

Ndjoze-Ojo B; Kandjii-Murangi I. 2002. *An Impact Assessment Survey of the School Based HIV/AIDS Programmes in Namibia.*

Implementers and students alike commend and emphasize the importance of concerted efforts within the education sector to combat the problem of HIV/AIDS. The need for continuing intensification of school based HIV/AIDS programmes is repeatedly echoed by students and implementers across the surveyed educational regions.

They see the integration of the My Future is My Choice programme into the regular school timetable as of paramount importance. Many students, contact students and implementers felt the physical education period could be replaced with HIV/AIDS education, or at least the two could alternate. Some Facilitators' language is a concern. Students expressed the fact that they expect facilitators' command of the English Language to be up to standard and comprehensible. An empowering synergy should be allowed to develop to ensure that teachers of the selected school subjects amenable to the infusion of HIV/AIDS topics and issues have access to materials used by the My Future is My Choice programme. These teachers should be prepared to learn effective methods of delivery of HIV/AIDS message and information from youth trainers and vice versa.

According to implementers, HIV/AIDS is a reality, and thus a problem that deserves a full time officer at the regional sub committee level. There is no proper incentive system in place to ensure the retention of good quality facilitators. This breeds a high turn over, leaving the programme vulnerable to sub-standard facilitators. Cross regional workshops, to allow those who are responsible for the school based HIV/AIDS programmes to come together, share and learn from each other, are considered crucial. Training and learning materials for the programmes arrive late and due to this, sessions are missed. This disrupts the programme's momentum, coherence and expansion. Transport to and from training sites is a major concern for many implementers. A condition, which is further exacerbated by the meagre allowance, which is always late. However, some expressed the view that taking into consideration the devastating effect of the HIV/AIDS pandemic, the money issue (in terms of allowance and honoraria) should not arise. Relevant in-service training for trainers, facilitators and teachers should be on-going. Among other things, their training should focus on counselling knowledge, language and presentation skills. The use of video materials depicting conditions of local, regional and international AIDS sufferers should be integrated as a matter of priority. Learners must be assisted to see debates and discussions on HIV/AIDS beyond the formal teacher or facilitator led sessions. Rather, they should be encouraged and helped to form health clubs where they could continue to address these issues among themselves.

The menace of HIV/AIDS to human kind seems to have dawned on and become a real concern for adults and youth. HIV/AIDS programmes cannot afford the luxury of being rigidly compartmentalized. More and more people express the desire to see close cooperation and integration of school based HIV/AIDS programmes. Facilitators, trainers and teachers, with their varying levels of knowledge about HIV/AIDS and on how students learn, should make a conscious decision to consult and collaborate on HIV/AIDS education agenda, and how best to deliver these programmes to youth in schools. Both groups of HIV/AIDS educators in schools, trainers/facilitators from My Future is My Choice programme and teachers responsible for the cross-curricular approach through selected subjects (life skills, biology, natural science and health education) are applauded for their commitment. They are urged to be exemplary in breaking the age/knowledge gap by accommodating each others' approach in dealing with AIDS education and prevention.
