Accelerating the Response of the Education Sector to HIV and AIDS in the Caribbean Region:
The Port-of-Spain Documents

The Caribbean Community (CARICOM)

UNESCO

The World Bank

Overview

In June 2006 the Caribbean Community (CARICOM) and the government of Trinidad and Tobago hosted a high-level meeting of Ministers of Education and national AIDS authorities from throughout the Caribbean Region, under the auspices of the CARICOM Council on Human and Social Development (COHSOD).

This meeting in Port-of-Spain, Trinidad, was the 10th Special Meeting of COHSOD, and was entitled "Accelerating the Response of the Education Sector to HIV and AIDS in the Caribbean." The major objectives of the special meeting were as follows:

- Promote education sectoral leadership in addressing issues of HIV and AIDS
- Create a supportive policy and financial environment for the education sector response to HIV and AIDS at national and regional levels.

In articulating a way forward for the education sector in the Caribbean Region, the meeting developed and endorsed two documents which were presented to the July 2007 meeting of CARICOM heads of government:

- The Port-of-Spain Declaration, which signified the commitment of the CARICOM Ministers of Education and other participants in the COHSOD meeting to renewed efforts at accelerating the education sector response to HIV and AIDS in the Caribbean
- The Port-of-Spain Action Framework, which codified an emerging consensus among participants in the COHSOD meeting around a core set of actions to strengthen national HIV and AIDS responses by the education sector.

The full texts of both these documents are presented here.

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Port-of-Spain Declaration

- 1. We, the Ministers of Education of the Caribbean Community, along with representatives of National AIDS Authorities, and other representatives of governments, organizations and agencies participating in the Special Meeting of the Council for Human and Social Development (COHSOD) on Education and HIV and AIDS in Port-of-Spain, Trinidad and Tobago, 9–10 June 2006;
- 2. **Recall** that the Nassau Declaration asserts that the health of the Region is the wealth of the Region;
- 3. **Note with alarm** that we are facing an unprecedented human catastrophe and that a quarter-century into the pandemic, HIV and AIDS continues to inflict immense suffering on the countries and communities of the Caribbean, that a total of 300,000 persons live with HIV in the region, including 30,000 who became infected in 2005, that the disease is the major cause of death in persons between 15 and 35; and that the prevalence rate in women 15–24 years is at least twice as high as men of similar age group;
- 4. **Recognise** that the extensive national subregional and regional consultations under the joint collaboration of the Pan Caribbean Partnership Against HIV and AIDS (PANCAP) and UNAIDS were undertaken and resulted in recommendations and a roadmap for Universal Access to HIV and AIDS prevention, care, treatment and support 2006–2010;
- 5. **Also recognise** the political Declaration on Universal Access resulting from the high-level meeting of the United Nations General Assembly on HIV and AIDS, 2 June, 2006, as a basis for action;
- 6. **Affirm** that education is a critical sector in the multisectoral response to HIV and emphasise our commitment to achieving the targets set for Education for All and the relevant targets in the Millennium Development Goals:
- 7. **Recognise** that comprehensive assessments of the impact of HIV on the education sector at country and regional levels are urgently required to inform the development of appropriate response strategies, and specifically those that focus on prevention;

- 8. **Commit** to the development and implementation of national and regional sectoral policies on HIV and AIDS and education and the integration of such policies into national and CARICOM/PANCAP strategies;
- 9. **Commit** to the adoption education workplace policies guided by the ILO Code of Practice on HIV and AIDS and the World of Work, and the ILO/UNESCO HIV and AIDS Workplace Policy for the Education Sector in the Caribbean;
- 10. **Pledge** to provide leadership for planning and implementation of national and regional sectoral responses and to facilitate accelerated access to resources from funds allocated for both education sector development and HIV and AIDS response;
- 11. **Commit** to the elimination of HIV-related stigma and discrimination in educational systems through leadership, policy, legislation, regulations and research, and in this regard support the Champions for Change programme initiated by PANCAP;
- 12. **Affirm** the rights of people affected by, and infected with, HIV and promote their meaningful involvement in the education sector at all levels, including policy design and implementation;
- 13. **Request** the CARICOM Secretariat in collaboration with relevant stakeholders to develop a mechanism for accelerating implementation of GIPA principles in the regional response;
- 14. **Endorse** the development of professional and scholarly approaches to effective school health with urgent emphasis on HIV through training and research in selected regional institutions;
- 15. **Commit** to professionalising the fields of HFLE, school health and sex education with attention to HIV and AIDS, to ensure timely, universal coverage and the development of career paths in those fields;
- 16. **Commit** to extending and deepening the coverage and professional development of educators to implement HFLE and HIV and AIDS education programmes;

- 17. **Endorse** the establishment and support development of the Caribbean Network of HIV Coordinators in the education sector as a CARICOM-led regional resource;
- 18. **Request** the Network of HIV Coordinators to develop a model for partnership between Ministries of Education and national organisations of PLWHA, consistent with the GIPA principles;
- 19. **Request** the PANCAP to develop a regional strategic framework for the education sector response in the overall regional response to HIV and AIDS;
- 20. **Request** the CARICOM Secretariat to establish a network and consultative mechanism among development partners to increase efficiency and effectiveness of their contribution to the regional and national strategic plans for HIV and AIDS and education, and to collaborate in developing policies and sharing of information and knowledge;
- 21. **Agree** to the inclusion of the education sector in the priorities identified in the review of the Caribbean Regional Strategic Framework for HIV and AIDS to be undertaken by PANCAP in 2006, recognizing that the education sector response to HIV and AIDS also provides an opportunity to address other significant health and lifestyle issues, with special emphasis on prevention;
- 22. **Agree to engage with CAPNET** to develop national and regional publishing projects to ensure provision of quality and culturally sensitive instructional materials to support universal coverage of HIV and AIDS education, and to infuse HIV and AIDS principles into new instructional materials;
- 23. **Recognise** the importance of mainstreaming gender in all materials and methodologies used to address education with regard to HIV and AIDS;
- 24. **Recommend that Ministers of Education** continue to advocate for appropriate attention to HIV and AIDS issues, and keep HIV and AIDS high on the agendas of COHSOD and national parliaments;
- 25. **Also call on all stakeholders** to advocate for, and contribute to, the mobilization of resources in support of the national and regional programmes that would advance the role of education in the accelerated approach to HIV and AIDS;

- 26. **Request the Chair of COHSOD** to ensure that the issues related to education and HIV and AIDS are brought to the attention of heads of government for their endorsement and support;
- 27. **Recommend** that targets established in the regional and national strategic plans for education and HIV and AIDS be aligned with those established by the national, subregional and regional consultations for HIV and AIDS prevention, care, treatment and support, and the UNGASS targets for 2006–10;
- 28. **Ensure** access to educational opportunities at all levels for children in vulnerable settings and conditions with emphasis on those affected or infected by HIV and AIDS;
- 29. **Request** of the Caribbean Examinations Council that all appropriate syllabuses and assessment procedures for the three levels of secondary examination be urgently reviewed to ensure that knowledge and skills that will contribute to the education sector response to HIV and AIDS be included.

Port-of-Spain Action Framework

Sector Policy Framework

Ch	eck Item	Comments
	has been adopted by the government includes education in a multisectoral approach	Demonstrates the government's commitment to responding to HIV and AIDS. The inclusion of the education sector shows the recognition of the role of the sector in the response.
AI	ntional Education Sector HIV and DS Strategy has been adopted by the Ministry of Education has been incorporated in the national	Shows how the sector plans contribute to the response to HIV and AIDS nationally. Inclusion in the education plan (and EFA) indicates how this strategy will be implemented.
Ed	sector plan ucation Sector policy for HIV and AIDS	Addresses sector-specific HIV and AIDS issues. The policy will be effective only if it
	has been adopted by Ministry of Education has been shared with all stakeholders, Greater Involvement of People with HIV and AIDS (GIPA), and disseminated	is owned by the relevant stakeholders, especially the teaching unions, and if it is widely known and understood. Addressing curriculum at this stage can facilitate dialogue and agreement with the community on sensitive issues that can otherwise slow progress in
	addresses gender, curriculum content, planning issues and education needs of orphans and vulnerable children (OVC)	implementation. Establishing policy is the essential first step in an effective response. Input from GIPA will ensure that the policy reflects the needs of people living with HIV and AIDS within the sector.
Wo	orkplace policy addresses stigma and discrimination in recruit- ment and career advancement	HIV and AIDS presents major new issues in the workplace (the school, the office): recruitment and career progression are con-
0	sick leave and absenteeism	strained by stigma and discrimination; sick leave policies rarely cope with long-term disease, and encourage undisclosed absenteeism; codes of practice that forbid sexual abuse of pupils are rarely enforced; easy
<u> </u>	care, support and treatment of staff access to voluntary counselling and testing (VCT)	access to VCT, treatment and psychosocial support. The public sector can often learn from the private sector in developing a

workplace response.

Planning and Management Framework

Check Item Comments

Management of the sector response requires:

- ☐ an interdepartmental committee
- department focal points who have HIV and AIDS activities as a specific part of their job description
- a secretariat or unit that supports the mainstreaming of the response and has clear political support
- understanding of new sources of financial support

For short- to medium-term planning, use the Education Management Information System (EMIS) or school survey data to assess:

- ☐ HIV and AIDS-specific indicators
- ☐ teacher mortality and attrition data
- ☐ teacher absenteeism data
- ☐ district level data

For long-term planning:

- computer model projection of the impact of HIV and AIDS on education supply and demand
- assessment of the implications of changes in supply for teacher recruitment and training
- assessment of the implications of changes in the size of the school-age population and the proportion of OVC for education demand

Mainstreaming the HIV and AIDS response requires, at least initially, mechanisms for involving all departments (the committee) and for implementation (the unit). Keys to success are: the focal points have space in their work program to allocate time to HIV and AIDS; the unit reports to the highest level; the unit is led at the department director level. The sector can now access financial resources (for example, MAP, GFATM), often thought to be exclusive to the health sector.

Even where an effective EMIS is unavailable, school survey data can be used to assess the impact of HIV and AIDS on the education system. This should relate district level education data to the geographical pattern of the epidemic, using epidemiological data from the health service.

The effects of the epidemic have a time scale of decades, and impacts only slowly become apparent. Long-term planning similarly requires projection of impact over decades, which is best achieved using computer projection models such as EdSIDA, which combine epidemiological and education data. Projection allows for the planning of future teacher supply needs and, where necessary, the reform of teacher training schedules.

Prevention Framework

Check Item Comments Achieve Education for All (EFA) vs. HIV and AIDS. Prevention curriculum requirements: • formal and nonformal, within the national curriculum begin early, before the onset of sexual activity use grade- and age-specific content ☐ develop participatory teaching methods ☐ include a life skills approach use a carrier subject teach in the context of school health (for example, FRESH) ensure community ownership and support Teacher training in HIV and AIDS prevention requires development of: preservice training and materials inservice training and materials messages and approaches that help

Complementary approaches:

- peer education
- Ministry of Education has input to community IEC strategies

teachers to protect themselves

- Ministry of Education coordinates with NGO prevention programs and GIPA to provide consistent messages
- Ministry of Education assists Ministry of Health in promoting youth-friendly clinics for the treatment of sexually transmitted infections (STIs) and condom distribution

Completion of education is a social vaccine

The aim is to develop knowledge and protective behaviors: start before risky behaviors have become established; match content to the development stage of the child; use teaching methods that establish skills, values and practices to help children protect themselves. Use of a single carrier subject (for example, social studies) is often more realistic than more complex approaches (for example, spiral, diffusion). Failure to involve the community in this potentially sensitive area is one of the major causes of delay in implementation.

Preventive education is more frequently taught as part of inservice training than preservice. Whereas it is necessary for both, new teachers may be more readily trained in the participatory methods required to teach the subject. Teacher training institutions frequently overlook the benefits of helping teachers to protect themselves.

An holistic approach is essential for effective prevention. Peer education is particularly important for reinforcing active learning by youth. IEC strategies ensure consistent messages in the school, home and community. Building on existing NGO programmes speeds up the response. Early and effective treatment of STIs is effective in reducing HIV transmission; youth need access to condoms to translate learned behaviours into practice.

Orphans and Vulnerable Children (OVC) Framework

Check Item Comments

Barriers to education are removed:

- ☐ achieve Education for All
- abolish school fees
- develop a mitigation strategy to avoid informal and illegal levies
- □ subsidize payment of informal levies

The Education System helps maintain attendance:

- offer conditional cash (or food) transfers
- provide school health programmes, including psychosocial counselling

The Education Sector works with other agencies providing care, support and protection:

- ☐ MinEd coordinates with NGOs
- ☐ MinEd coordinates with Ministry of Welfare/Social Affairs

Achieving EFA enhances access, including for OVC. School fees, in particular, may prevent OVC from accessing education. Abolition provides partial relief, but fees are often substituted by levies (for example, for textbooks, PTA, uniforms). Social funds offering subsidies through schools, PTAs or the community can help overcome these barriers.

Ensuring that OVC are able to attend school is only the beginning: they also require support to remain in school. One effective method is to offer caregivers cash (or food) transfers that are conditional upon attendance. OVC have typically suffered severe shock, and benefit from school health programmes based on the FRESH framework.

Long-term care, support and protection of OVC are typically the mandate of social programmes under Ministries of Welfare or Social Affairs. In practice, NGOs are often most directly involved in these programmes and offer an immediate point of entry. In both cases, it is important that the Ministry of Education Department ensures that education system programmes are complementary to these activities.