3</sup> Demographic, Health Survey (DHS); 1997. See also; Sexual Behaviour Survey – Ministry of Health (MoH); 1998

## **Majority of Sex is unprotected**

71% of sexually active youth did not use a condom during last sex. Only 7% of the youths used condom during sex. 25% of sexually active girls and 12% of girls aged 10 to 14 reported using condoms each time they had sex.

## **Have youths changed behaviour in response to HIV/AIDS ?**

From surveys so far conducted there is evidence that youths are not delaying the act of having sex although slightly more youths (29%) are using condoms than adults (25%)

The above findings present a real challenge to the Ministry of education, future actions must take the following conclusions into account:

1. Youths are very much vulnerable to HIV/AIDS.
2. Youths are sexually active, often by 15 years
3. Vast majority of them engage in unsafe sex
4. Most have inadequate factual information and skills regarding sexuality
5. Education/information does not automatically lead to behaviour change
6. A supportive environment that makes healthy behaviour choices easier is essential for example children are making decisions about sex based on very little information. There is also a belief that because they are young they can not be infected. They do not see their age mates dying of AIDS. The parents think the school should provide the information and the parents think that the school should teach this.
7. Sexuality education to address biological, psychological and spiritual dimensions including skills for effective communication and decision making should be taught to young people as early as possible and according to their age groups.

While abstinence should be emphasized condoms cannot be ignored as an option for some youth and when a decision not to have sex fails.

Although the Ministry of Education plans are largely still in preparatory stages, the following positive steps already taken by the Ministry are worth noting:

1. A policy statement or stand detailing what the ministry intends to do is in place to guide action.
2. Action plans have been worked out embracing National Strategies on combating the pandemic.
3. Approximately 1.4 million Supplementary readers have been procured and distributed to schools, but these are far too few to have any meaningful impact.
4. An Organisational structure is being set up to be used in implementing the programme in schools and communities; HIV/AIDS focal point persons are being appointed at all levels of the Ministry.
5. HIV/AIDS activities have become part of BESSIP – action plan.
6. Non Governmental Organisations (NGOs) are working in schools and communities to combat the spread of HIV/AIDS
7. Teachers have formed their own Anti-AIDS organisation (TAHAZ), whose activities so far appear to have a chance of having some positive impact among the teachers.

It must be acknowledged that the Ministry of education has made a late start on interventions, mainly because HIV/AIDS was generally viewed as a Health issue. The country as a whole has had a rather slow cautious approach but is surely decided on mounting a vigorous campaign to fight the pandemic. Among the difficulties faced in the fight against rapid spread of infections are the following:- (a) there is still a lot of denial both in urban and rural Zambia, (b) there is very strong stigmatization of those infected (c) poverty levels appear to have some bearing on the spread of the disease (d) lack of resources to spread accurate information in a more effective and sustainable manner. (e) although various donors are now playing their part by providing financial and other logistical support, there is not yet a mechanism for coordination of the various efforts.

The Ministry of Education plans to intensify the fight by integrating the teaching of HIV/AIDS in the school curriculum.

## Objectives.

The interventions in HIV/AIDS education will aim at creating awareness of the impact of HIV/AIDS pandemic and its devastating effect it has on society. Accurate information on HIV/AIDS will be

taught to youth using a variety of teaching methods by employing an integrated approach. Institutional capacity needs to be developed to effectively manage the HIV/AIDS education programme in the Ministry of Education by utilising BESSIP organisational structures.

## **Structures;**

It is planned that a Focal Point person supported by a small HIV / AIDS Action Group will be nominated at each level of organization using MoE structures on a part time basis i.e. at Provincial, District and School levels. These groups will be mandated to:

- Facilitate information gathering and dissemination
- Facilitate the implementation of the HIV / AIDS education programme
- conduct an analysis of potential partnerships
- facilitate the establishment of an HIV / AIDS partnership network
- promotion of co-operation and collaboration among line ministries and NGOs
- mobilize local capacities for the prevention, care and support
- identify emerging issues and appropriate responses
- plan joint activities e.g. for World AIDS day.
- Enable role players to interact.

## **PLANNED ACTIVITIES:**

The overall objective of the **Zambia National Strategic Framework (Nov, 1999)**<sup>4</sup> is

- 1. to reduce HIV/STD transmission mainly focusing on Children, Youth, Women and Situations providing risk for HIV transmission.**

The framework suggests that this could be done through various strategies such as:-

- a) Innovative workplace interventions
- a) Special programmes for orphans, widows and widowers.

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<sup>4</sup> **Zambia National Strategic Framework (Nov, 1999),**

- b) Support to people living with HIV /AIDS
- c) Advocate for the legislation of non-discriminatory practices.

The following activities are planned to be undertaken.

### **ADVOCACY AND SENSITIZATION**

Conduct sensitization workshops for all personnel at all levels in the Ministry of Education.

Design and print information education communication materials for use at all levels in the ministry

Establish counseling services in schools for both teachers and pupils

Provide youth friendly health services

Train Peer Educators among pupils and teachers

Develop mechanisms for effective monitoring of HIV/AIDS activities

## **HUMAN RESOURCE DEVELOPMENT**

Train teachers (both pre-service and in-service) in appropriate methodologies of HIV/AIDS education

Train Counselors and peer educators in schools and work places

## **CURRICULUM AND MATERIALS DEVELOPMENT / PROCUREMENT**

Review curriculum to include integrated HIV/AIDS education components

Review teacher's manuals

Develop Life skills books for teachers and pupils

Identify and procure suitable reading materials on HIV/AIDS

## **MONITORING AND EVALUATION SYSTEMS DEVELOPMENT**

Review of on-going activities on HIV/AIDS by different organisations

Conduct a baseline study /situational analysis of HIV/AIDS in the Ministry of Education

Design a monitoring and evaluation system

Monitor effectiveness and functioning of the activities and interventions

## **CAPACITY BUILDING**

Train focal point persons at provincial, district and schools levels.

Train peer educators, counselors and programme coordinators at all levels

Undertake studies and research on "best practices" for adaptation and use in the ANTI-AIDS programmes in schools



## **MONITORING INDICATORS**

Monitoring of activities will be a continuous activity. Indicators of achievement or effectiveness will include

- achieving acceptable numbers of trained teachers, peer educators , counselors and focal point persons
- number of review and baseline study reports available
- number of teachers HIV/AIDS manuals produced and being used
- number of reading materials, readers and guidelines produced and being used
- effective monitoring and evaluation system in place and working

## **AGENDA FOR ACTION;**

The Ministry of Education is committed to an agenda for Action in nine key areas. These are:

- Leadership
- Coordination of all local AIDS responses
- Planning in consultation
- Facilitation
- Integration
- Advocacy and mobilization
- Strengthening community responses
- Monitoring

In developing the strategies to be embarked upon in the Ministry of Education, care and attention has been paid to what is contained in the National Strategic Framework, so as to achieve coherence of plans.

## **IMPACT OF HIV/AIDS ON EDUCATION**

Although there are no studies conducted to ascertain the level and impact of HIV/AIDS and Education, there is a clear feel of the impact for example in the shortages of teachers throughout the system. In some areas the country is beginning to experience a shortage of pupils to be enrolled. As outlined by Kelly<sup>5</sup> (2000).

### **Data Sources:**

1. Demographic, Health Survey (DHS); 1997
2. Sexual Behaviour Survey – Ministry of Health (MoH); 1998
3. Youth Talk about Sexuality – UNICEF – 1997
4. Adolescence, Sex and Fear – UNICEF – 1997
5. Sexual Behaviour and Condom Use Survey – Focus Group Discussions – Society
6. for Family Health (SFH).
7. Young People, Sexuality and HIV/AIDS in 3 African Countries – Williams – 1997

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<sup>5</sup> Kelly M.J. *The Encounter Between HIV/AIDS and Education*, (Feb.2000), UNESCO 2000, Harare, Zimbabwe.