What is the International HIV/AIDS Alliance?

The International HIV/AIDS Alliance (the Alliance) is the European Union’s largest HIV-focused development organisation. We were established in 1993 as an international non-governmental organisation to support community action on HIV/AIDS. Since then, we have worked with over 2,000 community-based organisations in over 40 countries, reaching some of the poorest and most vulnerable communities with HIV prevention, care and support and improved access to treatment.

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Members of the development group for Building Blocks: Asia briefing notes

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Background

The International HIV/AIDS Alliance, with funding from USAID, has produced this series of practical briefing notes to assist policy-makers, programme managers, non-governmental organisations (NGOs), community-based organisations (CBOs), local government and communities to respond to the needs of children affected by HIV and AIDS in Asia. The briefing notes focus on how programmes can strengthen the capacity of children, families and communities. They do not include general information on HIV and AIDS, as this is available in many other publications.

These briefing notes are part of a set of seven, comprising six topics and an overview:

- Health and nutrition
- Livelihoods and economic strengthening
- Education and training
- Care and psychosocial support
- Social inclusion
- Protection

All these areas are important and should be considered together in an integrated response. Each briefing note introduces issues, and provides principles and strategies for guiding the response, while also offering examples of best practice from programme experience. The strategies reflect international good practice and the experience of people working with orphans and vulnerable children in Asia. Some of the guides also include case studies from Africa to illustrate practical actions that can be taken.

The briefing notes were developed through a highly participatory process, guided by an international advisory board. Initial content for the notes was developed during a workshop in Chiang Mai by members of the development group for Building Blocks: Asia, acknowledged above. This was then written up in English by a consultant, Kathy Attawell, and then translated, reviewed and revised in Cambodia, India and Thailand. These revised editions are available in Khmer, Hindi and Thai – see www.aidsalliance.org for more information on these publications. This English edition is based on the original content developed during the Chiang Mai workshop, with revisions and editions based on the country-level reviews and feedback from the international advisory board. Examples and case studies from this process have been noted as coming from a ‘Member of the development group for Building Blocks: Asia’.

1 The term ‘children affected by HIV and AIDS’ includes children living with HIV as well as those who have lost family members to AIDS or who are living in families or communities affected by HIV and AIDS.
Background

The briefing notes in Hindi

The briefing notes are all divided into three sections:

Introduction
This section explains the topic and how it relates to children and families affected by HIV and AIDS.

Issues
An outline of the impact of HIV/AIDS on children.

Principles and strategies
Guidelines and possible ways of taking action to strengthen support for orphans and vulnerable children.
Children affected by HIV and AIDS may be less likely to be enrolled in school or to attend regularly. Those at school may not perform to their potential because of grief and anxiety, isolation and withdrawal, or stigma and discrimination. Poverty means that many children come to school hungry, tired, sick and unable to concentrate, and therefore do less well. Some affected children drop out of school early because they need to earn an income to support themselves or their families, or to perform domestic chores, or because they lack adult support and guidance. This is particularly the case for girls. If children do not remain in school long enough to achieve basic literacy or qualifications, this affects their opportunities for future training and employment.

It is vital for children that they attend school and take full advantage of their education. As well as providing children with skills and qualifications, school is very important for their psychological development. School can provide children with a safe, structured environment, the emotional support and supervision of adults, and the opportunity to learn how to interact with other children and to develop social networks. Education, in and out of school, can also reduce children’s risk of HIV infection by increasing their knowledge, skills and opportunities.

Children also need vocational training, especially those who have to earn money. Providing children with vocational skills strengthens families’ economic coping capacity, and improves children’s life chances and future employment prospects.

This guide is divided into two sections:

Issues

This section considers how HIV and AIDS affects children’s education and explains why programmes need to pay attention to the education and training of children affected by HIV and AIDS, including their need for information about HIV and AIDS.

Issues include:
- Poverty
- Family responsibilities
- Poor health and malnutrition
- Psychological problems
- Stigma and discrimination
- Lack of adult support
- Quality and relevance of education
Introduction

Principles and strategies
This section outlines principles of programming to improve children’s education and training, and describes possible ways of taking action to address the educational needs of children affected by HIV and AIDS. Case study examples are included to illustrate practical uses of some of these principles and strategies.

Principle 1
Protect children’s rights to education

Principle 2
Improve access to education and training

Principle 3
Strengthen the role of schools

Principle 4
Support vocational training for children

Principle 5
Educate children about HIV/AIDS

HIV and AIDS reduce children’s access to education and to vocational training opportunities because of:

Schools provide children with a safe and structured learning environment
Poverty

Families living in poverty because of HIV and AIDS may not be able to pay school fees. Food or medicines may take priority over education. Even when schooling is free, families may be unable to afford the other costs of education, such as uniforms, books and travel to and from school. Sometimes poor children feel too ashamed to go to school because they do not have shoes or good clothes. Many affected children and children living without parents attend school irregularly or drop out of school altogether because they have to earn money to contribute to household income or to support themselves and their younger bothers and sisters.

As one child in Cambodia said:
“I want a school bag so that I can look like other children.” Another boy said:
“After my parents died the burden of responsibility for the family fell on my shoulders and I no longer have the opportunity to go to school.”
KHANA, 2000. Children affected by HIV/AIDS: appraisal of needs and resources in Cambodia

In one case, in Thailand, a 15-year-old boy stopped going to school after his parents died, despite being offered a scholarship, to earn money to support his nine-year-old sister and three-year-old HIV-positive brother.

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Family responsibilities

Children from affected families may miss school or drop out of school because they have to perform domestic tasks, help with farming or the family business, and care for sick parents or younger siblings. Children with many responsibilities may not have the time or energy to study. Girls especially are more likely to stop going to school to help at home, affecting their future life chances.
Issues

Poor health and malnutrition

Children from affected families and children with HIV may have frequent illness because of inadequate living conditions, poor nutrition, lack of parental care and access to health services. Children who are sick or malnourished are less likely to attend school. If they do go to school, they find it more difficult to concentrate and learn.

Psychological problems

The illness or death of a parent causes children severe emotional distress. They may experience anxiety, depression, low self-esteem and become isolated and withdrawn. These difficulties can prevent a child from attending school or performing well at school.

Stigma and discrimination

Children from affected families and children with HIV may miss or drop out of school because of teasing or rejection by other children, or the discriminatory attitudes of teachers. Sometimes they are denied access to education by school principals or teachers, or are forced to leave school because of the negative attitudes of parents of other children. In places where the education of girls is considered to be less important, girls are discriminated against when poor families have to decide which of their children can go to school. Similarly, adults who are looking after children whose parents are sick or have died may prioritise their own children’s education and not enrol the others into school.

One 12-year-old girl with HIV in Thailand discontinued her education when she was nine. She had been sick on and off and this prevented her from going to school regularly. Even though her health is now improved, she cannot go back to school because she is far behind other children of the same age. 

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Teachers may stigmatised children affected by HIV and AIDS
A study in Thailand found that in 20% of affected families, children were ostracised by other children and in several cases they were forced to leave school. Yoktri, M., 1999. AIDS: impact on children in Thailand

One example illustrates this very clearly. The grandmother of a nine-year-old girl told the school principal that the girl would no longer be coming to school because the family was moving to another province. In fact, they were not moving, but the grandmother wanted to protect her granddaughter from the discrimination she was subjected to at school. The girl had told her that the teachers and other pupils ridiculed her and called her names, that she was given separate utensils, and that other children would not share cosmetics with her when they were getting made up for a show. - Member of the development group for Building Blocks: Asia

In Cambodia, there have been cases of children denied access to school because of discrimination. In one case, a boy whose parents were living with HIV was denied access to school by the school principal. In another case, three children whose parents had died of AIDS were discriminated against by schoolteachers, who scolded and beat them in class. Because of this treatment, in addition to their financial difficulties, these children decided to stop going to school. Member of the development group for Building Blocks: Asia

Similar cases have been reported from India. In one example, two orphaned children were living with their grandparents. When news that their parents had died of AIDS spread through the community, they were thrown out of school. These children changed schools several times, but each time were denied education. Finally, a school agreed to admit them, but the parents of other pupils removed their children from school, so the authorities asked the children not to go to school and a teacher now tutors them at home. These children are denied the right to the same education as other children, to play and interact with other children of their own age. Johari, V., 2002. Silent cries and hidden tears, Lawyers’ Collective

Lack of adult support

Children without parents may lack adult support to make sure they go to school, encourage them and help with their schoolwork. Children whose parents have died may not have a birth certificate, which may be required to enrol at school, or an adult who can register them. Elderly carers and other relatives may be unable or unwilling to send orphaned children to school, expecting them to help at home or to work. In some places, children drop out of school because they do not have parents to protect them from beatings or abuse by teachers.

Quality and relevance of education

HIV and AIDS affect the quality of education if teachers are ill or have to care for family members who are sick. Poor-quality education discourages school attendance. Sometimes children do not go to school because the curriculum is not relevant to their daily lives or future employment prospects, or because school hours are not convenient for working children. If children miss school, there is often no help available to enable them to catch up. Children who find it difficult to keep up may lose their motivation to learn and drop out of school altogether. In addition, many children lack basic knowledge about HIV and AIDS because the subject is not taught in schools.
Protect children’s rights to education

Children have the right to education. Programmes for children affected by HIV and AIDS should promote children’s right to education and advocate for policies that support equal educational opportunities for all children.

Strategies for action

- Promote community awareness of the importance of education and encourage communities, families and guardians to take responsibility for educating the children in their care. Possible actions include:
  - Support adult literacy programmes, so that communities see the benefits of education.
  - Make families aware of children’s rights to education and their legal responsibilities.
- Advocate for the right of all children to receive an education, including children affected by HIV and AIDS, working children, street children and children from the poorest families.

The Convention on the Rights of the Child states that:

- Access to primary education is a basic need and the right of every child.

Non-formal literacy programmes can meet the needs of all the community
Principles & strategies

Highlight gender discrimination and the importance of girls’ access to education and vocational training. Possible actions include:
- Advocate for pregnant girls to be able to continue their education.
- Target support for school fees to girls’ education.
- Provide separate sanitation facilities at school for girls and boys.
- Encourage girls to learn subjects such as mathematics, science and technology.

Make sure that children themselves are aware of their right to education.

Identify community advocates to support and encourage children to enrol at school.

Improve access to education and training

Programmes should support strategies to increase children’s access to school and vocational training. This means addressing financial, practical and other barriers to education, such as stigma and discrimination. Efforts to increase access to education, such as paying school fees, should be sustainable. They should focus on strengthening the capacity of communities and families to support their children’s education.

Strategies for action

Strengthen the capacity of communities and families to support the education of children. Possible actions include:
- Establish pre-schools and nurseries to give children from poor families a good start before they begin primary school, and to enable their older brothers and sisters to attend school instead of having to look after the younger ones.
- Support initiatives to increase income.
- Provide practical support to grandparents who have to continue working to pay for schooling for their orphaned grandchildren.
- Encourage communities to work together to negotiate with schools and teachers and to advocate on behalf of children without parents.
- Provide practical support with caring for sick adults – for example, through home-based care programmes or community volunteer schemes – so that children who care for their parents can attend school.
In some rural areas of Cambodia, schools are only open for a short time and teachers demand private fees for afternoon teaching. If families cannot afford this, their children’s education suffers. Some communities have decided to join together to negotiate with teachers over fees, as well as advocating for exemptions on behalf of children with no adult or financial support. – Member of the development group for Building Blocks: Asia

Educating orphaned children puts considerable pressure on grandparents, as one 70-year-old man in Thailand described. “My son and his wife died of AIDS six years ago, leaving a four-year-old child with me. My wife and I still have to work in the field so we have enough money to send our grandchild to school.” – Help Age International, Thailand. Voices of older people from Asia-Pacific

The Khmer Buddhist Association helps children affected by HIV/AIDS to continue school, in addition to mobilising community resources to care for children and helping families with succession planning. For example, the Association has helped one widow to buy a small plot of land and to get treatment for her opportunistic infections so that she can be economically independent, and in the meantime has provided support for her two older children to return to school. – KHANA, 2000. Annual report

In Cambodia, CARE provides support to affected families to enable children to continue their schooling. One 13-year-old girl whose father had died of AIDS stopped going to school to care for her mother, who also has HIV and is chronically ill. With support from the CARE home care team, who help to look after her mother, she has been able to resume her studies. Another Cambodian NGO runs a hospice to provide care for very sick and dying people living with HIV/AIDS. This relieves the burden of care on children and ensures that they can go to school. – Member of the development group for Building Blocks: Asia

Communities can support fundraising schemes to provide school fees for children who can’t afford them

• Support the cost of educating children from very poor families and children without parents. Possible actions include:
  - Advocate with local education authorities and schools to reduce or waive school fees.
  - Access tuition fees provided by the government.
  - Accept labour or in-kind payments from households and communities.
  - Encourage communities to establish special funds to pay fees or other costs of schooling.
  - Set up donation schemes for school materials and equipment.
  - Establish scholarship schemes and bursaries through religious or private sector organisations.

• Reduce stigma and discrimination. Possible actions include:
  - Advocate to local education authorities for policies to protect children from discrimination by and in schools, and for the use of “universal precautions” (an approach to prevention in the workplace) to prevent transmission and reduce fear of infection.
Principles & strategies

- Educate school principals, teachers and parents about HIV/AIDS and sensitisise them to the situation of affected children and the impact of stigma and discrimination on children’s education and well-being.
- Train teachers so that they have the skills to tackle stigma and discrimination and can provide psychological and emotional support to children.
- Identify community volunteers to advocate with schools and parents on behalf of affected children.
- Educate schoolchildren about HIV and AIDS to reduce fears and misconceptions, and work with children to develop educational materials that promote positive attitudes towards people affected by HIV and AIDS.
- Provide counselling for children to help them talk about their feelings and to cope with negative attitudes.

Save the Children reported that schools played an important role in combating stigma in Thailand, changing attitudes towards people living with HIV/AIDS previously characterised by fear and discrimination, and in raising awareness in the community. However, despite a Ministry of Education policy on non-discrimination in school enrolment of children affected by HIV and AIDS, some teachers are still concerned about transmission of HIV and opportunistic infections. There are also teachers who have a clear understanding of HIV and AIDS, recognise the importance of access to education for infected and affected children, and who can play an important role in educating other teachers and communities. In Sanpatong District of Chiang Mai Province, for example, where there are many children affected by HIV/AIDS, one school has worked with community leaders, the local temple, groups of people living with HIV and the Foundation for Life Skills Development to educate teachers, pupils and community members about HIV and AIDS. They also organise counselling services and financial support for children affected by HIV and AIDS and their families, as well as for other families experiencing difficulties. These activities have helped to change attitudes, enabling affected children to attend school and live in the community without experiencing discrimination.

Save the Children UK Bangkok, 2001.
Thailand HIV/AIDS research and project proposal and Member of the development group for Building Blocks: Asia

In India, an NGO called CHELSEA organises remedial classes for children who have been unable to attend formal school.
Member of the development group for Building Blocks: Asia

- Offer flexible school hours so that children who work or have domestic responsibilities can attend.
- Establish evening or community schools, which make access to both formal and non-formal education easier.
- Develop distance-learning programmes.
Principles & strategies

- Provide children with psychological and emotional support to enable them to access and benefit from education. Possible actions include:
  - Identify trusted members of the community to take an interest in the education of children without parents and provide them with encouragement and support.
  - Identify individual teachers to take special responsibility for the progress of children without adult support.

The YWCA in India highlights the importance of providing children with more than just financial and practical support to enable them to take advantage of educational opportunities, especially if they have missed out on early education or come from poor or abusive families. One girl aged nine years, who was the sole breadwinner for her family, started attending the YWCA’s non-formal education and life skills classes. Although she was married off at the age of 11 to a man of 23 years, psychological and emotional support gave her the confidence to leave her husband and to start attending a residential school.

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Strengthen the role of schools

Schools can play an important role in providing information about HIV and AIDS, tackling stigma and discrimination, and supporting and referring children affected by HIV/AIDS to other services. They can promote life skills that help children protect themselves and provide the foundation for future employment. Programmes need to strengthen the role of schools in providing support to affected children and to encourage schools to offer education that is relevant to the daily lives of children and their families.

Strategies for action

- Encourage schools to teach topics that are relevant. Possible actions include:
  - Review the school curriculum to make sure it includes education on sexual and reproductive health, including HIV and AIDS.
Principles & strategies

- Promote the role of the elderly and use of local wisdom and knowledge.
- Integrate practical skills into teaching of subjects such as mathematics.
- Encourage schools to integrate community service into the curriculum; for example, providing labour for affected households.
- Involve communities in improving and evaluating education in schools.

- Train and sensitise teachers to work using child-centred approaches, provide counselling, emotional and practical support, and establish teacher support networks.

- Create a supportive and caring school environment, where children feel safe and secure and where their rights are respected. Possible actions include:
  - Encourage children to decorate classrooms with their own artwork.
  - Provide counselling space and areas for children who are sick.
  - Establish peer counselling and child-to-child programmes in schools to promote good communication.

- Encourage schools to develop strategies to continue the teaching of children who miss or drop out of school because they are sick or have domestic responsibilities. Possible actions include:
  - Offer catch-up lessons.
  - Organise community homework clubs.
  - Encourage peer support between children.
  - Mobilise retired or volunteer teachers to give children extra tuition.

- Promote links between schools and health and welfare services, and develop protocols to help teachers respond to the needs of affected children and to refer them for support.

- Use schools for a wider range of community activities, such as training and support for caregivers, community clubs, non-formal education for adults and children who have dropped out of school.

- Encourage parent–teacher associations and school management committees to support those affected by HIV and AIDS in the school – teachers, pupils and their parents.
Support vocational training for children

Children affected by HIV/AIDS often need to work to support themselves or their families. Some children work and go to school. Some children drop out of school to work. Providing children who are in and out of school with practical and relevant vocational skills is critical to help them become self-reliant and to improve their future employment prospects.

Strategies for action

- Support research to improve understanding of the needs of the job market in order to develop relevant training.
- Promote vocational training for children in the community. Possible actions include:
  - Link up with vocational training centres and develop training networks.
  - Involve community craftspeople and artisans in teaching practical skills.
  - Encourage religious organisations and the private sector to support vocational training; for example, using temples or business premises for training.
  - Use school infrastructure as vocational training centres for carers and out-of-school young people in the evenings and weekends.
  - Establish local apprenticeship schemes.

In Thailand, temples offer vocational training to children who are unable to complete school, developing skills in tailoring and traditional silversmithing. Member of the development group for Building Blocks: Asia

In Cambodia, temples offer vocational training to children and young people who do not finish school, helping them to develop skills; for example, in weaving, carpentry, traditional music and tailoring. Member of the development group for Building Blocks: Asia
In Thailand, UNICEF and the Office of the National Primary Education Commission are creating over 300 child-friendly schools (CFS) through active partnership between schools and communities. One step in the CFS process is developing school curricula that incorporate livelihood skills and life skills (see Principle 5) based on the needs of children and their communities. 

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In Cambodia, the NGO Friends, which works with street children, runs a training centre providing vocational training in 11 different trades. The centre also offers basic literacy and remedial classes to enable children to re integrate into the school system or to run their own businesses, as well as operating a mobile library to reach out to children on the streets.

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**Principles & strategies**

- Integrate vocational training into schools. Possible actions include:
  - Promote collaboration between teachers and parents willing to share vocational skills, through parent–teacher associations.
  - Integrate livelihood skills into the school curriculum.
- Provide vocational training, together with basic literacy skills.

**Educate children about HIV/AIDS**

Children need information and skills about HIV and AIDS to protect themselves from the risk of HIV infection. Schools can play an important role in educating children about HIV and AIDS, and need support to do this effectively. Other programmes are needed to target children who are not in school and who may be particularly vulnerable, such as street children.

**Strategies for action**

- Encourage school authorities to provide pupils with clear information about HIV and AIDS, and to include sexual health and life skills education in the school timetable.
- Provide HIV and AIDS education in schools to improve knowledge, promote positive attitudes and develop skills. Possible actions include:
  - Train teachers to teach about HIV and AIDS using participatory and active learning methods that are sensitive to the situation of affected and infected children.
  - Train NGOs, groups of people living with HIV and AIDS, religious and other organisations to run HIV and AIDS awareness sessions in schools.
- Involve communities and parents in planning HIV and AIDS education programmes for children, and use methods that are culturally appropriate and relevant to the daily lives of children and their families to ensure their support.
- Support peer and youth educators to conduct HIV and AIDS and life skills education with in-school and out-of-school youth.
Children in Thailand have described their desire to have accurate and relevant information. As one 12-year-old girl with HIV said “Children should learn about AIDS in school, so that they know what it is, how it can be transmitted and about its treatment and care.”

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In Cambodia, the Ministry of Education, Youth and Sport and the Ministry of Culture and Religion conduct training courses for Buddhist monks, linking the teaching of morality and ethics with non-discrimination towards people living with HIV/AIDS and affected children.

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India has developed “Learning for life”, a family health and life skills education module for schools, which covers adolescence and growing up, teenage pregnancy, sexually transmitted diseases and HIV and AIDS, resisting peer pressure, creating a supportive environment and removing discrimination.


In India, CHETNA is conducting a school HIV and AIDS education programme in 70 urban and rural schools. The programme runs advocacy workshops to orient school principals and parents and obtain their permission and support. It also provides training to build the knowledge and skills of teachers and peer educators in communication and the use of participatory methods. CHETNA uses simple tools for education – for example, aprons with pictures of male and female reproductive health systems – are used to teach children, since many lack basic understanding of reproductive physiology. CHETNA has also organised a children’s fair with the participation of all 70 schools, with stalls providing information and an exhibition of children’s art.

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- Develop tools that are appropriate for communicating with children, including suitable approaches and materials for out-of-school young people and children with low levels of literacy.

- Use the media to provide children and young people with accurate information about HIV and AIDS.

The Thai Coalition on AIDS Working Group on Children has collected media and tools for communicating with children about HIV and AIDS transmission, prevention, treatment and care, and about related issues such as coping with illness and loss and living positively. Together with experts in producing media for children, the Group is also developing and testing a range of additional communication tools for community use with younger and older children. These include a video of a puppet show about accepting people who are different and living together, an illustrated book explaining the facts about HIV/AIDS in a way that children can understand, a collection of books for children about hopes and values called the Box of Happiness, and adapted translations of illustrated books published in other countries that are appropriate to the Thai situation.

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Religious leaders involved in culturally appropriate HIV/AIDS education

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Also in Thailand, the Ton Gra Shaeng Youth Club in Srisaket Province has been conducting HIV and AIDS education in schools and communities since 2000. Youth leaders were trained by teachers and the AIDSNet Foundation to build their capacity in HIV and AIDS communication.

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In Cambodia, CARE is supporting community youth advocates to do outreach work on advocacy for protecting children’s rights by providing them with bicycles.

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In India, the Thoughtshop Foundation started a youth movement called Ignited Minds. Young people aged 15–25 years come together for workshops on HIV and AIDS, sexuality, life skills and peer support skills, and are trained to conduct outreach programmes in slums, schools and colleges using innovative and participatory methods. Thoughtshop also offers telephone and face-to-face counselling for children and young people who need support.

Thoughtshop has also collaborated with a local newspaper to include a regular ASK (AIDS Sex Knowledge) column, answering young people’s questions. The newspaper provided free space for the feature, which was published every three weeks and ran for over a year. Thousands of letters were received and answered. Thoughtshop also developed a 12-episode radio series on HIV/AIDS awareness for young people. The programmes had young people participating in a quiz based on a drama about various aspects of HIV/AIDS, along with a call-in facility for listeners to ask questions. Two years later, young people are still calling in with queries.

*Member of the development group for Building Blocks: Asia*
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Useful resources

Useful websites

www.child-development.org
Partnership for Child Development website includes background information on school health.

www.child-to-child.org
The Child-to-Child Trust website has many useful resources on children’s participation in health promotion.