# Revised Guidelines for the School AIDS Education Programme

2004 IEC Division NACO

# **List of Abbreviations Used in the Text**

AIDS-Acquired Immuno Deficiency Syndrome

DIET-District Institute for Education and Training

DoE- Department of Education

**DRP-District Resource Person** 

HIV-Human Immune Deficiency Virus

NACO-National AIDS Control Organisation

SAEP-School AIDS Education Programme

**SACS-State AIDS Control Societies** 

SCERT-State Council for Educational Research and Training

SRP-State Resource Person

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# **Guidelines for the School AIDS Education Programme (SAEP)**

For use by the Education Department, State AIDS Control Societies, and NGOs to implement the School AIDS Education Programme.

# **HIV/AIDS Epidemic in India**

According to statistics taken towards the end of 2002, India had 4.58 million people living with HIV. Studies on the spread of HIV indicate the infection is moving out of high-risk behaviour groups to the general population. Six states in India (Andhra Pradesh, Karnataka, Manipur, Tamil Nadu, Maharashtra and Nagaland) have HIV prevalence rates higher than 1 per cent in the general population. Prevalence rates of HIV amongst young women in monogamous relationships attending antenatal clinics are also more than 1 per cent.

Young people are highly vulnerable to HIV infection, with data from across the world showing that more than half of those newly infected with HIV are in the age group of 15-24 years. Over 35 per cent of all reported AIDS cases in India occurs in this age group.

But young people also hold the key to the prevention and further spread of the virus. This is because they have not yet developed sexually risky behaviour and equipping them with accurate information on HIV is seen to have a positive impact.

In time, it is hoped that this nucleus will lead the way to an entire generation adopting sexually safe practices.

### **Knowledge Levels amongst Young People about HIV**

Data from the National Behavioural Surveillance of 2001 indicates that young people lack accurate knowledge about HIV/AIDS. Data from across states shows that out of all young persons surveyed, around 84 per cent knew of at least 2 correct modes of transmission of HIV/AIDS, but less than 50 per cent had a positive attitude towards HIV infected persons.

Urban residents had better levels of awareness compared to their rural counterparts, while male respondents were better informed compared to their female counterparts. In Bihar, Jharkhand, Gujarat, Chattisgarh and Uttar Pradesh, only 1 out of every 3 young women in the age group of 15-24 interviewed had ever heard of HIV/AIDS.

Around 7 per cent of respondents reported having had casual sex within the span of a remembered year. Rural men reported the highest prevalence at 11.6 per cent, rural women the lowest, about 2 per cent.

More than 35 per cent men over 19 years old from Andhra Pradesh reported having had casual sex. In Chattisgarh, Arunachal and Mizoram more than 40 per cent of all men over 19 years of age also reported having had casual sex.

It is therefore seen to be critical to design programmes that increase the knowledge base of young people and the School AIDS Education Programme is positioned in this context to act as a key intervention.

# **School AIDS Education Programme (SAEP)**

The programme will be implemented in states across the country through the Department of Education (DoE) in collaboration with the State AIDS Control Societies (SACS) and local Non-governmental organisations (NGOs). Global research findings show that HIV prevention programmes do not increase or encourage sexually risky behaviour amongst young people.

The objective of the SAEP is to provide 100 per cent quality coverage for all senior schools in the country so that students in classes 9 -11 have adequate and accurate knowledge about HIV in the context of life-skills. Research indicates that to ensure an effective skills based approach in schools, it is essential to initiate an age-appropriate response in primary and middle schools to ensure coverage of children who may drop out early and also to ensure adequate exposure and time on task for skill development. Depending on the situation in a state, the Department of Education authorities may think it right to start the programme in lower classes too with material appropriate for the targeted students' age.

The SAEP aims to support Young People's Right to:

- know about themselves, their adolescence and their sexuality
- basic facts on HIV and other sexually transmitted infections
- develop and reinforce life skills that enables them to protect themselves
- dispel myths and clarify misconceptions
- find ways where they can help fight the HIV epidemic and encourage positive attitudes towards people living with HIV.

To ensure this, the School AIDS Education Programme will:

- 1. Provide accurate age appropriate information to young people in school on adolescence and growing up,
- 2. Make available basic facts on HIV /AIDS transmission and methods of prevention while also addressing myths and misconceptions,
- 3. Reinforce existing positive behaviour and instil life skills that enables young people protect themselves (life skills essential to manage risk, deal with gender stereotypes and to cope with risky situations young people encounter in their lives),
- 4. Develop and encourage positive attitudes towards HIV/AIDS and those living with HIV/AIDS,
- 5. Make available to young people resources for additional information and linkages to youth friendly services
- 6. Act as a springboard to reach young people out of school.

### **Basic Strategy**

The programme will be implemented through trained nodal teachers and peer educators. SCERT/DIET staff will train the nodal teachers and peer educators with initial support from trained resource persons <sup>2</sup>.

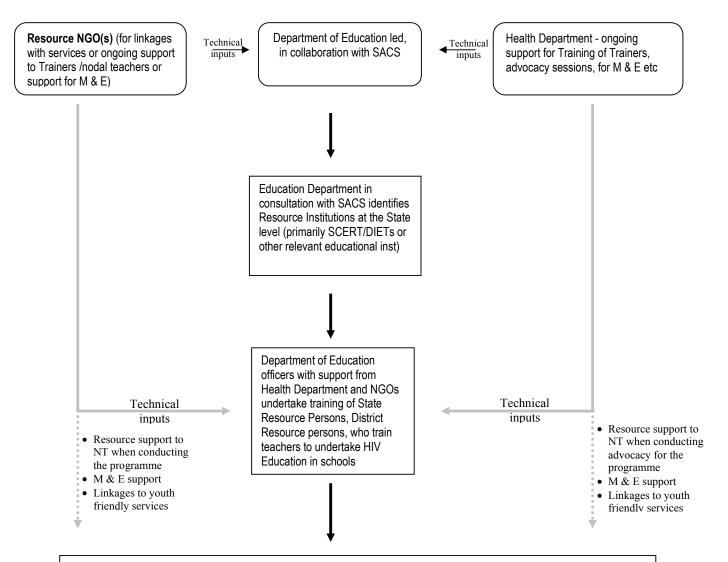
<sup>&</sup>lt;sup>12</sup> Resource persons may be a teacher, medical officer, Mandal Resource Person or an expert from an NGO. Teachers who take the sessions could be either from the same school or adjacent school where doable.

The nodal teachers and peer educators will take interactive classroom sessions with students of classes 9-11 across all targeted schools.

These sessions will be based on the Learning for Life module developed by NACO. The sessions will be participatory and seek to address the concerns of adolescents on growing up through role-play, brainstorming and discussion. They will also address myths and misconceptions that young people have about health and reply to queries of adolescents by using the Question Box.

# Approach for implementing the School AIDS Education Programme

### Diagrammatic representation of the three models



#### Programme in schools

Skills based sessions with students based on Learning for Life by trained Nodal teachers. School level activities on World AIDS Day, Blood Donation Day, other activities including poster making, debates and quiz competitions. Question Box available in schools to address students' concerns about adolescence, sexuality and myths and misconceptions of growing up.

### **Approach for implementing the School AIDS Education Programme:**

The Department of Education will lead the programme's processes to ensure its long-term sustainability. SACS support Department of Education in co-ordinating the process.

The Department of Education will be the focal agency for conducting training and for ensuring the programme's implementation. The Department will be actively involved in providing master trainers from the State Council for Educational Research and Training (SCERT) and the District Institute of Education and Training (DIET) for training at the state and district-level and for the adaptation of learning materials.

### Points to be considered:

- ➤ The Department of Education will enable continuos and sustainable SAEP at the school level.
- ➤ District Education officers and school principals (through instructions from the Department) operate and facilitate the programme. They also aid advocacy efforts at the district, school and community levels leading to a sense of ownership of the programme by local people.
- Sustainability is assured as the programme gets mainstreamed into the existing system in terms of pre-service and in-service teacher training. However it has to be ensured that mainstreaming/integration does not dilute/eliminate the life skills based approach.
- Feedback from the field indicates that teachers rapport with students enables proficient implementation of life skills sessions. However the teachers need practice and ongoing support to discuss sensitive issues of growing up.

It is recommended that Department of Education link with the Health Department and key NGOs for technical and resource support for training, monitoring and evaluation and linkages with youth friendly health services.

Criteria for selection of NGO partners for resource and technical inputs:

- ➤ The NGO must be active in the School AIDS education programme (have a known presence at the grassroots level).
- ➤ It must be registered for over 3 years and have an annual report and audited statement of accounts.

### Additional Points to considered:

- Availability and capacity of the selected NGOs to offer resource support
- ➤ In terms of technical support for training, NGOs to be considered only in the initial stages with phasing to SCERT/DIET faculty.

Involvement of NGOs and Health Department for Advocacy:

Advocacy support by trained health/medical officers at the State and district level is effective because their knowledge base is vast and in the initial stages of programme implementation they can field queries authoritatively.

### **Reaching the Classroom**

The SAEP implementation is guided by the 'Learning for Life' Module prepared by NACO with support from partners. A set of Teaching Learning Materials based on the Learning for Life, developed by SACS and implementing partners, will support transaction of SAEP. These include:

LEARNING

for

LIFE

- a) Training and Advocacy Materials
  - Facilitators Handbook for Training Of Trainers
  - Facilitators Handbook for training Peer Educators
  - Facilitators Handbook for Refresher Teacher Training
  - Advocacy Module for conducting advocacy at State, district and community/school level
- b) Classroom materials
  - Teachers Workbook
  - Flip Chart
- c) Resource Materials
  - Teachers Reference Book
  - Frequently Asked Question Booklet for Students

# **Basic Steps in the School AIDS Education Programme (SAEP)**

Outlined below are basic steps in implementing the School AIDS Education Programme

# Step 1: Planning for the programme

- ➤ Department of Education and SACS will seek to identify partners to support implementation of the programme
- They will undertake state-level advocacy for partners so as to be able to ensure commitment for the programme and also identify persons for the co-ordination committee/advisory committee
- A co-ordination committee/ advisory committee with partners will be set up for chalking out strategies for implementing the programme. The committee will be chaired by the Secretary of Education.
  - ➤ Members will include: Project Director, SACS; SCERT Faculty member(s); NGO representatives; Representatives from State Boards of Education, BEd colleges, Principals, Teachers, Community Leaders (if feasible representatives from Textbook Corporation, Parent-Teacher Associations and Student Associations)
  - ➤ Inclusion of State Boards of Education, BEd Colleges and Textbook Corporation will support mainstreaming of HIV/AIDS preventive education in the curriculum (textbooks) and also in pre-service teacher training
  - ➤ The wide representation from PTA, Community media ensures advocacy with key stakeholders in the intervention
- ➤ The committee will make an assessment about the extent to which schools can be covered and will draw up a Plan of Coverage (could be a phased approach/one time scaled approach). This will be based on capacity for implementation and epidemic status.

# Step 2: Development/Adaptation and Printing of materials in local languages according to local context

Where required, states will undertake translation of material supplied by NACO - making it contextual to the local settings

# Step 3: Devising Training Strategies and Conducting Training

- > Cascade model will be used and levels identified for the role of trainers at different levels
- ➤ Based on the Coverage Plan drawn up the Committee will put together a Training Plan
  - > State level training
  - District level training
  - ➤ Sub district level/Training of teachers
  - Peer educator training
  - > Refresher training for nodal teachers

# Step 4: Undertake Advocacy

At the State-level, District-level, Head-person/principal and Parent-Teacher level.

### Step 5: Implementation-School level

Classroom sessions, are conducted by a trained nodal teacher using a minimum of 16 hours /academic year.

The programme emphasises - Learning by Doing. The methodology for all sessions is interactive, skills based and participatory.

- The 16 hours include Four sessions with a minimum of four hours each:
- Session 1 Growing Up & Adolescence (separately for boys and girls conducted by male and female nodal teachers respectively)
- Session 2 STIs & HIV/AIDS.
- Session 3 Life Skills for HIV Prevention. Effective use of our life Skills is essential to translate knowledge into action Life skills reinforcement is not limited to only one session/group. All sessions and content are skills based, however elaboration and exercises to strengthen the skills will be in the LS for HIV prevention education session
- Session 4 Feedback, Question Box and Activity Session Throughout this programme there will be a question box in the classroom which will be opened prior to each session in the classroom and the questions asked will be answered. In addition, Session Four will be used to answer all the unanswered questions collected from this box and other unanswered questions you may have. The focus is to clear any doubts or questions you may have.

Activities: The SAEP recommends that students with the support of a Nodal Teacher conduct activities in their communities, schools, homes, neighborhoods etc, which will

- a) reinforce the content they have internalized in the Classroom Sessions (Role-plays in schools, discussions with parents - review workshops with parents and students together)
- b) Give them an understanding of the issues vis a vis HIV (visits to NGOs, etc)
- c) Serve as Change-Agents in the Community (Street plays, discussions at the local panchayats, PHC etc)
- d) Springboard to young people out of school in their communities (peer outreach to young people in their communities)

- The event session can be presented on 1<sup>st</sup> December every year –World AIDS Day or any other day decided by the students and the teacher.
- Inter-state and intra-state activities can be organised with recognition for Nodal Teachers. Peer Educators and Schools/Students

### Step 6: Concurrent Monitoring and feedback of the programme

- Monitoring
- Evaluation

### Steps 2,3, and 4 can be concurrent in time.

# Each of the steps is detailed below -

# Step 1-Planning

# **Identifying partners**

- Department of Education and SACS will seek to identify partners to support implementation of the programme
- ➤ Department of Education and SACS will undertake state-level advocacy for partners so as to be able to ensure commitment for the programme and also identify persons for the co-ordination committee/advisory committee

### Role of Education Department:

- ➤ In collaboration with SACS coordinate implementation of the SAEP
- ➤ State and District Level Trainers: Ensure participation and capacity development of SCERT/DIETs or other State level Educational Institutes identified
  - These institutes should also be linked with in-service teacher training, to ensure mainstreaming of SAEP training into in-service teacher training
- ➤ Giving instructions to the District Education Officers, Block Education officers, Inspectors of schools to monitor and facilitate the School AIDS Education programme in their respective areas.
- ➤ Facilitating teachers and encouraging students to participate in classroom sessions as peer educators,
- ➤ Developing State level Education Policies on HIV/AIDS which address:
  - Rights of all Children to Accurate Information on HIV/AIDS and **skills** to protect themselves from HIV/AIDS (implementation of age-appropriate HIV Education programme)
  - Educational Rights of all Children, Infected and Affected by HIV/AIDS
  - ➤ Workplace Rights of Educators Infected and Affected by HIV/AIDS
  - Linkages with health, counselling and ICDS services (bridge to young people out of school)
  - A Special focus on reducing vulnerability of Girls

### Partners:

In order to further broaden the base in terms of a systematic response to HIV/AIDS, more sectoral partners need to be identified. These could be the Departments of Health, Social Welfare, Rural Development, NGOs, PTA members etc.

In addition it is recommended that Pre-service teacher training institutes and Text book corporation chairpersons, State Boards of Education be also involved to enable pre-service teacher training, and SAEP curriculum inputs.

# Additional partners identified by various states:

Andhra Pradesh and Karnataka implement the SAEP through the Department of Education. In Andhra Pradesh; The Andhra Pradesh Academy of Rural Development has been the focal agency for conducting training as part of efforts to implement the programme.

The States of Maharashtra, Manipur and Pondicherry partner closely with the Department of Health and Family Welfare along with the Municipal Corporation for technical support in training of trainers and conducting advocacy for the programme.

In Maharashtra, Sevadham a nodal NGO, has been used to provide technical support to implement the School AIDS Education Programme.

### Setting up a Co-ordination committee with partners:

- A co-ordination committee/ advisory committee with partners will be set up for chalking out strategies for implementing the programme.
- ➤ The committee will be chaired by the Secretary of Education.
  - Members will include: Project Director, SACS; SCERT Faculty member(s); NGO representatives; Representatives from State Boards of Education, BEd colleges, Principals, Teachers, Community Leaders (if feasible representatives from Textbook Corporation, Parent-Teacher Associations and Student Associations)
  - ➤ Inclusion of State Boards of Education, BEd Colleges and Textbook Corporation will support mainstreaming of HIV/AIDS preventive education in the curriculum (textbooks) and also in pre-service teacher training
  - > The wide representation from PTA, Community media ensures advocacy with key stakeholders in the intervention

The committee will make an assessment about the extent to which schools can be covered and will draw up a Plan of Coverage (could be a phased approach/one time scaled approach). This will be based on capacity for implementation and epidemic status.

Specific Role of the Co-ordinating committee:

- ➤ Provide overall guidance in implementing and designing strategies to reach young people in school and out of school
- > Support identification of Resource Persons and Institutions who can aid the programme
  - > Draw up a coverage plan based on capacity for implementation, epidemic status (ensuring 100% coverage of High prevalence districts/clusters in the first phase)
  - > Develop and facilitate an Implementation Schedule this will include training plans, material adaptation/printing, advocacy etc
- > Facilitate and ensure implementation of strategies for inter-sectoral collaboration.

### Coverage of schools

Department of Education and SACS will prepare a database on:

- > The number of secondary and senior secondary schools,
- The number of students at the secondary and senior secondary levels,
- > The number of private, government and aided schools,
- > The number of teachers at the secondary and senior secondary level, the number of districts.
- ➤ The number of teacher training colleges and the number of District Institutes of Education and Training (DIET).
- > Status of epidemic in the different districts and blocks

On the basis of this data, the number of schools to be covered could be decided in any given year. A state, on the basis of available resources may decide whether it chooses to adopt (1) A phased approach (covering all schools over 5 years), or, (2) A rapid scale-up (covering all schools in 1-2 years).

While selecting schools, priority should be given to include all government schools in the state with an initial focus on schools in high prevalence districts.

The goal for SAEP is to cover all schools in the state. Private schools also need to be included in the overall plan of action

# Phased approach:

In this approach, the state covers all schools in the state over a period of 4-5 years.

Guide for coverage of schools based on the phased approach:

At the end of five years, all schools in the State/UT will be covered. This approach takes into account the fact that students will be continuously leaving schools and other students continuously joining school, in the targeted classes 9-11.

#### To illustrate:

**In the 1<sup>st</sup> Year**, 20 per cent of the total number of schools will be covered - all government schools in high prevalence areas will be covered,

In the 2<sup>nd</sup> Year, 20 per cent new schools will be taken up + 20 per cent of those schools already covered in the 1<sup>st</sup> year - all government schools in high and medium prevalence areas will be covered,

In the  $3^{rd}$  Year, 20 per cent new schools will be taken up + 40 per cent of schools already covered in the  $1^{st} + 2^{nd}$  years - all government schools in high, medium and low prevalence areas will be covered,

In the 4<sup>th</sup> Year, 20 per cent new schools will be targeted + 60 per cent of schools already covered in the  $1^{st} + 2^{nd} + 3^{rd}$  years, all government schools in high, medium and low prevalence areas will be covered + private schools in high prevalence areas will be covered

In the  $5^{th}$  Year, 20 per cent new schools will be targeted + 80 per cent of schools covered in the  $1^{st} + 2^{nd} + 3^{rd} + 4^{th}$  years which would result in the total coverage of all schools (all schools government and private will be covered).

### Rapid scale up approach:

In this model, a state will attempt to cover all schools in the State/UT in 1-2 years depending on the state's capacity to do so.

Guide for coverage of schools based on the rapid scale approach:

1<sup>st</sup> Year: 50 per cent of total number of schools to be covered (all high and medium prevalence districts to be covered),

2<sup>nd</sup> Year: 50 per cent of the remaining schools in the state + 50 per cent of those schools already covered in the 1st year to be targeted.

### Step 2- Development /Adaptation and Printing of Materials

The core booklet/module to be used across all states is "Learning for Life" supplied by NACO. Along with this, NACO will provide teaching/learning materials other aids for facilitating classroom transactions:

- a) Training and Advocacy Materials
  - Facilitators Handbook for Training Of Trainers
  - Facilitators Handbook for training Peer Educators
  - Facilitators Handbook for Refresher Teacher Training
  - Advocacy Module for conducting advocacy at State, district and community/school level
- b) Classroom materials
  - Teachers Workbook
  - Flip Chart
- c) Resource Materials
  - Teachers Reference Book
  - Frequently Asked Question Booklet for Students



# In states that choose to develop more material specific to the local context the steps recommended are:

- a) Identification of a resource person/institute by the state that will develop support materials,
- b) Convening of workshops where its organisers work closely with State level Trainers so that they are able to base fresh production of materials on what is newly required,
- c) The availability of age appropriate and relevant material for classes targeted by the specific state beyond the currently envisaged classes 9-11, developed and vetted by trainers who provide feedback.

Research indicates that to ensure an effective skills based approach in schools, it is essential to initiate an age-appropriate response in primary and middle schools to ensure coverage of children who may drop out early and also to ensure adequate exposure and time on task for skill development. Depending on the situation in a state, the Department of Education authorities may think it right to start the programme in lower classes too with material appropriate for the targeted students' age.

The aim finally is to make skills based HIV preventive education a part of the school curriculum - therefore it is recommended that Text book corporation and state boards of education representatives be part of the sub-committee for adapting and developing state specific materials

- d) Availability of finalised material for use of trainers for training, and for use in the classroom,
- e) Holding classroom sessions with developed materials and providing feedback to the resource person/institute for further refinement.

### Step 3-The Training strategy

It is recommended that a cascade model be adopted for training of those persons who will undertake the final interactive sessions with students in schools.

To minimise transmission loss all the training's are to be conducted using the same training content and methodology.

Prior to initiating training, it is recommended that the Co-ordinating committee review the checklist of tasks (Annex 1).

# Role of different levels of trainers and terminology used for the cascade model -

- National Resource Persons/Initial trainers –They are called core trainers in Andhra Pradesh and Maharashtra. They can be external/internal to the state and are responsible for conducting the State level training of Resource Persons.
- ➤ State Resource Persons (SRPs) They are instrumental in training the next level of officers in the programme. They will be from the nodal training institute identified (for eg., SCERT) and will be required for longer periods and train persons from the districts such as the DIETs.
- ➤ District Resource Persons (DRPs) are a pool of trained persons available at the district level. They will be from District level training institutes (such as DIETs). It is envisaged that there will be at least 10 persons available in the district to train teachers.
- ➤ Nodal Teachers —Are the key persons who conduct the actual classroom sessions on the transmission and prevention of HIV/AIDS

# Flowchart Showing Human Resources required for a State with 25 districts and 100 schools in each district.



**Goal-**Training Core Trainers.

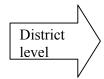
**Strategy** -3 National/External Resource persons are required to train 50 Resource Persons Resource persons who act as Core trainers /State Resource Persons



**Goal-**Train State Resource Persons

**Strategy A-**If one training is required at state level for 50 persons from 25 districts 6 State Resource persons (3 men and three women) are required.

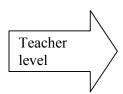
**Strategy B-**If four training's are required at state level to train 200 persons, 20 State Resource persons (10 men and 10 women are required) if training's are simultaneous. Alternatively 6 State Resource persons (3 men and three women) can conduct four sequential training's.



**Goal-**Train District Resource Persons

**Strategy A-**If Training is done in batches one after another, 50 District Resource Persons 25 men, 25 women) would be required for 25 districts.

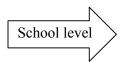
**Strategy B-**If Training is done simultaneously 200 District Resource Persons (100 men, 100 women) are required for 25 districts.



**Goal-**Train 200 Teachers (100 men and 100 women) in each district in 4 batches of 50 each.

**Strategy A-**If Training is done in batches sequentially, 2 District Resource Persons (one man, one woman) are required for one district (2 DRPs will train all 4 batches)

**Strategy B-**If Training is done simultaneously 8 District Resource Persons (four men, four women) are required for one district. (8 DRPs will train 4 batches simultaneously)



**Goal-**students reached with HIV preventive education in 2500 schools by 5000 teachers.

**Strategy**-Each school has 2 trained teachers, one male and one female and each teacher reaches 50 students.

# Level 1: Training of Trainers (TOT) for State Resource Persons at the State Level National/External Resource Persons or State level trained experts would conduct the first level of training.

# Participants for state TOT:

It is recommended that the number be between 25-50 and be drawn from resource institutions like the State Council for Educational Research and Training (SCERT), other State level Teacher Training Institutes, District Institutes of Education and Training (DIET's). NGOs and persons with a medical background/Health department linkages to be included for resource support.

Criterion for selecting State Resource Persons:

- Institutional affiliation with educational institutions of the State.
- Fair representation of trainees on the basis of geography and gender (at least 50 per cent of trainees should be women as Session I in the classroom as well as in the training programme is conducted separately for men and women),
- Their ability to be good communicators and their availability for a 5 year period to ensure continuity and sustainability of the programme,

# As SAEP is integrated in the curriculum, the SRPs/DRP functions will be integrated in the teacher training institutions (SCERT/DIETs etc)

Content of workshop: Detailed agenda for TOT is attached in Annex 1.

Day 1 - Introduction to objectives of the workshop, the Role of Core Trainers/State Resource Persons, setting the context, and addressing the values and beliefs of trainers with regard to sexual health.

Introduction also to issues surrounding growing up, changes in the body, the period of adolescence and the nature of sexuality.

Day 2 – Topics covered include, the occurrence, transmission and prevention of sexually transmitted diseases and HIV, the nature of HIV/AIDS in the said state, the urgency of educational intervention. Concepts of Life Skills for young people through interactive games and exercises, discussing how personal value systems that are independent of peer influence be encouraged and developed. Enhancing communication skills, having the ability to say no and making critical decision as well as coping with failure. Visiting NGOs running programmes for people living with HIV/AIDS.

Day 3 - Practising classroom teaching on the following subjects/issues: the growing up years, the nature and transmission of Sexually Transmitted Infections and HIV/AIDS, and myths and misconceptions surrounding these. Providing feedback on the practice sessions held. Counselling as it relates to SAEP.

Day 4 – Practising classroom teaching on the following subjects/issues: Skills for HIV prevention Education. Discussing the skills that Core Trainers must have, the plan of action to be followed and an evaluation of the TOT. Concluding remarks.

# Level 2: District level training if required by the State:

Participants will be drawn from different regions/districts – with at least 10 from each district of the state. State Resource Persons will then train the selected persons at this level.

50 District Resource Persons per batch will be trained in a four-day workshop conducted by Core Trainers. The content of the workshop will be the same as that for the State Resource Persons (see Annex 2).

# **Level 3: Training of teachers**

At the district level, five teams of two members from the resource persons who are already trained will then train 50 teachers during a 4-day workshop.

Criterion of selection of Nodal Teachers:

- 1 male and 1 female teacher per school (1 teacher/50 students)
- Rapport with Students
- Good communication skills
- Non-judgemental
- Interest and willingness to conducting the SAEP
- No special preference to any one specific stream (eg., Physical Education or Science)

Content of workshop - The content of the workshop will be the same as that for the State Resource Persons (see Annex 2).

Criterion of selection of Peer educators:

- ➤ 2 peer educators one male and one female for up to 150 students per class. If students number more than 150 then one more educator will be added.
- There should be student participation in the selection of peer educators peers should be identified by students and must not have to be the brightest or those most liked by teachers.
- The peer educator should be a good listener.

### **Level 4: Peer Educator Training**

Peer educators will be trained for two days on the following issues:

# Content of workshop:

Day 1- They will be trained about how to initiate and maintain discussions on growing up, bodily changes, adolescence and sexuality. Similar to the training sessions conducted for resource persons, peer educators will also made familiar with the occurrence, transmission and prevention of sexually transmitted diseases and HIV, the nature of HIV/AIDS in the state and the urgency of the situation.

Day 2- Life Skills Education for young persons: Once again similar to the way state resource persons are trained, peer educators will be familiarised with Life Skills education for young people through participatory methods. They will be shown how to help encourage the development of a personal value system that is independent of peer influence.

Workshops for teachers and peer educators can be conducted simultaneously in different rooms at the same venue since the content for training overlaps.

# **Refresher Training**

Every third year, nodal teachers will be given one-day refresher training - this should be integrated in the in-service teacher training and be given as part of in-service teacher training.

### Content for the One-Day training:

Day 1-Review experiences, share new information, if any, available on HIV and address myths and misconceptions. Strengthen capacity development in areas identified by evaluations. Stress on the importance of Life Skills under the SAEP.

It is recommended that all States work with SCERT and other teacher training institutions at the state and national level so that issues surrounding HIV/AIDS are incorporated into their curriculum helping to pare down the training component under the SAEP however it has to be ensured that the content is life skills based.

# <u>Step 4 – Conduct Advocacy/Sensitisation workshops</u>

- > State level
- ➤ District level
- ➤ School Level

Before the launch of any programme, advocacy needs to be undertaken to address the concerns of the government and policy makers, parents and communities who may be hesitant about the programme's utility.

A State level advocacy workshop for half-day is recommended with 40 participants. Participants could be State Secretaries of Education, Health, Social Welfare, Middle level and junior officers of the Department of Education, SCERT, and political executives. This should be conducted at the early stages of planning.

### Objectives of State level Advocacy:

- > To address the issues and concerns of key stakeholders and partners. The workshop would consequently seek to sensitise the secretaries of Health, Education and Social Welfare and seek commitment to the SAEP from partners identified.
- > To forge interdepartmental and inter-sectoral linkages between the Departments of Education, Health, Social welfare and the State Co-ordination Committee.

Content of workshop (provided in the Annex 3)

### Output expected:

- > Partners convinced on the need for SAEP
- > Roles of partners in the programme clearly defined
- ➤ Implementing agency being able to have a clear view on what is to be initiated with key partners.

### District level-half day workshop:

50 participants - Participants could be officers of the Education, Health, Social Welfare, and political executives and District Collectors and Sub-District Collectors at the district level.

# Objectives of District Level Advocacy:

- To address the concerns of partners at the district level. The workshop would consequently address itself to officers of the district such as the District Collector, Sub-District collector, and District Education functionaries.
- To forge interdepartmental and inter-sectoral linkages between departments of Education, Health, Social welfare at the district level.

### School Level –half day workshop/sensitisation:

Participants - 60 principals of 60 schools

### Objectives of the Workshop:

The workshop would seek to sensitise principals of schools in the area.

# Output expected:

- Principals convinced of the need for SAEP
- > They plan sessions for orienting teachers at their schools
- Principals identify nodal teachers who can be used for nodal teacher training and then hold information-sessions for students in schools

### Parents, Teacher (school staff) and Community Level:

The meeting would seek to sensitise parents of students of the schools in the area and other staff teaching and non-teaching in the school. All parents, community members, school staff and teachers need to know about HIV/AIDS in order:

- to protect themselves and their families from HIV/AIDS.
- to prevent stigma and discrimination against people living with HIV/AIDS (students, fellow teachers, or neighbors who are infected)
- to help educate their students, their neighbors, their community, and leaders about HIV/AIDS.

### Objectives of the Workshop:

➤ To develop a community of informed parents who are supportive of the efforts of the programme to educate young people on HIV Prevention.

### Output expected:

- Parents and community elders and teachers of the school convinced of the need of the SAEP
- > They further act as information points on prevention of HIV and any further spread

### Step 5-Implementation at school level:

The eventual destination is the classroom where accurate information is to be disseminated on HIV in the context of Life-Skills to all young persons. In schools, classroom interaction with students would be based on the Learning for Life module and be conducted by a trained nodal teacher using a minimum of 16 hours /academic year:

The programme emphasises - Learning by Doing. The methodology for all sessions is interactive, **skills based** and participatory.<sup>3</sup>

The 16 hours include Four sessions (Annex 4):

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<sup>&</sup>lt;sup>3</sup> Interactive and participatory does not necessarily translate to skills based transaction - it is essential to have clear skills development objectives for all classroom sessions

- Session 1 Growing Up & Adolescence Changes we all go through during our adolescence; Our bodies and conception. This session also clarifies common myths and misconception associated with Growing Up.
- Session 2 STIs & HIV/AIDS. Outlines information on Sexually Transmitted Infections
  (STIs) and HIV/AIDS, and gives specific information on how to protect oneself against such
  infections. It also explores issues around HIV-testing and confidentiality of a person's
  HIV/AIDS status and ways to support and care for persons affected with HIV/AIDS are also
  discussed
- Session 3 Life Skills for HIV Prevention. Effective use of our life Skills is essential to translate knowledge into action How do we say no when pressurised by friends, how do we communicate with our parents on sensitive issues, where do I seek this information I want etc....Life skills reinforcement is not limited to only one session/group. All sessions and content from Day 1 onwards are skills based, however elaboration and exercises to strengthen the skills will be in the LS for HIV prevention education session
- Session 4 Feedback, Question Box and Activity Session
  The SAEP recommends that students with the support of a Nodal Teacher conduct activities in their communities, schools, homes, neighborhoods etc, which will
  - a) reinforce the content they have internalized in the Classroom Sessions (Role-plays in schools, discussions with parents review workshops with parents and students together)
  - b) Give them an understanding of the issues vis a vis HIV (visits to NGOs, etc)
  - c) Serve as Change-Agents in the Community (Street plays, discussions at the local panchayats, PHC etc)
  - d) Springboard to young people out of school in their communities (peer outreach to young people in their communities)

Schools can observe World AIDS Day (December 1 of each year) and Blood Donation Day (October 1 of each year). Some of the events that can be organised in a school are: debates, essay competitions, photo exhibitions, street play competitions, poster making competitions, skits and dramas. The school can also invite local notables/celebrities like popular cricket stars, film stars to give a talk on HIV/AIDS.

Inter School activities can also be carried out between schools. Peer educators from different schools could be brought together at the block level and state level at a peer educator's conference once a year.

It is recommended that every student also receive the booklet titled 'Growing up in a world with HIV/AIDS', which provides this information in language suited to young people. The booklet is a handy guide to the information discussed in the classroom Additional Points to note:

- Nodal Teachers will take classes with students in schools and be supported by peer educators as a peer resource for the rest of the students.
- Male teachers and female teachers conduct session 1 separately for boys and girls respectively. Content on both sexes to be covered in each of the groups.
- Sessions 2-4 are combined for boys and girls both male and female nodal teachers should be present in the classroom at all times. If not feasible, a Female observer should be in the classroom at all times when the SAEP sessions are in progress.

# **Question Box: A Safe Space for young people**

To make HIV/AIDS education activities more amenable to student concerns and issues, a 'question box' approach is recommended. This will help address some of the concerns of young persons in a confidential manner and create a safe space to address common myths and misconceptions.

Throughout this programme there will be a question box in the classroom and also in the school premises - the box will be opened prior to each session in the classroom and the questions asked will be answered.

The Question Box can be a shoebox or cardboard box with a slot in it so that any student may put down a question on a piece of paper anonymously and drop it into the box.

Students need not put their names and may write in capital letters on the question sheet to prevent handwriting recognition.

In addition, Session Four to answer all the unanswered questions collected from the question box. All questions in the Question Box must be answered. Learning for Life and other reference materials may be used. Inputs from a Medical officer may need to be arranged for support to the teacher if questions are too technical.

This practice is to be continued even after the sessions have ended, and answers of pertinent questions can be written on a bulletin board for display, or, shared in the classes by nodal teachers and peer educators.

### Linkages with other services

Schools should have knowledge about the availability of health services in the area, including, counselling centres, blood banks, STD treatment centres and voluntary testing centres to provide referrals to interested students. In states where hotlines have been set up, teachers can provide relevant information to students.

Outreach to non-school going youth and the community:

Department of Education and NACO envisages 'In-School' intervention as a springboard to reach young adults who are not going to school as well as to act as a force for the sensitisation of entire communities.

This can be done by:

- Asking all students who have attended interactive sessions on HIV/AIDS to link up with at least two young adults out of school and two families in their area.
- Students who act as peer educators can also act as informal educators for non-school going youth in the area and be a reference point for their communities on HIV/AIDS.
- NGOs working in the field may be invited to the SACS to share their experiences, and based on their inputs, SACS of each State may devise strategies for out of school children.

# Step 6-Concurrent Monitoring and Evaluation

Monitoring and evaluation is done on a continuous basis to provide feedback on to strengthen programme design and implementation.

For this to happen smoothly, States are required to provide the following information:

- The percentage of schools covered under the SAEP,
- Number of institutions and trained faculty offering training in SAEP.
- > The number and percentage of teachers trained in SAEP
- The number and percentage using the Life Skills approach, and,
- The extent to which students have been covered by the programme.

The State will also monitor its own inputs for programme design and implementation. Monitoring formats are attached in the Annex 5.

Evaluation is different from monitoring and can be conducted once every 5 yrs/3 years. Or alternatively, at the end of the programme, an independent agency may be hired in accordance with the TI method to undertake an evaluation of the SAEP. The evaluation can also measure skills development and if feasible behavioural outcomes.

The SACS will launch supervision missions in its state of residence where the programme will be reviewed annually against the action plan made by the SACS. There will be 6 members of the mission who can be experts in the field but also external to the project. They will visit 3 districts each year and undertake a detailed analysis across 10 schools in each district and provide feedback to the SACS.

At the school level, it is recommended that the observation of school level activities be done to validate the extent of the Life Skills package being used by nodal teachers in schools (Annex 6: Classroom monitoring tools: Pre/Post questionnaire).

# **Fund Flow and Costing Guidelines**

(Detailed unit cost and costing guidelines follow)

- ➤ In all cases for the activities to be conducted at the school level money is to be disbursed to school principal through the District Education Officer (DEO)/District Leprosy officer/Focal person for HIV/AIDS in the District.
- For other activities such as the training of resource persons and teachers the SACS/Department of Education will decide mode of disbursement of money whether to be made to partner departments or the institutes conducting the programme.
- The amount of honorarium to be paid to external resource persons for core training is fixed at Rs 1500/ per day. This is over and above the actual cost of travel and stay of the resource person.
- ➤ State Resource persons and District Resource Persons would be paid Rs 500/ per day. This is over and above the cost of travel food and stay.
- ➤ For monitoring at the school level the DEEO /DIET officer would be paid a rate of Rs 250/ per visit to the school.

Detailed Costing Guidelines for the School AIDS Education Programme:

School AIDS Education Budget STATE Level	Unit Cost	Number	Cost Rs
Advocacy			
<b>State level Advocacy -40 participants.</b> Participants may comprise Secretary Education, Secretary Health, political executives of the state,			
TA/DA to participants @Rs.100/- per participant (to be based on state norms)	100	40	4000
Tea & Lunch to the participants @Rs.70/- per participant	70	40	2800
Stationery & Background material @Rs.25/- per participant	25	40	1000
Honorarium to one external resource person @Rs.1500/- per Person	1500	1	1500
Honorarium to local Resource person @Rs.500/-	500	1	500
Contingency			2000
Travel of Resource persons airfare/ IIAC (as per actuals)			16000
Total for State Advocacy workshop			27,800
District level Advocacy Workshop-50 participants			
TA/DA to participants @Rs.100/- per participant	100	50	5000
Tea & Lunch to the participants @Rs.70/- per participant	70	50	3500
Stationery & Background material @Rs.25/- per participant	25	50	1250
Honorarium to Resource person @Rs.500/- per Resource Person	500	2	1000
Travel for resource Persons II AC train @ Rs. 1000/-(as per actuals)	1000	2	2000
Contingency			2000
Total for District level Advocacy Workshop			14750
TRAINING			
TRAINING OF Master Trainers for 4 days (25-50 participants) Calculations are for 50 persons			
Participants include persons from Teacher training institutions (SCERT/DIET/Schools), Medical colleges, NGO's, freelance consultants			
External resource Persons Travel -Actual /air fare @ Rs 15000 for return fare	15000	2	30000
Honorarium for two external resource Persons -@Rs 1500/ per day	6000	2	12000
External resource Persons- Boarding and Lodging for resource persons @rate of Rs 100 per day	6000	2	12000
Honorarium to two local resource person @Rs.500/- per Person per day	2000	2	4000
Boarding and Lodging –Rs 250 per participant X 4 Days	1000	50	50000
DA to participants @Rs.125/- per participants per day	400	50	20000
Tea & Lunch for participants @Rs.70/- per participants	280	50	14000
Travel expenses of participants @ Rs. 1000	1000	50	50000
Stationery and Xerox costs	25	50	1250
Contingency			10000
Total for TRAINING OF Master Trainers			203250

Total for TRAINING OF District Resource Trainers			
Honorarium to two local resource person @Rs.500/- per Person per day	2000	2	4000
Boarding and Lodging –Rs 250 per participant X 4 Days	1000	50	50000
DA to participants @Rs.125/- per participants per day	400	50	20000
Tea & Lunch for participants @Rs.70/- per participants	280	50	14000
Travel expenses of participants @ Rs. 1000	1000	50	50000
Stationery and Xerox costs	25	50	1250
Contingency			10000
Total			149250
TRAINING of Teachers for 4 days			
Teachers (2 teachers from each school) 50 participants			
TA to participants @Rs.100/- per participants per day	400	50	20000
Tea & Lunch for participants @Rs.70/- per participants per day	280	50	14000
Stationery and Background Material @Rs.25/- per participant	25	50	1250
Honorarium for 2 Resource Persons @ Rs 500 per day for 4 days	2000	2	4000
Travel costs and stay of resource person @ Rs 500 per day for 4 days	2000	2	4000
Daily allowance for teachers at @Rs 100/ per day	400	40	16000
Hall Hire	5000		5000
Contingency	5000		5000
Total cost of teachers training			69250
Peer Educators 50 participants training for 2 days			
TA for peer educators @Rs.100 per participants per day	200	50	10000
Honorarium for 2 Local Resource Persons @Rs.500/- per person	1000	2	2000
Tea & Lunch for participants @Rs.70/- per participant per day	140	50	5600
Stationery and Background Material @Rs.25/- per participant)	25	50	1250
Contingency	2000		2000
Total for Peer educator training			22250
Refresher Training /every third year for teachers of 1 day duration for 50 participants			
TA for school teachers Rs.100/- per participant	100	50	5000
Tea & Lunch for participants @Rs.70/- per person	70	50	3500
Honorarium for 2 local Resource Persons @Rs.500/- per person	1000	2	2000

Total Refresher Training			10500
School Level Activities			
4 Sessions for students on Issues of Growing Up, Sexually transmitted infections and HIV AIDS, Life skills, and answering questions and dispelling myths and doubts			
Activities to be organized on World AIDS Day, World Health Day, Blood Donation Day funds @Rs 2500 per school	2500		
Optional activities -2 PTA meeting /community leaders where the issues relating to HIV prevention and young people is discussed by nodal teachers and current and older peer educators.	non budgetary activities		
not costed separately			
Out reach Activities	non budgetary activities		
Total school level activities for one school	2500		2500
Monitoring and Evaluation			
1 supervision Mission to be launched annually with 6 members to be used to cover three districts and 10 schools per district each year, that is 30 schools per school with in-depth quantitative and qualitative indicators			
Honorarium of members @Rs 500 per day	3000	6	18000
Stay and travel of supervision team at district actuals	3000	6	18000
Contingency	2000		2000
Total cost per year			38000
DEEO+1 person either from DIET/DM office/NGO to monitor 25% of schools in the district in one year	250	15	3750
Cost would be Rs 250/ per day DA and TA to monitor 1 school.(Cost given below is for 15 schools)			
Total monitoring by DEEO			3750
Evaluation			
Independent agency to be hired to undertake an evaluation along the process that is followed for TI evaluation			
Grant to NGO for providing resource support	45000		45000