



# MINISTRY OF EDUCATION, GHANA

**IN COLLABORATION WITH  
UNESCO, THE WORLD BANK, INTERNATIONAL LABOUR  
ORGANIZATION (ILO), UNAIDS, EDUCATION INTERNATIONAL AND  
PARTNERSHIP FOR CHILD DEVELOPMENT**

**SUB-REGIONAL WORKSHOP ON SUPPORT FOR THE MOVEMENT  
OF TEACHERS INFECTED AND/OR AFFECTED BY HIV & AIDS IN  
WEST AND CENTRAL AFRICA**

ALISA HOTEL, ACCRA, GHANA – 24TH - 26TH APRIL 2012

## REPORT ON WORKSHOP PROCEEDINGS



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## LIST OF ACRONYMS

ADEA	The Association for the Development of Education in Africa
COSSEL	Senegalese Committee of Education Unions against HIV/ AIDS
EDC	Education Development Centre
EI	Education International
EST	East and South Africa
EFA	Education for All
GAC	Ghana AIDS Commission
GNAT	Ghana National Association of Teachers
KENEPOTE	Kenya Network of Positive Teachers
ILO	International Labour Commission
MOE	Ministry of Education
MDGs	Millennium Development Goals
M&E	Monitoring and evaluation
NAP+	National Association of People Living with HIV
POTEWA	Positive Teachers and Education Workers Association
PLHIV	Person Living with HIV
PCD	Partner for Child Development
TLHIV	Teachers living with HIV
TSC	Teachers Service Commission
UNESCO	United Nations Education Scientific and Cultural Organization
UNAIDS	United Nations Programme on HIV/AIDS
WB	World Bank
WCA	West and Central Africa

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## **BACKGROUND AND RATIONALE FOR THE MEETING**

In West and Central Africa (WCA), teachers are among the most vulnerable since they are seen as role models in the community. HIV & AIDS increase the morbidity and the mortality of already inadequate number of teachers within the education sector. HIV & AIDS-related stigma and discrimination are persistent among teachers in the region. This has resulted in some cases in teachers being dismissed because of their HIV & AIDS-positive status.

International organizations, such as ILO, UNESCO and IIEP, the World Bank, ADEA and the three partners in the now ended EI-EFAIDS programme - Education International (EI), Education Development Center (EDC) and the World Health Organization (WHO) - have supported teachers in different countries to establish associations of teachers living with HIV & AIDS, as well as develop specific HIV & AIDS and AIDS workplace policies or integrate HIV & AIDS in existing education sector policies, based on the ILO Recommendations concerning HIV & AIDS and the world of work 2010 (No. 200) and the ILO/UNESCO guidelines on HIV & AIDS in the education sector.

Previous regional level consultations on discussing and planning coordinated action to support teachers infected and affected by HIV & AIDS have focused on East and Southern Africa (ESA). Despite differences between the sub-regions, many of the issues identified in ESA are important also in the context of WCA. A consultation organized in 2006 focusing on ESA concluded that stigma and discrimination have posed a major barrier to supporting and fostering the involvement of teachers with HIV & AIDS in responding to the AIDS pandemic. Experiences in ESA have demonstrated that collaboration with the Ministries of Education, and in particular the Teachers' Service Commissions (these rarely exist in WCA), is important in order to ensure a continuous support to teachers infected and affected by HIV & AIDS. In addition, the workplace policies on HIV & AIDS and AIDS in the education sector have been identified as an important programmatic component and basis to agree on a non-discriminatory framework for the protection of teachers infected or affected by HIV & AIDS.

The meeting was therefore to bring together existing national associations of teachers infected and affected by HIV & AIDS in the WCA sub-region, HIV & AIDS Focal points of the Ministries of Education, teachers' unions and key national and international stakeholders in order to ensure regional collaboration between these stakeholders and coordinate action at the national level to support the Educational Sector's response to HIV & AIDS. The meeting has been an outcome of gradually growing movement among teachers infected and affected by HIV & AIDS in WCA.

### **OBJECTIVES AND EXPECTED OUTPUT**

The main objective of the meeting was to enable national networks of teachers infected and affected by HIV & AIDS in West and Central Africa (WCA) to share experiences and concerns while enhancing regional exchange, as well as build and strengthen the links between Ministries of Educations (MoEs), teachers' unions and networks of HIV & AIDS positive teachers.

#### **Specific objectives:**

- 1) To discuss practices in policy processes and rights of HIV & AIDS positive people, which, should also apply to infected teachers.

- 2) To provide a coherent policy framework for the HIV & AIDS response in the education sector through the adaptation of the ILO/UNESCO HIV & AIDS Workplace Policy for the Education Sector in WCA taking into account the new ILO Recommendation 200,
- 3) In collaboration with key stakeholders, design a plan for a coordinated support for these networks including ensuring MOE's commitment, support and leadership in strengthening access to the national HIV & AIDS programmes on care, treatment and prevention for these teachers and education personnel. This plan of action is expected to consider the UNESCO M&E framework and in particular the workplace-specific indicators agreed at global level in order to establish a coherent set of results within WCA,
- 4) To provide an opportunity for teachers from WCA to work together and create a network at regional level in order to exchange lessons learnt and innovative approaches to discuss peer support mechanisms among themselves.

**The expected outputs included:**

- 1) A plan of action highlighting areas of work between teachers' unions, MoE and HIV positive teachers' associations, with clearly stated responsibilities and indicators of result based on the UNESCO M&E framework.
- 2) Agreement around the development of a policy framework on HIV & AIDS in the education sector to reflect R200 that protects the rights of teachers infected and affected by HIV & AIDS
- 3) Creation of a sub-regional network of associations of teachers living with HIV & AIDS.

# PROCEEDINGS FOR THE FIRST DAY

*TUESDAY 24<sup>TH</sup> APRIL 2012*

## **OPENING CEREMONY**

The three days sub-regional meeting commenced with an opening ceremony that took place on the morning of the first day. After an opening prayer by Madam Margaret Kaba of the HIV & AIDS secretariat of the Ministry of Education, Ghana, the organizers introduced and invited the dignitaries to be seated on the high table and front row seats. These included representatives from Ghana AIDS Commission, Association of Positive Teachers of Ghana, UNESCO, International Labour Organization (ILO), UNAIDS, a representative from the UN Resident coordinators office (UN RCO), Partnership for Child Development (PCD), WHO, World Food Programme, US Embassy and the Director of Human Resources Division of the Ministry of Education. The chairman for the opening ceremony Major (Rtd.) M. S. Tarah, Chief Director of the Ministry of Education of Ghana was also introduced. All the countries represented at the meeting were also mentioned and this included Cote D'Ivoire, Senegal, Mali, Burkina Faso, Guinea, Niger, Liberia, Togo, The Gambia, Cameroun, Gabon and Ghana.

### ***a. Welcome address by the Chairman – Major (Rtd.) M. S. Tarah, Chief Director, Ministry of Education, Ghana***

The chairman started his welcome address by expressing the great pleasure with which he was welcoming all participants to the sub-regional meeting on support to movement for teachers affected and infected by HIV & AIDS in West and Central Africa on behalf of the Government, the Ministry of Education and people of Ghana. He said he had been informed that the workshop was endowed with participants from about 12 countries of West and Central Africa as well as other parts of the world and extended a warm welcome to all as always. He then thanked all for making the effort of travelling long distances to join in discussing the important issue of HIV & AIDS over the next few days.

The Chairman continued by saying that HIV & AIDS and its related impact on education delivery is of very important concern here in Ghana and hence he was proud that Ghana had been privileged to host such an important meeting. He said though he should have reserved his thanks for the closing remarks, he could not resist the temptation of thanking the partners namely, UNESCO, the World Bank, ILO, Partnership for Child Development and Education International for their extra ordinary commitments to this effort in the organization of this workshop, without whose professional, technical and financial support this meeting would not have been possible. He then concluded his address by accepting to chair the opening ceremony with so much passion and said "I look forward to your cooperation and welcome you once more, wishing you all a stimulating and successful sub-regional meeting. Akwaaba and enjoy your stay in Ghana".

### ***b. Statement by Director General of Ghana AIDS Commission (GAC)***

The speech was read by Ms. Golda G. Asante, the Technical Coordinator (GAC), on behalf of the Director General of Ghana AIDS Commission, who due to other very important engagements could not make it to the meeting though she would have loved to be part of it. She begun by saying that teachers play important roles within the education system by serving as role models, mentors and guardians and being fundamental to the efforts of achieving the Education for All (EFA) and the Millennium Development Goals (MDGs). She said accordingly, it was imperative to give due attention to the needs

of teachers especially when it bothers on health and their psychological wellbeing and that is why she was happy to be given this opportunity to share a few words with all everyone participating in the meeting.

The Director General re-iterated that as we are all aware, the response to HIV & AIDS has grown from mere awareness creation to a more evidence-informed intervention targeting behavior change communication programmes, prevention of mother-to-child transmission, increasing uptake of HIV & AIDS testing and counseling services and more importantly, increasing access to HIV & AIDS treatment and care services. Nevertheless, stigma and discrimination continue to pose major challenges to the effective management of the epidemic in many countries and because of this many people are afraid to access HIV & AIDS prevention and treatment services even though they are readily available. She therefore lamented on how sad it was to realize that HIV & AIDS positive teachers had not been exempted, especially in communities where HIV & AIDS is erroneously considered as an indication of improper behaviors and hence there was the great need to draw together experiences to develop a comprehensive response for HIV positive teachers that fulfils their right to access HIV & AIDS prevention, treatment, care and support services as well as their right to work without discrimination. She said she considered the association of TLHIV as important because it seeks to support the “Heart-to-Heart” campaign in Ghana by the Ghana AIDS Commission (GAC) and its partners which seeks among other things, to deepen the knowledge of Ghanaians in issues pertaining to HIV & AIDS in order to stimulate an acceptable attitude toward persons living with HIV (PLHIV). She further indicated that as we get many PLHIV disclosing their HIV status openly, either as individuals or as groups, it will address ignorance; fear and other myths associated with the disease as well as contribute immensely to all efforts to prevent new infections and help to mitigate the impact of HIV & AIDS on individuals, institutions and communities.

Before concluding the Director General touched on how important it was for policy makers, civil society organizations and teachers themselves to understand the true impact of the epidemic, on the profession and upon those infected to ensure that teachers feel protected and supported both to know their status as well as engage in efforts aimed at addressing the epidemic at all levels. “I therefore find it remarkable that participants would have the opportunity as part of this meeting to develop and adopt HIV & AIDS Workplace Policy Framework for the educational sector in West and Central Africa, this will address the issues of stigma and discrimination against TLHIV and also ensure that they have early access to HIV & AIDS prevention, treatment care and support” she said. She concluded her speech by congratulating UNESCO for this innovative participatory approach of involving TLHIV and other key stakeholders in decision making around policies and interventions to address HIV & AIDS in the education sector and wish all present fruitful deliberations.

***c. Statement by UNESCO on behalf of the partners by Mr. Tirso Dos Santos, Officer-In-Charge, UNESCO Accra***

Mr. Dos Santos started his statement on behalf of all partners by mentioning that it was a great pleasure for UNESCO Cluster office in Accra to support this regional workshop, hosted by the Ministry of Education, the active members of POTEWA and Ghana AIDS Commission and welcomed all colleagues from Burkina Faso, Cameroon, Cote d’Ivoire, Gabon, Liberia, Guinea, (Guinea Bissau), Mali, Niger, Senegal, The Gambia as well as Ghana. He also welcomed colleagues from the WB, ILO, Educational International, Partnership for Child Development (PCD), and other offices of UNESCO as well as foreign missions and development partners represented wishing all “Akwaaba” as it is always said in Ghana.

He continued by revealing that this initiative has also been an outcome of the support of the Joint UN national and regional teams on AIDS as well as many other international partners and particularly recognized the efforts of ILO for its active role in developing HIV & AIDS work place policies in sub-Saharan Africa, the World Bank for supporting positive teachers' networks in many countries and Education International (EI) for their efforts in promoting and supporting teachers' unions and HIV & AIDS prevention. He further recounted that over the past ten years, the ministries of education in Africa have given priority to developing policies and strategies and have integrated HIV & AIDS into school curricula though many preoccupations still remain and new ones keep emerging. He then mentioned that the purpose of this sub-regional workshop was therefore to enable national networks of teachers infected and affected by HIV & AIDS in West and Central Africa to share experiences and concerns while enhancing regional exchange, and building as well as strengthening the links between Ministries of Education, teachers' unions and networks of HIV positive teachers.

He also mentioned that the technical consultation on Supporting HIV Positive Teachers in East and Southern Africa, organized in Nairobi, Kenya, by UNESCO and three partners of EI-EFAIDS, WHO, EI and the Education Development Centre (EDC) from 30 November to 1 December 2006, pointed out that, due to the unique custodian role of teachers in society, HIV positive teachers often experience high levels of stigma and discrimination within schools and outside of school settings. Based on this UNESCO is currently conducting a study on existing practices and development needs in order to better support these efforts of supporting positive teachers and educational workers networks in West and Central African countries.

He did stress the importance of sexuality education which UNESCO and partners have been working on to provide technical leadership on improving HIV prevention for young people in educational institutions which not only provides value for money but, in some cases, major cost savings regarding the cost and cost-effectiveness of school-based sexuality education.

In conclusion Mr. Dos Santos, took the opportunity to congratulate the team for working tirelessly to put together this workshop and on behalf of his colleagues pledged their continued support in working together through active participation in the next few days to ensure the success of the workshop and also to ensure that stigma and discrimination are reduced among positive teachers and educational workers in the long term.

***d. Statement by representative of Ghana Network of Teachers infected/affected with HIV & AIDS (POTEWA) - Madam Vida Agyare***

The representative of POTEWA, Ghana, on behalf of all her colleagues expressed her pleasure for being part of such an important meeting with personalities from across West and Central Africa and beyond to deliberate on issues concerning teachers infected and/or affected by HIV & AIDS with the view of strengthening the associations of teachers infected and/or affected by HIV & AIDS as well as developing plans for teachers unions and national associations of teachers living with HIV in order to ensure continued support and collaboration at the national, regional and international levels.

She recollected that some time ago, a few positive teachers in Ghana recognized the need to come together to address some burning issues affecting them particularly in relation to their sense of belongingness and issues which had bearing on stigma and discrimination. With these needs lingering in

their minds, they responded appreciatively to an initial invitation by the Ghana National Association of Teachers (GNAT) in 2007 to a workshop where they identified the need to use the snowball method to mobilize other members in preparation for the formation of an association. She said it was at this point that the Ministry of Education in collaboration with the Ghana Education Service took the idea further by bringing together positive teachers and education workers at a maiden workshop in October 2008 where over 40 participants from all the 10 regions of Ghana participated. The direct involvement of management in the education sector served as an impetus to members to embark on advocacy and further mobilization of members.

Madam Agyare continued by indicating that they in Ghana, have come to appreciate and testify to the benefits of such an association to their personal and collective lives and by extension to the education sector in general and notable among these were the building of their leadership and advocacy skills and proper management of their condition to enable them to continually serve the Education Service. She said the members of the association highly appreciate the move by the various partners who pooled their resources to help organize this meeting in support of the movement of teachers infected and/or affected by HIV & AIDS and therefore it was their fervent hope that this meeting would provide a forum to share experiences from sister associations in West and Central Africa and other key stakeholders. She was of the hope that from this information sharing sessions, members could generate ideas to develop action plans with that aim of ensuring continued support and collaboration with teacher unions and the education authorities at national, regional and international levels and in conclusion stressed that the members of the association belief that when all partners play their respective roles to strengthen the associations, they can play very meaningful roles in their contribution towards the mitigation of the effects of HIV & AIDS on the education sector of the respective countries.

***e. Keynote address and opening of workshop by the Hon. Minister for Education read on his behalf by Hon. Mrs. Elizabeth Amoah Tetteh, Deputy Minister for Pre-Tertiary Education***

The Deputy Minister started the address by indicating that it was an honor and pleasure for her to deliver the keynote address on behalf of her substantive Minister who due to his engagement in an equally pressing assignment on behalf of the government outside the country could not attend the program. She said this meeting on Support to Movement of Teachers infected and/or affected by HIV & AIDS in West and Central Africa was very important most particularly because such a moment had brought together a wide array of people sharing a common interest and concern in addressing a formidable challenge that HIV & AIDS poses to the education system. She went further to extend special and warm welcome on behalf of the Government of Ghana to all present, especially those who had travelled from all over West and parts of Central Africa, and hoped that everyone's experience here in Ghana would make them want to come back again and again.

The Minister also touched on the fact that HIV & AIDS still remained serious threats to sustainable Global development including progress towards achieving Education for All (EFA) since halting the spread of HIV & AIDS is a prerequisite for the achievement of the Millennium Development Goals (MDGs) of achieving universal primary education and promoting gender equality and the empowering women by 2015. She went further by indicating that the Ministry of education in Ghana has been actively involved in the multi-sectoral response to HIV & AIDS coordinated by the Ghana AIDS Commission (GAC) in recognition of the critical role the Education Sector must play in preventing HIV &

AIDS and in building capacity to respond to the effects of HIV & AIDS on individuals, families and communities. The Ministry established an HIV & AIDS Secretariat in 2002 to coordinate, facilitate and sustain HIV & AIDS interventions within the sector with this development being ground-breaking since the Education Sector was the first to adopt a full-time HIV & AIDS Secretariat. She said some of the objectives of the education sector's HIV & AIDS Policy and Sectoral Plan are to prevent new HIV infections among learners and the workforce through educative programmes as well as creating a supportive environment that assures that all employees with HIV & AIDS continue with work as long as they are medically fit to perform their duties.

She therefore deemed the meeting as very timely and pivotal coming at a time when the Ministry has embarked on the revision of its HIV & AIDS Policy and Sectoral Plan (2006-2010) to effectively address the challenges that HIV & AIDS pose and said it was her belief that by this meeting a platform will be created for the exchange of

ideas and the identification of common key elements for improved coordination, advocacy, networking and strengthening of links between Ministries of Education, Teacher Unions and Networks of positive teachers. She also commended all collaborators such as UNESCO, the World Bank, ILO, UNAIDS, Education International and the Partnership for Child Development on the organization of this workshop, for their financial and technical support and mobilization of the participants from West and Central Africa for this memorable meeting, thanking them for their leadership and commitment to HIV & AIDS prevention.

She then concluded by challenging all to use this meeting to engage, interact, mobilize and act to advance the support to the Movement of Teachers infected and/or affected by HIV & AIDS. "All of us here are either infected or affected. It is my fervent hope that this novel collaboration among Networks of positive teachers with Ministries of Education and Teacher Unions in ensuring a continuous support to teaches infected and affected by HIV & AIDS, will help build a better education system and a better life for all of us" she said and on this note she declared the Sub-Regional meeting on support to Movement of Teachers infected and/or affected by HIV & AIDS duly opened.

#### *Short comments from the Chairman*

*"After listening to all the presentations one thing I am taking along is that **"we are all infected or affected"**, it says it all. All the presentations have been very informative. I am particularly moved by the presentation of the TLHIV. I have tried in my capacity as the chairman of the Ministry's HIV & AIDS steering committee to update myself constantly on all that is happening in the Ministry and I cannot but continue to confirm the support of our Ministry in their efforts. If our children lose out because the teachers are unwell, if our children lose out because the teachers are incapacitated, we are all affected" said the Chairman who is the Chief Director of the Ministry of Education, Ghana.*

## **SESSION 1 - Introduction of the participants, objectives of the meeting presentation and adoption of the program, basic rules and administrative issues**

In all about 56 participants (*participants' list attached in Appendix 1*) attended the meeting and these included representatives from the Ministries of Education of the 12 countries present, the Teachers' Unions, Teachers living with HIV, development partners and other stakeholders. All participants introduced themselves and the countries they were representing. The organizers of the workshop were UNESCO, ILO, the World Bank, UNAIDS, PCD, EI and the Ministry of Education, Ghana.

Ms Ulla Kalha, Regional HIV coordinator for West and Central Africa, UNESCO, walked the participants through the program outline for the rest of the three days. Narrating the lineup, the presenter told the participants that the focus of the first day was on them telling everyone about what they do, presentations by ministry of education, film/documentary on teachers living with HIV & AIDS, introduction of the movement of teachers living with HIV & AIDS, presentations on situation, challenges and lessons by every country present that already have the associations as well as those that have just established their associations after which there will be series of discussions to share lessons learnt and best practices.

She said there would also be working group sessions and presentations of the technical aspect of the issues including what an HIV & AIDS workplace policy is, what should be expected from it, what is ILO R200, which countries already have these policies and whether they reflect the R200, what do those that do not have the policy expect to be reflected etc. She added that the workshop was going to be very interactive, it was not going to be a talk shop but work and work with 3 working groups sections, with action planning, to make concrete plans that will guide the actions of the various associations after all the talking, sharing, learning and the capacity building. As part of the program there was also going to be the formation of the sub-regional network with modalities of who will be the leader and the members to be discussed into detail and after this presentation a clap was then given by all present to indicate that all had agreed and adopted the program. Further clarifications were sought on the programme line up and these were ironed out by the organizers especially on presentations by countries that had no associations or those that had new associations which were not really clearly stated on the agenda.

Administrative questions which were also posed by participants were addressed accordingly by the organizers to make them more comfortable. Pen drives for presentations were also to be given to the organizers ahead of the presentations to be downloaded to the computer so time is not lost while loading them. Participants were also assured that everything would be handled according to schedule, by the chairpersons of the various sessions flagging yellow or red cards to alert presenters of their time limits. Contributions were also expected from each one but should be brief, snappy and straight to the point so everyone could have the chance to contribute. The presenter also pleaded with the participants to be tolerant with and respect one another even as they made their contributions. On issues of security the organizers requested that participants take care of their laptops, phones, iPods, and handbags along. Participants were also encouraged to do the honourable by putting mobile phones on silence so participants don't get distracted. The organizers also assured participants that copies of the various presentations would be made available at the close of the day after the presentations.

## **SESSION 2**

This session was co-chaired by Madam Amicoleh Mbaye (representative of the Partnership for Child Development Advisory Board/ MoE Gambia), Mr. Malick Sembene (MoE Senegal) and Dr. Balla Camara (MoE Guinea) all of whom are representatives of the Network of the Ministries of Education for West Africa especially for ECOWAS, who have been very active in the mobilization efforts for the Ministry of Education. Before going through the layout of the program of this session the lead chairperson, Madame Mbaye, took the opportunity to introduce other members of the network for focal points for food and nutrition, HIV & AIDS of the Ministries of Education, from the other participating countries asking them to rise to be recognized by the other participants.

**a. Presentation on Accelerating the Education Sector Response to HIV & AIDS: Four Years on by Mrs. Hilda Eghan, the HIV & AIDS Coordinator of Ministry of Education, Ghana and a member of the Network of HIV & AIDS Focal Persons.**

She started by indicating that the presentation was based on the report on what had been achieved for the past 4 or five years by Educational Sector Ministries from the different countries who have participated in the Acceleration of the Education Sector Response to HIV & AIDS developed by inter agency group on HIV & AIDS and she was presenting on behalf of all Ministries of Education.

She said in order to put the information in the presentation into the right context they decided to present the prevalence rates of some countries including Zimbabwe, Tanzania, Malawi, Botswana and Cote D'Ivoire as well as the percentage of the infected in each age group as a percentage of the total of males or females. The high prevalence rate of between 15% and 40% for the males between the ages of 20-49 years was scary especially since this was the prime age of their working lives and hence called for the need for action. She also said the high prevalence rate for women between the ages of 20 and 39 years which is their childbearing age is also very alarming. The question she therefore poses was whether there was a "WINDOW OF HOPE". She further presented the trend analysis of HIV & AIDS prevalence by education category of rural Uganda between 1990 and 2001 for individuals aged 18-29 who had no education, primary and secondary education and said the prevalence rate decreased for secondary education, showing the idea that in the absence of a vaccine, education could be a social vaccine.

She said, a process was then developed that begun with some regional analytical work culminating into sub-regional workshops and further into the establishment of national development partners groups, which also brought about national workshops and follow-ups. She said since 2002 there have been 37 African countries involved in the Accelerate Networks, 76 agencies, NGOs and development partners have participated in the process as well as 1350 education sector staff who have participated in various training activities. The whole idea of forming the various sub-regional networks, she said, has various objectives with the first being the promotion of leadership by the education sector in order to create sectoral demand for an HIV & AIDS response. As the number of countries involved in the sub-regional activities of the "Accelerate Initiative" increased, the number of activities including workshops, technical support, missions etc. at the national level also increased. She also showed how the response to HIV & AIDS had evolved starting from the Eastern Africa sub-region in 2002, which caught on next with Nigeria, then Central Africa, followed by Anglophone West Africa with Ghana hosting the first workshop for Anglophone West Africa, followed by Francophone West Africa also came on board including Madagascar as an observer and finally to Lusophone (Portuguese speaking) countries. All these groupings to coordinate efforts towards responding to HIV & AIDS had come on board by 2006.

She said the second objective of harmonizing support among development partners in order to better assist countries and reduce transaction costs, had taken place at level of representation of UN agencies, bilaterals and the civil society organizations and at the sub-regional national and levels there have been workshops and network meetings held since 2002. She added that the traditional partners had always been on board graphically presenting the degree of participation of some development partners at the various levels since 2002, with the World Bank playing the longest role participating at the regional, sub-regional and national levels and UK in Ghana funding a whole programme that trained teachers at the basic and secondary levels in HIV & AIDS between 2002 to 2005.

For the third objective of promoting coordination with the National AIDS Authorities and enhancing access to HIV & AIDS funds by linking to the national AIDS offices, the presenter indicated that for every activity the various networks have implemented they have actively involved the various National AIDS Commissions. She then listed a number of documents produced within the initiative and number of copies distributed to educational practitioners for the fourth objective of enhancing availability and sharing of information on HIV & AIDS that is of specific relevance to the educational sector. She also indicated an upward trend in the progress made in implementation of some activities in the area of policy and prevention carried out under the fifth objective of strengthening the technical content and implementation of the education sector response to HIV & AIDS.

The presenter also listed the various sub-regional networks of HIV & AIDS Education Focal Points with the West Africa Network launched in 2004 having 16 member countries; Eastern Africa Network with 7 countries; Lusophone Africa with 5 countries as well as Central Africa Network with 7 countries all launched in 2006. As a case study the Federal Strategy for Nigeria was also presented with actions including development of the national policy and strategy, creation of an agreed national curriculum, creation of a center of excellence for state level training, provision of education and NACA funds as well as the implementation of the educational sector response to HIV & AIDS at the state level.

Madam Hilda then ended her presentation with a picture of children asking whether there was any window of hope for them, and said the answer would depend on the way we work together in the sector and referred participants to [www.schoolandhealth.org](http://www.schoolandhealth.org) for more information.

#### **b. Film on Teachers living positively with HIV & AIDS and AIDS in Africa by Daniel Mumuni, Partnership for Child Development (PCD)**

As part of introduction to the film, the presenter indicated that the issues around teachers living with HIV & AIDS did not just start today and there have been ongoing movements and efforts not only from development partners but most importantly from the teachers themselves and very interestingly from stakeholders such as journalist and the media. He said the short documentary he was going to show was produced by Partnership for Child Development in collaboration with the World Bank on issues around teachers living with HIV & AIDS.

After the film which was in French, the presenter summarized the issues by drawing the attention of participants to the four striking issues from the film identified which included the role of journalists in communicating about these stories by giving human face to these issues, resolve by positive teachers to live positive lives by setting up networks and association, the title “Courage and Hope’ chosen for the film being concepts identifiable in all spheres of our lives as well as the involvement of development partners and several stakeholders who provide a lot of support.

#### **c. Presentation on lessons learnt from Kenyan Network of Positive Teachers (KENEPOTE) – By Alice Ochanda UNESCO, Nairobi**

Building on the issues from the documentary Madam Alice Ochanda, presented lessons learnt by the Kenyan Network of Positive teachers over the years. She said the network was founded in 2003 by 3 teachers with the aim of advocating for the rights of HIV positive teachers with the view of improving access to care, support and treatment as well as empowering teachers and the community on issues of HIV & AIDS. She added that, the same ladies presented in the film were still alive and kicking, very happy

and still steering the affairs of the association with support from the Ministry of Education, the Teachers Union, and the Teachers Service Commission (the coordinating body for the educating sector).

She said according to the treasurer of the network (KENAPOTE) some of the lessons they had learnt were that:

- it was very important to start small and then grow since a lot of associations start big and face a lot of challenges and then they come down very quickly
- without a workplace policy it is not possible to really steer the affairs of the association and therefore the workplace policy is very crucial not only in sustaining the network but also in enabling the management and the entire Educational sector and also for other partners to understand why the network needs to exist,
- advocacy is also important at all levels so you never stop advocating for positive teachers not only at the family levels but at the school, the workplace and also at the level of administration levels of management in the educational sector
- it is also important to share success stories, that is what keeps them going so people can see that there are new and positive things happening,
- All activities should be documented so there is the need to document things for example they did document what they started that is what has enabled you to see what they are doing why you efforts to document any small activities, no matter how small it is because it will assist someone to learn from it and probably improve their network
- Stigma is still a big threat at all levels especially at the workplace environment and some of the teachers who tested positive and disclosed their status, encountered a lot of stigma and due to this some of them have succumbed to death. This is especially so when one is working in an environment where the school authorities and management do not embrace the idea of having an HIV positive teacher in the school environment

She added that the key successes chalked by the network included, having a representative at the TSC – treasurer, increase in membership from about only 7 to 3,500, ability to sustain meetings of support groups in every town every month (group therapy) which they were planning to continue since this is what sustains their morale, the ability to organize two capacity building workshops for members every year, having a good gender balance in representation across the country (initially most of the members were females but now male teachers have come up to join so out of 9 representatives 4 are females and 5 are males) as well as being recognized by Government as an NGO with their certificate of registration finally out.

She however enlisted the challenges KENEPOTE had been facing as lack of resources to run a secretariat (they don't even have a secretariat), discontent among some members (the emergence KENAPE in 2007 to represent interest of secondary and TTC teachers), different categories of positive teachers (some are capable of self-support, some declare their status but not publicly and some have no knowledge of their status as well as others not being interested but pretending to be supportive); teachers who go public in stigma prone environments are unable to get enough support and hence some succumb to death as a result. Another challenge she mentioned was that direct contact with KENEPOTE was not easy for prospective partners because of the structure of the Teachers Services Commission (TSC) and the education sector in that one needs to go through the TSC before one can reach KENEPOTE. There was still the existence of STIGMA from the positive teachers themselves, their families and the workplace.

As the way forward for the association, the presenter mentioned that there was the need for institutional strengthening, the need to translate policy into action through involvement of positive teachers, the need for a secretariat for better coordination and the need to convene a national delegates' conference. On the part of the partners, the presenter mentioned that the way forward was to strengthen KENEPOTE to be more representative, the need for a strategy to deal with HIV positive teachers who are violating pupils/students, the need for partnership with KENEPOTE to support infected learners, the need to strengthen KENEPOTE to be more representative as well as the need for a KENEPOTE secretariat to facilitate direct contact and working relationship with partners.

### **Questions after Alice's presentation**

- a. The scenario of KENEPOTE registering as an NGO and still under the Teachers Service Commission is very interesting and wonder how it works; please throw a little light on it.
- b. How does this association relate to the National Association of People Living with HIV & AIDS? Is there a conflict and if not how does it synchronize?

In providing clarification for the concerns above, the presenter first responded by indicating that there was no conflict with the positive teachers being members of an association that has been registered as an NGO. The same teachers are also members of the National Association of People Living with HIV & AIDS. The only issue here was that as a registered institution or entity they are able to address their issues as teachers living positive within a given professional framework. She continued by saying that though it is interesting that KENEPOTE is registered, it does not create any problems since they have three levels of partners, the Education Ministry, the Teachers Service Commission and the Teachers Union. The main problem or challenge is whether they can coordinate their activities since they have over 3000 members which, makes it very difficult. She added that being members of the association does not make them any less teachers or less members of the teachers union but this was for them to be recognized as an entity of teachers living positive with HIV & AIDS still employed and paid by the Kenyan Government, with a secretariat who can mobilize funds to support their activities in providing support for their members. As an association with that huge membership they are required to register and the registration certificate is to enable them have a secretariat which they can use to coordinate their activities but not to make them any less teachers.

### **SESSION 3 – Presentation on TLHIV organizing themselves since 2002 in West Africa, Similarities and specific issues in 6 countries, by Evelyne Chevalier, HIV& AIDS Consultant, UNESCO**

Madam Evelyne Chevalier started her presentation by stressing that in West Africa, in the context of low prevalence among general population, stigma feels stronger than in East and Southern Africa where the HIV prevalence is high. “The stigma associated with TLHIV is worse compared to other PLHIV, because self-stigmatization is stronger the issue of PLHIV and TLHIV; TLHIVs are key actors in PLHIV associations but they also have their specific needs that they need to deal with among themselves!” she continued. She said the 6 countries (Ghana, Ivory Coast, Burkina Faso, Mali, Senegal and Guinea) have two HIV contexts; whereas Ghana, Ivory Coast, Burkina Faso have a generalized epidemic in general population, Mali, Senegal, Guinea have a concentrated epidemic in highly vulnerable populations. Ivory Coast and Guinea in addition have post-conflict situations.

In assessing the relationship between the MOEs and TLHIV, the presenter indicated that in Ghana and Ivory Coast, the ministries of education have been active by supporting CASEP+ that became Quitus in

Ivory Coast, and the creation of POTEWA in Ghana and in Senegal and in Mali, she said support is a principle. With regards to relationship between RAP+ NGOs and TLHIV, she said all TLHIV leaders of TLHIV associations are active militants in national PLHIV associations, and members of the African Network of PLHIV (Réseau Africain des PVVIH, RAP+). Other HIV+ teachers use and benefit from the associations by obtaining ARVs and receiving support to orphans. With the Teachers' Unions and TLHIVs, she said Education International (and its partners) equally financed training of teacher trainers in all countries within the EFAIDS programme and some teacher unions have supported TLHIV only in Senegal, with a unique engagement; without the union (COSSEL) the TLHIV in Senegal (CARVEE) would not exist. She further listed the support from UNESCO including a Senegalese study to identify TLHIV in 2009 with the second phase supported also by EI and COSSEL, the general assembly to create CARVEE in Nov. 2009, the pilot workshop on self-stigmatization of TLHIV in June 2010 in Senegal with participation from Mali and Guinea, the poster presentation and participation of CARVEE in the World AIDS Conference in Vienna July 2010, capacity building workshop of POTEWA organized with MoE Ghana September 2010, support to the Assembly to create EEMSS (HIV+ teachers association) in Bamako, Mali in November 2011 with CES and CARVEE and the publication under preparation to highlight activities conducted and the importance of TLHIV network in West Africa.

On similarities of good practices in the 6 countries Madam Chevalier included strong leadership by founders, acknowledgement of professional self-stigmatization, self-help (no financial support from NACs), self-assistance to peers in the cases of sickness, great concerns about orphans and the worry about the future of the free triple-drug therapy. She said self-stigmatisation of TLHIV included facing the scandal of sexual abuse in the class room, TLHIV suffering from a combination of issues and losing their self-esteem and the difficulty involved in teaching disclosing one's HIV status when nobody believes in you. She therefore added that without basic training on teacher ethics, it can be fatal for a young teacher working in the field to face the risks of HIV since there will not be anyone to talk about his/her status.

She continued by indicating that in order to acknowledge the HIV risk at work, there is a need to ensure that the future teachers are trained to deal with the environment and reality of their first job, the need to provide peer support by TLHIV for teachers in terms of voluntary testing, the need to build discrete bridges in terms of counseling and treatment for new TLHIV and the need to ensure the sustainability of the MoE support to teachers. Before concluding the presenter mentioned that the 5 strategic elements important for the creation of a network of TLHIV associations are elimination of the self-stigmatization that is specific to teachers, integration of GIPA of TLHIV in the sector's and national response, strengthening ethics in the basic training of teachers in order to reduce the vulnerability to HIV, ensuring the transfer of experiences of associations of neighboring countries as well as ensuring meetings and personal contacts of TLHIV leaders in international conferences. She then concluded by encouraging the establishment of partnerships since active TLHIV in their associations are precious resource persons for MOEs, the national PLHIV associations, the National AIDS Commissions (NACs), the teacher unions as well as for development partners such as IE, UNESCO, ILO, UNAIDS, the World Bank.

## **SESSION 4 – Presentations on Situation Analysis of TLHIV & AIDS: situation, challenges and achievements by older associations**

### **a. PRESENTATION FROM COTE D'IVOIRE BY GUEILASSO FILBERT**

Mr. Filbert introduced her presentation by giving highlighting the general statistics and background information of the HIV & AIDS situation of Cote D'Ivoire. He said the prevalence of HIV & AIDS in the general population has been estimated to be 3.4% (2009/ONUSIDA) instead of 4.7% in 2005 and there are 450 000 People Living with HIV & AIDS (380 000 adults + 70 000 children). He said in January 2003 the Ministry of education welcomed the idea of setting up a support group for teachers living with HIV & AIDS (" CASEP+ "). They started the mobilization of the pioneers and in October 2004 the NGO Quitus was created with the mission of improving the quality of life for workers of the Ministry of Education who were HIV positive and their families.

The specific objectives of Quitus, he said, were to mobilize HIV testing and counseling sessions and community based palliative services; to Fight against HIV & AIDS linked stigma and discrimination in the school environment, to advocate with the Ministry of Education for its support for the teachers living with HIV & AIDS to improve their quality of life; to mobilize material and financial resources for Quitus and its members, to improve the technical capacities of the members of Quitus as well as to coordinate, supervise and evaluate the interventions of the actors of Quitus in the regions. He said so far Quitus has between 2003 and 2012 increased its membership from 7 to 211, with the 7 pioneers coming from the CASEP+, 152 members referred by the medical center of the DMOSS, 37 members coming from other NGOs of People living with HIV & AIDS and 22 members being referred by the Health Services and the University.

He added that the association has so far advocated with the Ministry of Education to apply the GIPA in the fight against AIDS within the Ministry, to ensure that persons living with HIV & AIDS are allowed to teach and to stimulate the sectoral Committee of the ministry in the response to AIDS. With their activities with the teachers' union, the presenter said in 2007 there was a 5days workshop on messages and information to be used to raise the awareness of HIV & AIDS for teachers from the pre-school to the secondary level followed by another 2 days awareness creation on AIDS in December 2003. The other activities with the association with people living with HIV & AIDS she listed included mobilization of community around the CDV and capacity needs assessment of the NGO members including positive prevention, positive living, good governance etc.

He concluded by saying that some of the challenges and actions to be taken included the need to create and install functional sections in all the DREN, the need to obtain a functional secretariat fully equipped with a computer and other equipments, the need to carry out studies to investigate and identify better intervention strategies for HIV & AIDS in the school environment, the need to convince decision-makers on the importance of putting in place initiatives to improve quality of life of the people living with HIV & AIDS in the Ministry of Education, the need to expand and strengthen more partnerships and the financial supports for exchange trips to learn from other West African countries.

#### **b. PRESENTATION ON ANALYSIS OF THE SITUATION OF TLHIV IN GHANA: SITUATION, CHALLENGES AND ACHIEVEMENTS BY MADAM VIDA AGYARE**

Representative of POTEWA started the presentation of the analysis of the situation of TLHIV & AIDS in Ghana by mentioning that the context for HIV & AIDS&AIDS activities within the Education Sector has been based on National HIV & AIDS&AIDS Strategic Plans I, II and III, Education Strategic Plans (ESP 2003-2015 and ESP of 2010-2020) as well as the HIV & AIDS Policy and Strategic Plan (2006) of the Ministry of Education.

She said the factors that influenced the formation of POTEWA were a series of activities including that all teachers at the basic and senior secondary schools participating in HIV & AIDS training dubbed “Teachers – Agents for Dissemination and Change (TAD) programme” between 2005 and 2007 which revealed potential of teachers to contribute significantly to the efforts of prevention as well as stigma and discrimination reduction. She said following this, even a workshop of positive teachers (two from each region) was organized by the Ghana National Association of Teachers (GNAT) in 2007 and based on the Principle of Greater Involvement of Persons living with HIV & AIDS (GIPA) another maiden capacity building workshop was organized by Ministry of Education in October 2008 for 40 members who had been recruited at the time and the name, Positive Teachers and Educational Workers Association (POTEWA) was adopted. The presenter said the objectives of POTEWA are to provide a common platform for teachers and educational workers living with HIV & AIDS to discuss issues affecting them, enhance the capacity of members to advocate against stigma and discrimination and build the capacity of members in accurate HIV & AIDS information, to undertake advocacy and mobilization activities.

She further listed some of the activities POTEWA had been engaged in which included mobilization of members at clinic centers during review days and on one-on-one basis, capacity building in management of their condition and as agents of stigma and discrimination reduction (officials of GAC participated as resource persons), advocacy with District Directors on the existence of the Association and the need for maintaining confidentiality of status of members as well as the need for TLHIV to be posted to areas with accessibility to hospitals. Other activities she mentioned included comprehensive and practical training of national and regional executives in HIV & AIDS counseling and testing organized by the National AIDS Control Programme (NACP), participation in sub-regional workshop on capacity building of POTEWA members in 2010 – UNESCO provided part sponsorship & technical assistance and the development of a draft constitution.

She said some of the challenges that POTEWA had been facing were the absence of clear roles and responsibilities of teacher unions, the Ministry and POTEWA, disabusing the minds of members from the idea that the association is to be run for food rationing and personal gains purposes, issues associated with operationalization of constitution (where they will operate from since they have no secretariat), sustaining the activities of the association since there is lack of funding, increasing membership and weeding out fake members and organizing themselves for effective advocacy since the members are spread across the ten regions of the country.

In conclusion, the presenter indicated that their expectations were a coordinated support for POTEWA involving partners such as Unions, MOE, POTEWA and other collaborators, enhance the activities of POTEWA through lessons on peer support mechanisms and the hope that outcomes of discussions on rights of HIV & AIDS positive people will enhance the Educational Sector HIV & AIDS Policy and Strategic Plan currently under revision.

### **C. PRESENTATION ON EXPERIENCE OF THE BURKINABE TEACHERS IN THE FIGHT AGAINST HIV & AIDS BY MS. BERNADETTE PARE FROM BURKINA FASO**

The presenter introduced her presentation by mentioning that due to efforts to fight against the epidemic in the past 20 years in Burkina Faso, there has been a downward trend in the prevalence from 7.17% in 1997 to 1.2% in 2009 with, the impacts of the triple plan;( i.e. more individual, more family and more community) remaining visible which is the more reason why it is necessary for them to continue to be vigilant and intensify their efforts by involving all the sectors in the activities. She said a National

Counsel to Fight against AIDS and STIs presided over by the President Burkina Faso with a permanent secretariat, has been in existence since 2002. They have used the multi-sectorial approach involving 5 sectors that include the sectors of the ministries and businesses as well as the community sector that groups together the civil corporation. She added that one of the aims of this approach is to reinforce the protection and support for people living with HIV & AIDS and persons affected by HIV & AIDS.

She further indicated that the slightly higher prevalence rate among teachers established to be 2.7% in 2004 compared to the then national average of 2.3% (WHO, 2004) in addition to the insufficiency of special attention and support for orphans, widows and widowers of AIDS motivated a group of teachers infected by HIV to establish the association of positive teachers. They also took the initiative to create the exchange framework and till date there are 64 teachers in the association of which 7 members are men.

The activities carried out since the creation of the association she said include identification of teachers infected and affected by HIV & AIDS at different levels, organization of relaxation activities between members for them to get along, organization of discussions on subjects such as procreation, nutrition, HIV & AIDS facilitated by doctors and many others. She said some of the successes attained so far included better knowledge of HIV & AIDS, adoption of responsible behaviors, better participation in activities and meetings on HIV & AIDS, more capability to face stigmatization etc. The presenter also indicated that the main challenges were reluctance of the teachers infected or affected by HIV & AIDS to identify themselves, difficulties in adhesion of the teachers to the activities of the association due to fear of being stigmatized, weak participation of the members in monthly encounters, weak geographic cover for decentralizing the association etc.

In conclusion the presenter indicated that it was necessary to recall that education is the basis for sustained development and hence efforts must be made to reduce the individual and collective vulnerability of teachers who are principal actors of education by improving the working conditions of people living with HIV and the lives of their families. She said they are conscious of the importance of grouping together since it allows a mutual support and helps them develop the spirit of respect and support for each other hence the creation of a regional network is essential despite the difference in contexts in the different countries, (since they have a common objective that has to do with obtaining the knowledge to give to their children) so that they can contribute efficiently to the development of the various countries.

#### **d. PRESENTATION FROM SENEGAL – ON RESEARCH ON THE VULNERABILITY OF THE ASSOCIATION OF TLHIV IN SENEGAL (CARVEE) BY EDOUARD GUEYE**

The presenter began by indicating that the association of teachers living with HIV in Senegal (CARVEE) originated from an encounter between 2 men, 1 union member and 1 member of a team of experts responsible for the implementation of the national framework of the response against HIV & AIDS followed by identification of 4 more teachers infected or affected by HIV & AIDS in November 2009. The structures of the association were adopted and an elaborated strategic plan was then developed because there were reports of two men being dismissed from work due to their status and constant health problems that made them absent themselves repeatedly from work.

He said the first most important reason for the creation of the association was to provide care and support for TLHIV and with this objective, a lot of teachers living with HIV & AIDS who had stopped their treatments, were motivated and recruited. The office of the CARVEE also set up a solidarity cash register to serve as support for some of its members who had been victims of an administrative measure (dismissal) as well as assist the members of to solve their social problems.

The presenter also mentioned that advocacy efforts with the Ministry of Education (MEN) have included participation of the MEN in the activities of CARVEE, CARVEE is also a member of the EYELASHES of the MEN, authorizations of absences for the members of CARVEE to enable them participate in national and international activities, request for positive teachers and members to be posted to more fitting schools (this has been without results to this day) and requests for re-integration of Positive teachers who had been dismissed (this has also not yielded any results). The activities carried out with the union of teachers have been two studies to identify teachers living with HIV & AIDS in all the regions of the Senegal (2008; 2009), general assembly of the members of CARVEE in November 2009, two office meetings, one regional workshop on anti-stigma and others. On activities carried out with the associations of People living with HIV & AIDS the presenter indicated that there had not been any such specific activities, nevertheless, the leading members of CARVEE are very active in the national and the regional associations of PLHIV in the country.

Some of the challenges of CARVEE the presenter listed included implication of the inventory of all teachers living with HIV & AIDS at the time of the study the activities of CARVEE, financing of the action Plan of the CARVEE, expansion of the CARVEE (since membership has been by individual contacts) and uniform functioning of the structures put in place for CARVEE. In conclusion the presenter mentioned that the way forward was for the Ministry of Education to support the action Plan and for the nomination of a responsible GIPA at the heart of the Ministry who will be responsible for addressing the requests of teachers living with HIV & AIDS without stigma and discrimination and to give them the courage to assert themselves as well as to educate their peers on the problems of HIV & AIDS.

#### **e. PRESENTATION ON GATHERING FOR A MALIAN SOLIDARITY SCHOOL AGAINST AIDS BY MODIBO KANE, KNIGHT OF THE NATIONAL ORDER**

As part of the introduction for his presentation, Mr. Kane said the association of TLHIV in Mali originated from series of activities that initiated the leadership. He said these activities were support for participation in the workshop for the association of Senegalese TLHIV (CARVEE) in Kaolack, the wide dissemination of information on HIV & AIDS in Mali the involvement of structures of care for PLWHA in Mali, the delivery of initiative by the RMAP+ as well as the fact that the Chairman of EEMSS was the President of RMAP+ and CCM of Mali. He said the founders then begun to mobilize TLHIV by performing a census of TLHIV with support of regional coordinations of RMAP, organization of national orientation workshop of TLHIV by RMAP+ in October 2011 as well as support from the associations in Senegal and Burkina Faso (CARVEE and CES respectively) with funding from SE/HCNLS Mali, UNESCO-BREDA and UNAIDS.

Specific activities of self-support among TLHIV in Mali include relaxing day at river Niger in Koulikoro (60 km from Bamako) with visits to local authorities (scheduled for March 24, 2012), closing day of the month for fight against AIDS at the headquarters of RMAP+ with galvanizing the public by the President of EEMSS, development and popularization of an action plan for 2012, obtaining receipt of the

association, making membership cards and sales (still in progress) and manufacturing headed paper with seals of the President and Treasurer for 54 members who have been notified.

The presenter said their plea to MoE were that the School Principal of the Treasurer, assigned someone to assist her so she can take better charge of most of her activities in the association, personal commitment of the Coordinator of the CSLS/MEALN sought during the orientation workshop to support any initiative coming from the association as well as request for the teachers union be available to support the initiatives of the association. He said the objectives of TLHIV National orientation workshop were that after the two day workshop, participants will be able to highlight the challenges they face in school, family and community, identify the role they can play in interrupting the chain of transmission of HIV, the fight against stigma and discrimination in schools and in the community and in the orientation of the authorities including the Ministry of Education in order to respond effectively to the epidemic at the school and community. Another objective was that the participants would be able to put in place a strategy to encourage other teachers living with HIV to come to terms with themselves, to network with groups of teachers living with HIV in the sub region as well as to live positively and be able to teach while infected with HIV. Mr. Modibo concluded by listing the expectations of the association as financing of the 2012 Action Plan of EEMSS, carriage of TLHIV associations by national networks, networking in the sub region TLHIV AO/AC, recognition of this network by NAP + AO / AC as well as technical and financial support of TFP for this network.

#### **f. PRESENTATION ON THE GUINEAN ASSOCIATION OF TEACHERS LIVING WITH HIV & AIDS (AGEV +) BY PIERRE BABARA SYLLA FROM REPUBLIC OF GUINEA**

The presenter begun the presentation by indicating that it all begun with the creation of the Guinean Network of the Associations of Persons Living with HIV & AIDS (REGAP+) in January 2005 followed by many others such as the Association of Positive Miners, Association of positive Fishermen etc. and in August 2011, the Guinean Association of the Teachers living with HIV (AGEV+) was created with about 20 members. The monthly contribution of the founding members has been the only source of funding and so far the activities have been:

- research and identification of the teachers living with HIV throughout the country:
- meetings with identified organizations that are in charge of HIV & AIDS issues in the country (CNLS, MSF Belgium, Dream, etc...),
- advocacy with the Ministries in charge of education for the recognition of the AGEV+, the inclusion of support for teachers living with HIV in the different budgets, the introduction of the fight against HIV & AIDS in the country's school programs and the continuation of a country-wide sensitization of the importance of the international AIDS day celebration in the newspapers and media as a world-wide activity in order to avoid stigma and discrimination at the workplace.

To conclude the presenter said some of the results obtained included taking care of medical expenses of some of the teachers living with HIV & AIDS and splitting the workload of some teachers that accepted to disclose their status with their superior bosses.

### **PRESENTATIONS OF NEW ASSOCIATIONS:**

**a. PRESENTATION ON SUPPORT TO THE TEACHERS INFECTED AND OR AFFECTED BY THE HIV & AIDS/AIDS IN TOGO BY MENSAH KOSSI MIHLAMGHIDI**

Mr. Mensah, began his presentation by stating that prevention of the effect of HIV & AIDS on the work place is a priority defined in the National Strategic Plan to Fight against HIV & AIDS, and STIs and the detailed description of the National Political members on the fight against HIV & AIDS in the work place in 2010. He said teachers infected and/or affected are not organized in any association and this makes it very difficult to determine their number and the impact of the phenomenon on the educational system even though information reveals their existence.

He indicated that some of the measures taken include the Minister for Primary and Secondary Education in his sectoral plan to fight against HIV & AIDS and the STI indicated that one of the priority s of importance is to raise the awareness of the disease to young children who are also vulnerable. Thus some of the foreseen activities are the creation of an Association of the Teachers Living with HIV (AEVVIH) to allow those that will discover their status to know that there is a structure able to take care of them as well as the organization of sensitization activities among teachers to allow them to voluntarily go through screening to get tested to know their HIV status. Another measure taken is to establish a support program for teachers infected and/or affected by HIV & AIDS in order to render visible support within the association.

Mr. Mensah concluded his presentation by saying that some of the challenges are that teachers do not want to declare their status because of the extent to which discrimination and stigma exists; there is also lack of financial resources to organize activities necessary for setting up the association as well as the difficulty in engaging the Ministry on the subject.

**b. PRESENTATION BY LIBERIA ON LIGHT ASSOCIATION BY CHARSELY KUMBLY**

The presenter said the current situation in Liberia was that 31 support groups of PLHIV & AIDS had been established, 10 TLHIV have been identified from these support groups by Light Association, 4 Teachers living HIV were identified by the National Teacher Association through the EFAIDS program, a network of all PLHIV Association has been established and there is an Education sector HIV & AIDS workplace policy, and NTAL has developed Workplace policy to well address the needs of its members.

**The overview of the HIV & AIDS Policy Framework in Liberia was then presented as in the table below:**

HIV and AIDS Policy Framework	Major Achievements	Major Challenges
National HIV Policy	officially launched and disseminated (2004)	not widely disseminated
National HIV Workplace Policy	Officially Launched and disseminated (2010)	Disseminated to 5 of the country's 15 counties
Education Sector HIV workplace Policy	Officially Launched and disseminated (2011)	All schools have not received the policy
National Teacher Association EFAIDS policy	Domesticated a workplace policy for Teachers	Is being printed and not officially launched
Model Law	Enacted into law by legislature in June 2010	Not simplify and disseminated yet

He said the major challenges are that TLHIV identified by NTAL are not yet linked up with any Support Group due to stigma, the 10 teachers identified by Light Association from the support groups do not want to go public due to stigma, effective collaboration and coordination mechanism is lacking among partners and there is no disaggregated data from VCT Sites to track TLHIV.

For the way forward, the presenter mentioned that there was the need to put in place effective collaboration and coordination mechanism among partners involved with PLHIV support groups, there was also the need to use experience gathered from this sub-regional workshop to setup a network of TLHIV, to review the education sector HIV & AIDS workplace policy to reflect the current needs of TLHIV as well as the need to put in place a mechanism to track data of TLHIV within the sector.

**c. PRESENTATION ON SITUATION ANALYSIS OF THE ASSOCIATION OF TEACHERS INFECTED AND/OR AFFECTED BY HIV & AIDS IN NIGER BY MS COULIBALY RAHILA**

Madam Coulibaly in her presentation said the association of teachers infected and/or affected by HIV & AIDS of NIGER is a young association still in the formation state with all its challenges. The significantly higher prevalence rate of 1.4% among the teachers compared to that 0.7% prevalence of the country, the remote places where some of the positive teachers are posted to as well as stigma and discrimination against teachers living with HIV are some of the problems that necessitated the establishment of the association.

She said some of the actions taken are within the framework of setting up the association of teachers affected or infected by HIV & AIDS, they had to mobilize members of people living with HIV who are teachers throughout the whole country through the national association of people living with HIV & AIDS (PVVIH), advocacy with the decision-makers for a support to for TLHIV during the world AIDS day in front of the President of the Republic Niamey to register their determination to set up a consultation framework and action plan in favor of teachers affected and infected with HIV. She also gave some statistics on other activities carried out in collaboration with the sectorial committee in reaching schools with information on HIV & AIDS as part of awareness creation efforts. They had also advocated with the ministry of education to post TLHIV to schools near centers of where they can obtain care and support.

She said one key lesson learnt is that to add to these actions taken during sensitization activities in the fight against AIDS, more of the positive teachers who were not afraid to disclose their status and so gave their testimonies made it easier to carry the information on HIV & AIDS across. This she said made other teachers infected and/or affected by the HIV virus identify themselves in order to also benefit from the care and support being provided by the association. She however added that a lot remains to be done since non-disclosure of one's status for fear of stigma contributes to the spread of the virus.

She concluded her presentation by indicating that the way forward includes the need to mobilize resources, the need to intensify advocacy efforts with the decision-makers and partners in favor of the teachers infected and/or affected by HIV & AIDS (EVVIH), the need to quicken the process of setting up the association for TLHIV (but also linking it up with the African network for exchanges) and the need to accelerate the process of putting HIV & AIDS and STI into the schools curricula to demystify the myth around HIV & AIDS.

## SESSION 5

*Discussions: Association of Teachers Living Positively: In which context should we work in country and regional levels – Discussions led by Jane Okrah, UNAIDS*

Madam Jane introduced the first working group session by entreating participants to reflect on the following issues since they were going to be the focus for the first group session

- ✚ In which context do we work looking at the challenges we all face
- ✚ Explore all avenues at Regional and country levels as teachers infected with HIV & AIDS
- ✚ Situation differs from country to country so it is important to develop country specific strategies
- ✚ How are we going to engage knowing we have umbrella associations and other organizations we belong to

In all the participants were divided into six groups including groups for Anglophone Ministries, Francophone Ministries, Anglophone Unions, Francophone Teachers Unions, Anglophone Teachers and Francophone Teachers to discuss issues on capacity development for actions to promote collaboration among participants through harmonization of goals, standards and policies across nations by answering the following questions:

- ✚ What are the critical factors necessary for successful TLHIV & AIDS association?
- ✚ What lessons can be learned from existing associations
- ✚ What are the challenges that exist and the potential ways to overcome them

### ***PROCEEDINGS FOR THE SECOND DAY***

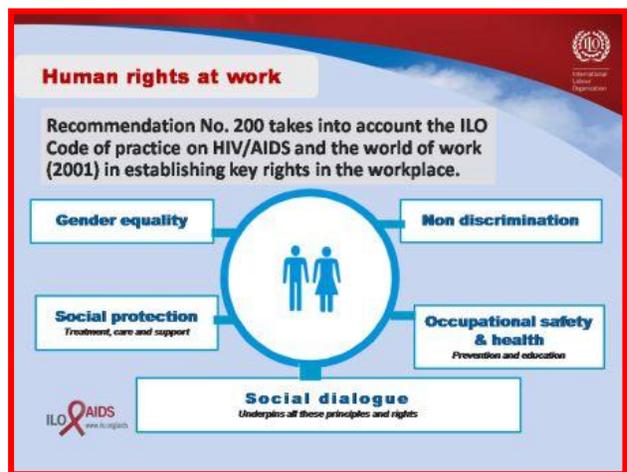
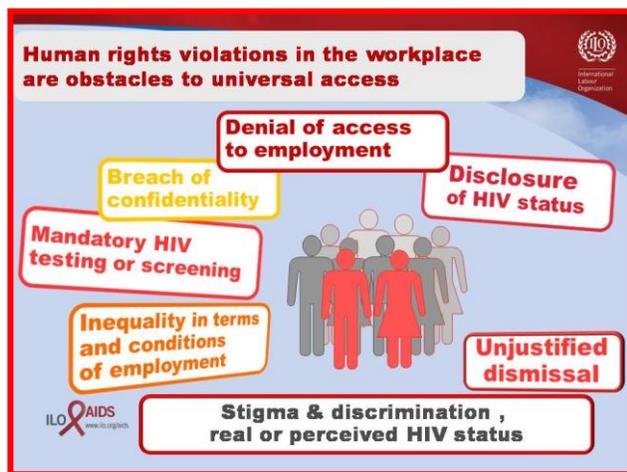
#### **Recap of Day 1 by representative from Burkina Faso and Mali**

After welcoming all participants back to the workshop by the organizers the representatives from Mali and Burkina Faso gave detailed recap of activities and proceedings of the previous day. The participants gave comments to fill in the gaps of what had not been captured and afterwards clapped for the rapporteurs for good work done and with that accepted their report.

#### **a. Presentation on Recommendation Concerning HIV&AIDS and the world of Work, 2010 (No. 200) by Mr. Amadou, ILO, Senegal**

The presenter introduced his presentation by stating that **Recommendation No. 200** is the first international labour standard on HIV and AIDS that includes the workplace and engages world of work stakeholders as essential to the HIV response and calls for the development, adoption, implementation, monitoring of national workplace policies & programmes. He added that R 200 is also a tool to increase international cooperation in the UNAIDS framework.

He said Human Rights violation in the workplace is obstacles to universal access and with the pictures below he demonstrated the aspect of key rights addressed by R 200.



He said ILO Constitution indicates that member states have one year to report back on measure to give effect to R 200 and can take action to prevent discrimination by adapting and adopting anti-

discrimination measures and providing for effective implementation as well as considering affording protection equivalent to that available under the Discrimination Convention 1958 No. 111. Under protection for all workers, he said the broad scope includes all workers, families and dependents including persons in any employment, occupation or economic sector, persons in training, job applicants, job seekers, laid off or suspected workers, workers in the informal economy as well as armed forces and uniformed services.

Mr. Amadou added that national workplace policies and programmes on HIV&AIDS should take into account R200 and other ILO international instruments, involve the tripartite partners and key stakeholders, be integrated unto national HIV strategies, development plans, decent work and other strategies and should also involve labour administration and judicial authorities. He said R 200 can be given effective backing for implementation through national laws and regulations, collective agreements, national and workplace policies and programs as well as through sectoral strategies. To conclude, the presenter stated that the way forward for follow-ups was for national mechanisms to develop, implement and monitor country policies on HIV & AIDS and for data collected to inform national HIV strategies. Finally the presenter gave two websites for further references: [www.ilo.org/aids](http://www.ilo.org/aids) and [www.ilo.org/aids/legislation](http://www.ilo.org/aids/legislation)

## **b. Presentations on Education Sector Workplace HIV & AIDS Policy by Akua Ofori-Asumadu, ILO Ghana**

Madam Ofori-Asumadu commenced her presentation with the question of what the Workplace HIV & AIDS/AIDS Policy was and in answering she said it is a list of rules and guidelines that establish the responsibilities of workplace management and employees regarding HIV & AIDS. She added that the objectives of an HIV & AIDS Policy are to prevent spread of HIV & AIDS, mitigate the impact of HIV & AIDS, provide care and support as well as, combat stigma and discrimination Starting/Revising an HIV & AIDS Workplace Policy. She said given that denial, prejudice, stereotypes and stigma associated with HIV & AIDS constitute principal barriers, policy development should be preceded or accompanied by a “values clarification” process on the issue among the principal actors and relevant stakeholders, to ensure transparency, trust, cooperation, ownership and commitment to the process.

The key principles an Education workplace Policy should cover she said include recognition of HIV & AIDS as issues affecting the education workplace, non-discrimination and reduction of stigma, gender equality, supportive and caring environment, healthy work environment, screening not for purposes of exclusion from employment or studies, continuation of employment relationship, confidentiality, prevention as well as social dialogue which is very important in the development of any policy to ensure that all stakeholders are all involved in looking at the policy. She gave further explanations to the meanings of the key principles. The policy should highlight your right but also your responsibilities. There should be disciplinary measures so people cannot do what they want without adhering to the policy. If we are to move forward in any program at all, policy becomes the key to address issues of knowledge on the part of the beneficiaries and those responsible for implementation, coordination among implementers, monitoring to ensure adherence and to ensure that the document is not shelved but is implemented. She said the policy should also have disciplinary procedures and grievance resolution include, implementation provision and provision should be made for it to be revised to reflect new trend (e.g. ILO Recommendation 200) and emerging issues and provided the context and steps for the revision of a workplace policy.

In her comments after the presentation she said it is upon the recommendations that policies are made so there will be similarities. She recommended that in the absence of a coordinator, one can have a committee but having both is essential since the coordinator sees to the management and implementation of the guidelines and recommendation while a committee oversees this in a collective manner. She further clarified that HIV & AIDS is not a contagious disease but it is a communicable disease, HIV & AIDS in itself does not cause diseases but it is a part of a process, the virus gives an opportunity for the host alone to get other diseases. People have cancer which is very dangerous but we are not afraid of them, because the one who has the disease cannot give it to the one who does not have it. So we should not be afraid of people living with HIV since they cannot give it to us. She also added clearly that the workplace policy does not call for treatment to the detriment of the one who is negative e.g. when a woman has a baby within the labour laws, she is allowed flexible working hours, allowing her time to breastfeed her baby and this is the policy whether the mother had HIV or is negative. She indicated that some of the scenarios that can constitute an unhealthy working environment in the Education sector included posting to remote areas where there are no reliable hospitals, exposure of young males to young girls, first aid or PE exercises that can cause one to hurt and bleed etc in which case there is the need to train them to be able to deal with such environments.

## **2<sup>ND</sup> WORKING GROUP SESSION**

**Development of the format of an Education Sector HIV & AIDS and AIDS Workplace Policy for WCA: applicability of R200, for countries with policies that do not reflect R200 what are the aspects of the R200 that should be incorporated**

**Countries that have incorporated the R200 to:**

- What extent does it incorporate the R200
- Which aspects (specific paragraphs)
- Which groups does it cover, which partners (tripartism)
- Is it adequate, if not how can it be improved
- Applicability of the R200- roles and responsibilities of MoEs and unions and recommendations as well as roles and responsibilities of MoEs and TLHIV & AIDS and recommendations

## PLENARY SESSION: WORKING GROUPS REPORTING BACK

### a. Anglophone (Ghana, Gambia and Liberia) Ministries Group (Focal Points)

#### Q1) To what extent does it incorporate the R200 into the sector workplace HIV & AIDS policies?

- ✚ incorporated
- ✚ guiding principles of the three countries' policies captured the R200 of ILO
- ✚ Policy statements captured R200 under the various national thematic areas - prevention, treatment, support and care, impact mitigation, monitoring, evaluation and research
- ✚ Reflected in the countries strategic plans which incorporated the various activities

#### Q2) Which groups does it cover; which partners (tripartism)

- ✚ The policies cover all target populations
- ✚ education sector personnel in the workplace
- ✚ teachers, learners
- ✚ teachers living with HIV & AIDS

#### Applicability of R200 - C.

#### Roles and responsibilities of MoEs and Unions

- ✚ MoE: develop sector policy and strategic plan to reflect all issues including R200
- ✚ Unions: to domesticate the sector policy to its context and to reflect the needs of infected teachers
- ✚ MoE: responsible for employment, transfer, posting of teachers
- ✚ Unions: can intervene on behalf of TLHIV & AIDS in case of violation of human rights. Ensure confidentiality of teacher's status at the disciplinary level while dealing with the violation issue.

#### D. Roles and responsibilities of MoE and TLHIV

- ✚ Both MoE and TLHIV should engage into advocacy, there is the need for MoE to create enabling environment (policy)
- ✚ TLHIV take ownership of network/association (active membership), mobilization of members
- ✚ MoE: build capacity of TLHIV, provide technical support
- ✚ TLHIV & AIDS: should mobilize resources and ensure accountability

### b. Anglophone Trade Union Group

#### 1. Activities carried out by Unions

- ✚ Support to research and identification of teachers
- ✚ Development of capacity to fight stigma
- ✚ Support organization of general assembly for teachers living with HIV & AIDS
- ✚ Guide for sensitization (primary and secondary schools)

#### 2. Activities taken by MoEs

- ✚ Strategic plan
- ✚ Favourable conditions and participation of TLHIV & AIDS
- ✚ Focal points help the mobility of teachers
- ✚ Development of competence of PLHIV & AIDS
- ✚ Provision of access to financial allocations for TLHIV & AIDS

### 3. Comments from Anglophone Unions (1 representative)

She said in Ghana for example the unions are carrying out a research and coming out with the needs of teachers living with HIV & AIDS and through that they have set up counseling centres at the NAT headquarters and in 5 districts. These centers are not only for HIV positive teachers but also for people with drinking problems and other social problems. They have also set up VCT services and out of this some teachers who tested positive also joined the association, with plans for upgrading this centre into a clinic status in collaboration with PPAG since some of the teachers do not want to mingle with others for STI services. She said the school children were not left out too though teachers were the target, they also included TEWU, they have advocated ever since for very good working environment for teachers living with HIV & AIDS. They have also used different channels of advocacy which include some books written to help educate teachers on issues of HIV & AIDS as well as help those positive to manage their conditions. Mobile vans from PPAG are also being used to create awareness of the need for teachers to know their status and focal points within the union have also been set up where positive teachers can go and obtain support.

#### c. Anglophone Teachers' Group

##### 1. Activities carried out:

- ✚ Formation of network of teachers living with HIV & AIDS
- ✚ Mobilization of members from support groups and treatment centres, one on one contact
- ✚ Counseling services, also mobile counseling and testing services
- ✚ World AIDS Day observed with teachers
- ✚ Capacity building of teachers
- ✚ Build knowledge on their condition through resource persons (especially medical personnel), including treatment, nutrition, living positively as well as stress management etc.
- ✚ The objective is for the teachers to then work as advocates and mobilize others to spread this information

##### 2. Analysis of activities and recommendations to unions supporting TLHIV & AIDS

- ✚ Advocate favourable posting policies to teachers living with HIV & AIDS (e.g. Easy access to treatment through postings near health centres)
- ✚ Provide continuous in-service training to overcome stigma and discrimination, adherence to drug taking and to cope with stress
- ✚ Advocate for conducive working environment without stigma and discrimination
- ✚ Provide structures for TLHIV & AIDS to have meetings and other deliberations

##### 3. Role of MoE

- ✚ Non-discrimination of teachers living with HIV & AIDS
- ✚ Ensure availability of treatment, care and support for TLHIV & AIDS
- ✚ Strengthen counseling centres at all levels
- ✚ ARV and nutritional support should be free for TLHIV & AIDS
- ✚ School fee support given to children of teachers living with HIV & AIDS

#### More comments from Anglophone Teachers

Provide mobile counseling and testing services for teachers, world AIDS day observed by teachers

Union should advocate to favourable posting policies, provide continuous in service training to overcome stigma and discrimination for conducive working environment.

### **Discussions on issues raised by Anglophone Teachers**

Issues of capacity building should be seen as being trained and organizing workshops for them to allow them to overcome self-stigma, to give them more insight into the HIV & AIDS pandemic, improve their capacity to increase their ability to perform the functions of recruiting more TLHIV & AIDS to join the association, build the knowledge base of their condition to be able to manage their condition to live positively, knowledge of what is in the policy that concerns them, knowledge on nutrition, how to manage stress, as well as commissioned to go and mobilize other members to join the association

What is coming out is that the teachers have very important concerns in the same way the trade unions have concerns making it difficult to serve teachers so you need each other to be able to work together effectively.

Education International brought a programme where 46 countries were involved and if it was implemented well in all the countries then the unions should have been able to identify its teachers with HIV & AIDS. Even though the programme is over the union should not say it is over because it is very effective. So the teachers' union in Ghana put some money aside to be able to continue with the programme in order to continue to identify and provide support to the TLHIV.

Whether it is the union that identifies the positive teachers or the ministry, is another issue, though I personally think it should be the union. Because the teachers are afraid to report their status to the ministry but for the union they know we are there for them to support them and to speak for them. So it is important for the TLHIV association to work closely with the union as well as the union to continue the assured support for the teachers so they can continue to have confidence, and always come to us with new cases as well as their challenges.

### **PRESENTATION ON ASSOCIATION OF PEOPLE LIVING WITH HIV IN GAMBIA – BY OUSMAN SOWE AND MADAM AMICOLEH MBAYE**

Madam Mbaye started her presentation by giving the total population of the people of Gambia as 1,360,681 with a growth rate of 2.7% and prevalence of HIV 1 and 2 as 1.65% and 0.07% respectively (NSS 2011). She said there are 10 support groups of People Living with HIV & AIDS with the first group being established in 1995 and the last in 2011 and about 20% of the membership of these groups is made up of teachers while 30,000 people have access to treatment centres. She indicated that the process of the establishment of the association of teachers living with HIV & AIDS (ATLHIV & AIDSG) in the Gambia started April 2009 and the achievements so far included;

- Sensitization of potential members
- Drafting of constitution for the association
- An Interim committee with TOR has been established for the Association
- Recognition by Mutapola (the female wing of PLWHA), GAMNASS, NAS, UNAIDS, NACP
- Education sector work place policy developed
- Nutritional guide for teachers developed
- HIV & AIDS/AIDS and Nutrition manual for teachers developed
- Established working relationship with Ministry of Health and Social Welfare department to support children whose parents are HIV & AIDS positive

Madam Mbaye however indicated that there have been some challenges of PLWHA in The Gambia such as fear of stigmatization and discrimination, validation of the association's constitution, the association not recognized throughout all 10 support groups due to their inability to register, difficulty in registration, resource limitation, absence of a secretariat, limited data on potential members as well as lack of strategic plan. On the way forward for the Association in The Gambia the presenter said there was the need for the validation of constitution and registration of the Association, the development of a strategic plan and education sector work policy document.

Issues raised for clarification after her presentation included why the need to develop HIV & AIDS/Nutrition manual for teachers alone and what was the role of the Education Service in the Association and in response the presenter indicated that nutrition in HIV & AIDS is key to the building of the immune system and hence teachers need to be informed for their own good and also to be well equipped to assist the students who are HIV & AIDS positive. She also said the Education Service was involved in the association for budgetary allocation, provision of first Aid kits for the schools as well as recognition of TLWHA.

She continued to give a brief overview of the Regional Network of Focal Points. She said the network has 4 branches namely the West African Network, Central African Network, East African Network and Southern Africa Network with the objectives of providing a platform for information and knowledge sharing among teachers, advocating for a comprehensive network to provide extensive support for teachers, prioritizing School Health and Nutrition interventions, providing policy, interventions for creating work place policies for HIV & AIDS for teachers and building capacities of parties who care for TLWHIV & AIDS. She added that the mandate of the network includes establishing coordinating committee and the second review of document on progress being finalized.

## **PRESENTATION ON SELF-STIGMATIZATION OF TLHIV WITHIN GIPA IN EDUCATION IN WCA - CONTRIBUTION AND IMPLICATION OF TLHIV AND HOW TO USE THEM IN THEIR COUNTRIES BY EVELYNE CHEVALIER, UNESCO**

**Madam Chevalier's presentation was in a form of a story which she narrated as follows:**

**"Whom are we talking about?** Let's imagine.... A teacher...HIV positive and president of his TLHIV association in a country where nobody or almost everybody do not know somebody who has AIDS"

"In order to enable himself to work for his community that he finds precious for his moral and in order to have less work related stress (in multi-grade classes of 60 pupils), he takes a part-time post to work with his inspector who is aware of his HIV status".

"He has been under ARV treatment for 5 years, is followed by his doctor, who is in the same city where he has his job. He is proud to have learnt that his virus is undetectable. His wife is taking ARV and she is a house wife. His children go to school; the eldest is HIV positive and takes ARV". She continued **"Where is his self-stigmatization?** It is history for him but he cannot disclose his HIV status in public even if he wanted to because his wife is afraid about what people will say and because his daughter does not know about the HIV status, she is 8 years old".

“Thus, he helps other TLHIV colleagues, not to be ashamed of being HIV positive, to combat together for a better life! To intervene among colleagues that are ‘HIV-ignorant’, so that they would accept to have an HIV test and in case they are positive, to receive ARV when necessary. He is a union person and a militant, he works towards ensuring that the union, that has other priorities than the HIV positivity of some colleagues, will support those that are HIV positive and victims of discrimination in the private sector! And yes - To ensure solidarity among teachers! Because the security he has in the public sector does not apply to the colleagues in the private sector!!!!”

“His TLHIV association does not yet cover the entire country – (But there is hope). So he needs to find ways to meet the colleagues in the south (the country is huge) yet the finances are modest thus, he makes progress little by little!”

“He is lucky to have participated in a two-day UNESCO workshop, in the capital city where he has met other teachers living with HIV in the country (they are not in a TLHIV association!) and also an activist who is an African professor as well as HIV positive, that talked about his battle during the past 15 years in his country very much touched by HIV. ....The workshop was vitamin for him!”

**“And then the scoop! The Ministry of Education offers him a post as a GIPA advisor, the condition to accept is to move to the capital city! What an honour! What a challenge! But he has to talk to his wife.....” It’s great love....After having explained the issues and modalities of the GIPA post to his wife, she gives her blessing, wishes him good luck and promises that the family will follow him to the capital city....She adds that she approves that he discloses his HIV status in public”.**

The presenter concluded her story by saying that “All is well that ends well.....But.....in fact ....let’s come back to the reality...Let’s not dream! Let’s take action NOW... The action plan of the TLHIV associations needs to cut across that of the MoE and the unions in the country..... so that the story would come true”

## **PRESENTATION ON PARTNERSHIP IN THE EDUCATION SECTOR AGAINST HIV & AIDS – BY ALICE OCHANDA, FOCAL POINT, HIV & AIDS AND AIDS UNESCO REGIONAL BUREAU IN NAIROBI**

The presenter said the steps in creating partnership for the response against HIV & AIDS in the educational sector were:

- identifying and recognizing the enemy (in this case HIV & AIDS)
- identifying key parties (MOE and the Unions); this partnership could enhance the development of laws, quality content to protect teachers and children.
- identifying/ determining the common goal (what are the common issues e.g. teachers have to work for MOE to function and teachers’ protection if necessary for the Unions, so the common goal is the teachers)
- Developing working strategy as partners (without strategies there would be system failure). These strategies should be guided by policy.
- Identifying roles/responsibilities for partners; MOE, Teachers, School children.

She said “partnership is important because the enemy (HIV & AIDS) has no boundaries (affects the entire education system), partnership is for the representation of those who matter and for all those we work and live for”. She added that strategic positioning should be for MOE to play the role of the overall coordinator, the union being the key partner/deputy, the network being the supplier, and teachers for

advocacy being the key instruments for change – psychosocial support and transmission of relevant information, counseling for orphans and infected children. It is very important to monitor the strategy to evaluate the impact but there should also be the flexibility for incorporating emerging issues.

She concluded by saying that there was the need for all to trust and support themselves, their partners, the partnership and support one another for a common goal; “the MOE should have trust and support for the unions and the Networks; the unions and MOE must not engage in politics; the union is like an army going to war and MOE should support the union with arms” she added. The unions should not be seen as assistants but as complementary partners and mutual trust is essential for all partners for continuous social dialogue. She added that the foreseen challenges include practicality of partnerships and funding of the unions. The roles of development partners are to bring all partners to the same table to discuss common issues and to provide support to all partners.

### **3<sup>rd</sup> Working Group Session - development of an action plan for a coordinated response at the national and international levels.**

3rd working group session: Development of the format of an Education Sector HIV & AIDS Workplace policy for WCA:

- Applicability of R200: for countries with policies that do not reflect R200, what are the aspects of the R200 that should be incorporated
- Countries that have incorporated the R200: To what extent does it incorporate the R200
  - a) (which aspects [specific paragraphs],
  - b) which groups does it cover; which partners [tripartism]
  - c) Is it adequate, if not how can it be improved? - Those that do not have a policy: What would you like to see in your policy concerning the theme
- Applicability of R200:
  - a) roles and responsibilities of MoEs and unions
  - b) roles and responsibilities of MoEs and TLHIV & AIDS

## PROCEEDINGS FOR THE THIRD DAY

The day's activities, began with a recap of the deliberations of day 2 done by representatives from Liberia and Cameroun. In summary they said the points of emphasis in the presentations on ILO R200 and elements of an HIV&AIDS workplace policy for the education sector were:

- ✚ The R200 is an international convention that needs to be ratified by all member countries to reflect their local context with specific focus on human right violation issues.
- ✚ Policy should precede all interventions on workplace HIV & AIDS
- ✚ Translating these R200 recommendations into countries' actions is of critical concern.
- ✚ The second presentation re-emphasized the core thematic areas of the ILO R200. i.e. Prevention, Testing, care and support and procedures.
- ✚ Another point of emphasis were policy structure and key principles that stressed effective coordination and the issues of non-discrimination and no mandatory testing.

They also added that, there was working group sessions comprising of six sub-groups between the English and French speaking participants from MOE Focal points, Trade Unions and Teachers During plenary, Gambia made two presentations GTLHIV situation and brief achievements made by the ECOWAS Network. This was also followed by presentations by the groups.

Finally they reported that during the afternoon session, UNESCO made a presentation which highlighted the issues relevant for effective intervention of TLHIV association such as partnership in identifying the common enemy, strategic positioning, monitoring and evaluation and building of trust and support. This process was followed by another group work with subsequent presentations.

### Continuation of 3<sup>rd</sup> working group session and Plenary: Synthesis of the working groups on the development of an action plan

During plenary there were presentations on workplan for Anglophone Teachers' Unions, Francophone Teachers' Union, Anglophone TLHIV and Francophone TLHIV (**refer to Appendix II for Anglophone TLHIV workplan. The other workplans were not made available**). Representatives from the various countries also developed country specific workplans and because all the workplans were not completed due to time constraints, the participants agreed to continue working on the workplan after returning to their respective countries into a finally acceptable document to guide their various activities

### Creation of a Network for Association of TLHIV – by RAP+ and all partners

A network of Association of TLHIV was formed as a result of nominations made by some participants. The executives were selected from the following countries:

President	-	Mali
Vice president	-	Ghana
Secretary	-	Cote D'Ivoire
Treasurer	-	Niger

At a meeting held on the closing day of the workshop, some TLHIVs expressed disapproval at the manner in which the executives were selected. They wished for an opportunity to vote for them rather than hand-picked. Countries without associations of TLHIVs were encouraged to do so while members agreed to communicate through emails on issues pertaining to the terms of reference of the executives and the constitution of the network.

## Recommendations

The recommendations that were arrived at the end of the three days workshop included:

1. All countries to continue working with the action plans in the same small groups in- country.
2. All the countries to organize a workshop under the responsibility of the various Ministries of Education (MoE) in collaboration with partners such as the UN System, etc...)
3. The recommended partners in the establishment of partnerships towards this effort include:
  - ⤴ Association of TLHIV
  - ⤴ Coordinating body of Trade unions against HIV & AIDS
  - ⤴ Ministry of Education (MOE)
  - ⤴ Ministry of Health (MOH)
  - ⤴ Ministry of Labour (or the other equivalents in other countries)
  - ⤴ Ministry of Finance
  - ⤴ National Council for the Fight Against AIDS
  - ⤴ UNESCO
  - ⤴ The World Bank (WB)
  - ⤴ Education International (EI)
  - ⤴ Partnership for Child Development (PCD)
  - ⤴ UNAIDS
  - ⤴ WHO
  - ⤴ ILO
4. Support by partners to complete their Action Plans

### Finally the Agenda agreed upon included:

1. The documentation of current status of support to TLHIV and measures to be taken to increase the support.
2. The roles and responsibilities of the Ministries and the various partners to be shared
3. Establishment of a coordinating committee for supervision

## CLOSING CEREMONY CHAIRED BY GHANA AIDS COMMISSION

### a. Brief statements on impressions of the workshop

**Anglophone (representative from Liberia)** *“the workshop is very necessary since it has added to what we have already been doing in the area of HIV & AIDS in the education sectors. Our eyes have been opened to what we have not brought on board especially in the area of teachers who are positive. It has helped us in Harmonization of our country level plans, thanks to our organizers for a wonderful program they put together”.*

**Francophone – (Cote D’Ivoire)** – *she said “there have been good impressions and so I thank the partners and organizers for initiating this workshop for us to reflect on what we have been doing in order to improve upon our efforts”.*

On behalf of the Director General of GAC the Technical Coordinator of HIV, GAC, Ms. Golda Asante, accepted to chair the closing ceremony. She said throughout the three days period a lot had been done by creation a common platform for sharing of common problems, challenges, issues on stigma and discrimination and experiences, lessons learnt, holding of planning sessions, importance of putting a workplace policy in place agreed upon and said she believed all participants were going home with something that will eventually not only improve the conditions of teachers that are positive but also the national response as a whole. She then invited the representative of the Minister of Education to give his closing remarks.

### b. Closing Remarks – By Mr. Benjamin Afful, Director of Finance and Administration of the Ministry of Education on behalf of the Minister of Education, Ghana

Before reading the closing remarks on behalf of the Minister for Education, Mr. Afful, Director of Finance and Administration of the Ministry of Education, recited a poem that he had written.

Mr. Afful then read the speech on behalf of the Minister saying “I acknowledge with deep appreciation, the three days of hard work and brainstorming and your commitment to the tasks assigned you during this meeting and the emergence of definite actions to further that course of your gathering. I am reliably informed about the emergence of the movement towards the acceleration of the Education Sector’s response to HIV & AIDS and AIDS which commenced in a similar fashion in 2002 with sub-regional workshops of HIV & AIDS and AIDS Focal Points in the Education Sector beginning from the East African countries and gathering momentum by catching up with West African countries as well as Lusophone countries over the years. We are all witnesses to the results which these efforts have yielded. This gives me a lot of confidence and hope for the outcome of this workshop/meeting as well. I am informed that a plan of action has been developed highlighting areas of work between teachers unions, MoEs and the HIV positive teachers’ associations with clearly defined responsibilities and indicators. An understanding has been reached on the development of a policy framework on HIV & AIDS and AIDS in the Education Sector to reflect the ILO Recommendations 200 to protect the rights of teachers infected and affected by HIV & AIDS and a sub-regional network of association of teachers living with HIV has also been created. I have no doubt in my mind that with the successes chalked in the educations sectors response to HIV & AIDS and following the commitment to accelerate such response you will meet some years to

come to talk about how far you have come with the support to the movement of teachers living with HIV & AIDS”.

He concluded that speech by acknowledging with gratitude the efforts of the local organizers, especially the MoE HIV & AIDS secretariat for working tirelessly to represent the ministry in hosting this sub-regional meeting and to the participants for accepting to participate and also their contribution in this important meeting, partners for their financial and technical support.

The poem by Mr. Benjamin Afful:

**He said “Strength, love, togetherness, closeness, affinity, sharing, deeds, should not fly me by,  
I shall not be distressed; my inner strength will live on stronger and stronger  
I will still live stronger by the hope I cherish, knowing though government will lend a comforting hand, I know deeply within the brotherly love we share, the network, contact, the hand that touched me, oh made me feel no pain, I will live whether there be HIV & AIDS or AIDS,  
deeds are but passing phases, Oh I would enjoy life, I will touch you, hold you, touch the sister, touch the brother, let us smile, love conquers all!”**

## APPENDIX - 1

### PARTICIPANTS' ATTENDANCE REGISTER

Country		Name	Contact	Position
<b>1. Côte d'Ivoire</b>	<b>1</b>	Dr Fidèle Sylvère Guéï	<a href="mailto:gueifidele@yahoo.fr">gueifidele@yahoo.fr</a> 225 01001541/22420137	AIDS focal point and department head of the STI-AIDS DMOSS MEN
	<b>2</b>	Paulin Kouamé dit Junior	<a href="mailto:ahuijunior@yahoo.fr">ahuijunior@yahoo.fr</a>	Teachers union leader (EI-EFA AIDS)
	<b>3</b>	Filbert Guéhi	<a href="mailto:guehifilbert@yahoo.fr">guehifilbert@yahoo.fr</a>	President of Quitus, National Association of TLHIV, GIPA MEN
<b>2. Senegal</b>	<b>4</b>	Malick Sembene	<a href="mailto:msembene@refer.sn">msembene@refer.sn</a>	HIV Focal point, MEN
	<b>5</b>	Mor Mbengue	+221 77 653 94 91 <a href="mailto:mrmengue@yahoo.fr">mrmengue@yahoo.fr</a>	Coordinator of the Collective of teachers unions fighting against AIDS (COSSEL), IE EFA AIDS program
	<b>6</b>	Edouard Gueye	+221 77 511 88 32 <a href="mailto:gueyeedouard2002@yahoo.fr">gueyeedouard2002@yahoo.fr</a>	Chairman of CARVEE (TLHIV association)
	<b>7</b>	Evelyne Chevalier	<a href="mailto:evelynechevalier@hotmail.com">evelynechevalier@hotmail.com</a>	International expert
<b>3. Mali</b>	<b>8</b>	Modibo Kané	<a href="mailto:kanemodibo@yahoo.fr">kanemodibo@yahoo.fr</a> +223 76-07-96-41	EMMSS President (TLHIV) Chairman of RAP + Africa RMAP + coordinator Head of the Cell Sector for the Fight against AIDS
<b>4. Burkina Faso</b>	<b>9</b>	Adama Bologo	<a href="mailto:bologo_adama@yahoo.fr">bologo_adama@yahoo.fr</a>	Focal point, MEBA
	<b>10</b>	Bernadette Paré	<a href="mailto:parebernadette@yahoo.fr">parebernadette@yahoo.fr</a> +226 20 97 05 17 / 76 67 35 72	President of the ESC, TLHIV association of Bobo Dioulasso, integrated REVS + (national association of PLWHA)
<b>5. Ghana</b>	<b>11</b>	Hilda Eghan	<a href="mailto:hilgan2003@yahoo.co.uk">hilgan2003@yahoo.co.uk</a>	Focal point, MEN
	<b>12</b>	Helena Awurusa	<a href="mailto:info@ghanateachers.org">info@ghanateachers.org</a> 024 4329526	National Association of Teachers, GNAT
	<b>13</b>	Vida Opoku Agyare	024 3283791	President of the National Association of TLHIV:

Country		Name	Contact	Position
				POTEWA
	14	Golda Asante	<a href="mailto:gasante@ghanaims.gov.gh">gasante@ghanaims.gov.gh</a>	Technical Coordinator, Ghana AIDS Commission in charge of Eastern Region
	15	Clement Azigwe	<a href="mailto:napghana2005@yahoo.com">napghana2005@yahoo.com</a> 026 1777257	Chairman of the Ghana Network of PLWH (NAP+)
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## APPENDIX II

### Plan of Action for Anglophone TLHIV

Countries: Ghana, Gambia and Liberia (TLHIV)

OVERALL OBJECTIVE: To enhance capacities, coordination and support for infected or affected teachers and/or their associations.

<b>1. KEY OBJECTIVE: To establish network of TLHIV</b>			
<b>Activities</b>	<b>Responsible</b>	<b>Local Partners &amp; Roles</b>	<b>International Partners &amp; Roles</b>
Hold consultative meetings with key partners to consider the formation of a TLHIV group	MOE	Tr. Unions, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Develop TOR for key partners	MOE	Tr. Unions, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Develop strategy to mobilize TLHIV	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Develop the necessary guidelines and plans i.e constitution and work plan	MOE	Tr. Unions, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Mobilize TLHIVs from among existing support groups and associations to form associations of TLHIVs across the Country	MOE	Tr. Unions, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
<b>2. KEY OBJECTIVE: To Improve capacities of TLHIV</b>			

Activities	Responsible	Local Partners & Roles	International Partners & Roles
Develop training programs to build the capacity of TLHIV i.e leadership, advocacy, psychosocial and positive living skills	MOE	Tr. Unions, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Train TLHIV to build their capacity i.e leadership, advocacy, psychosocial and positive living skills	MOE	Tr. Unions, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
<b>3. KEY OBJECTIVE: Providing for continuous access to quality treatment services</b>			
Activities	Responsible	Local Partners & Roles	International Partners & Roles
Establish CT and centres at Union offices	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Sensitization of Tr. Unions members on the services of the CT centres	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Provide training for TLHIV on psychosocial and positive living skills	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
<b>4. KEY OBJECTIVE: Eradicate self stigma among TLHIV</b>			
Activities	Responsible	Local Partners & Roles	International Partners & Roles
Provide TLHIV with psychosocial support	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Documentation and sharing of success stories	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.

Organize an annual general assembly meetings for TLHIV for networking and experience sharing	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Engage TLHIV on public forum discussions	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Train TLHIV peer educators	MOE	Tr. Unions, NAC, CSOs and MOH	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
<b>5. KEY OBJECTIVE: Advocate for effective functioning of GIPA at the Educational sector and beyond</b>			
Activities	Responsible	Local Partners & Roles	International Partners & Roles
Involving TLHIV in decision making on issues affecting them at all levels	MOE	Tr. Unions, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
<b>6. KEY OBJECTIVE: Ensure TLHIV OVCs get free quality and sustainable education</b>			
Activities	Responsible	Local Partners & Roles	International Partners & Roles
Identify TLHIV OVCs of school going age	MOE	Tr. Unions, TLHIV, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Enroll TLHIV OVCs into educational institutions	MOE	Tr. Unions, TLHIV, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.
Ensure that TLHIV OVCs get the needed incentives to remain in school to complete their course	MOE	Tr. Unions, TLHIV, NAC and CSOs	UNESCO, UNAIDS, PCD, ILO, WB, EI, etc.

## APPENDIX III

### Plan d'action : COTE D'IVOIRE

**L'OBJECTIF:** *Pour renforcer les capacités, la coordination et le soutien pour les enseignants infectés ou affectés et / ou leurs associations.*

<b>1. OBJECTIF PRINCIPAL : Renforcer les capacités techniques, institutionnelles et logistiques</b>				
<b>Activités</b>	<b>Responsable</b>	<b>Partenaires locaux et rôles</b>	<b>Partenaires internationaux</b>	<b>Budget en F CFA</b>
<b>1-Elaborer le plan sectoriel de lutte contre le Sida du MEN</b>	MEN	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ;syndicats,ONGs...	UNESCO,WORLD BANK,BIT,UNAIDS,PCD	5 220 000
<b>2-Organiser les Assises de Quitus pour la consolidation de son existence légale (textes et autres) et pour le renouvellement de ses organes</b>	QUITUS	RIP + ; Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ;syndicats,ONGs	UNESCO,WORLD BANK,BIT,UNAIDS,PCD	3 800 000
<b>3-Soutenir la conduite de réunions de groupes d'auto support dans 13 sections de Quitus en vue de consolider les acquis de celles-ci.</b>	QUITUS	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ;syndicats,ONGs	UNESCO,WORLD BANK,BIT,UNAIDS,PCD	3 900 000
<b>4-Organiser un atelier de renforcement des compétences de 25 membres de Quitus en prévention positive volet communautaire</b>	COMITE TRIPARTITE (DMOSS/Quitus/SYNDICAT	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ;syndicats,ONGs	UNESCO,WORLD BANK,BIT,UNAIDS,PCD	7 000 000
<b>5-Organiser un atelier pour analyser le statut particulier des EVVIH et son articulation avec la R 200 et les conventions internationales</b>	COMITE TRIPARTITE (DMOSS/Quitus/SYNDI CAT	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ;syndicats,ONGs	UNESCO, WORLD BANK, BIT, UNAIDS, PCD	<b>3 400 000</b>
<b>6-Equiper les bureaux de Quitus en matériel de bureau et informatique</b>	QUITUS	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida	UNESCO, WORLD BANK, BIT, UNAIDS, PCD	<b>1 500 000</b>

<b>7-Renforcer les connaissances de 100 enseignants éducateurs de pairs des comités école santé de BOUAKE, DIMBOKRO, AGBOVILLE, MAN, SAN-PEDRO ABENGOUROU, KORHOGO, ABOISSO, BOUNDIALI et BONDOUKOU sur stigma et discrimina</b>	COMITE TRIPARTITE (DMOSS/Quitus/SYNDICAT)	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ;syndicats,ONGs	UNESCO,WORLD BANK,BIT,UNAIDS,PCD	<b>14 150 000</b>
<b>7-MISSION DE RENFORCEMENT DES CAPACITES DES ACTEURS DES STRUTURES DECONCENTREES DE LA DMOSS A LA COLLECTE DE DONNEES, AU RAPPORTAGE DES ACTIVITES, A L'IDENTIFICATION DES OEUVRES DU FAIT DU VIH/Sida ET A LA TRANSMISSION DES DONNEES A LA DIRECTION CENTRALE</b>		Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida, PNOEV	UNESCO,WORLD BANK,BIT,UNAIDS,PCD	<b>7 994 663</b>
<b>8-Equiper 20 centres d'écoute de la DMOSS en outils informatique et connections internet</b>	MEN	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida	UNESCO, WORLD BANK, BIT, UNAIDS, PCD	<b>10 000 000</b>
<b>2. OBJECTIF PRINCIPAL : coordonner les activités</b>				
<b>Activités</b>	<b>Responsable</b>	<b>Partenaires locaux et rôles</b>	<b>Partenaires internationaux et rôles</b>	
<b>1-Organiser un atelier de mise en place de la plate forme de collaboration des structures impliquées dans la lutte contre le VIH/SIDA au MEN</b>	MEN	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ; syndicats, ONGs...	UNESCO, WORLD BANK, BIT, UNAIDS, PCD	<b>5 490 000</b>
<b>2-Organiser à Yamoussoukro un atelier d'identification des meilleures stratégies d'intervention pour l'amélioration des résultats des sites du domaine programmatique soins et soutien (adultes) avec les points focaux de Quitus</b>	QUITUS	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ; ONGs	UNESCO, WORLD BANK, BIT, UNAIDS, PCD	<b>3 400 000</b>
<b>Organiser 10 séances de sensibilisation de masse sur les avantages du dépistage volontaire pour les enseignants à BOUAKE DIMBOKRO AGBOVILLE MAN- SANPEDRO</b>	COMITE TRIPARTITE (DMOSS/Quitus/SYNDICAT)	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ; ONGs	UNESCO,WORLD BANK,BIT,UNAIDS,PCD	<b>3 000 000</b>

<b>ABENGOUROU KORHOGO ABOISSO BOUNDIALI BONDOUKOU à raison de 01 par site.</b>				
<b>Participer à la célébration de la journée Mondiale de lutte contre le sida à Guiglo</b>	COMITE TRIPARTITE (DMOSS/Quitus/SYNDICAT	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ; ONGs	UNESCO,WORLD BANK,BIT,UNAIDS,PCD	<b>1 200 000</b>
<b>3-Conduire une mission conjointe de supervision des acteurs régionaux de Quitus</b>	Comite tripartite	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ; ONGs	UNESCO, WORLD BANK, BIT, UNAIDS, PCD	<b>5 280 000</b>
<b>4-Organiser des réunions trimestrielles de coordination des activités des associations des EVVIH</b>	Comite tripartite	Commission nationale UNESCO ; Ministère de la santé et de la lutte contre le sida ; APE, COGES ;ONGs	UNESCO, WORLD BANK, BIT, UNAIDS, PCD	<b>6 155 000</b>
<b>Budget général</b>				<b>71 489 663</b>