United Nations Educational, Cultural and Scientific Organization (UNESCO)

Unified Budget Results and Accountability Framework (UBRAF) 2016-2021
## Contents

**Achievements**  

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Achievements

Introduction

UNESCO is a specialized agency of the United Nations. It was founded with the mission of contributing to peace and security by promoting international collaboration through education, science and culture. UNESCO is one of the six founding UNAIDS Cosponsors and is responsible for leading efforts to support countries in scaling up the education sector response to HIV.

UNESCO’s Strategy on Education for Health and Well-Being is aligned to the SDGs and the UNAIDS Fast-Track strategy, and establishes the goal of supporting the contribution of national education sectors to ending AIDS and promoting better health and well-being for all children and young people. It also outlines UNESCO’s two strategic priorities for health education in the 2016–2021 period; ensuring that children and young people benefit from quality comprehensive sexuality education that includes HIV education, and that all children and young people have access to safe, inclusive, health-promoting learning environments.

90-90-90 for children and adolescents

UNESCO helps children, adolescents and young people understand why testing and treatment is needed, and what it can and cannot do. In Botswana, Kenya, Lesotho, Namibia, Swaziland and Uganda, UNESCO worked with the Southern Africa HIV and AIDS Information Dissemination Service to develop and roll out an adolescent treatment literacy toolkit. Young people, teachers and the community receive support to share information and strategies on HIV prevention, care and treatment in a simple, entertaining way that promotes the rights and dignity of young people living with HIV.

In Zimbabwe, UNESCO supported the development of the Zvandiri mobile app, which enables young people living with HIV to share information, track adherence and connect with services at health facilities.

UNESCO’s work contributes to the 90-90-90 targets by promoting health literacy, which encourages health-seeking behaviour, including testing and adherence to treatment for HIV and STIs. It supports measures that keep young people living with HIV in school, such as creating safe spaces and referrals to youth-friendly health services. In 2016, UNESCO collaborated with Israel’s Mount Carmel International Training Centre to train more than 50 specialists on how to prevent violence in schools and discrimination against children and young people living with HIV. In Brazil, UNESCO worked with young civil society representatives from the National Network of Adolescents and Young People Living with HIV and AIDS to promote a strengthened national response for young people. In Haiti, UNESCO helped the education ministry create health clubs in 100 schools to instruct 4000 young people on hygiene and wellbeing, SRH and HIV prevention.
Combination prevention

UNESCO is leading efforts to update the *International technical guidance on sexuality education*. A global technical stakeholder consultation was hosted in October 2016 with more than 60 participants, and a comprehensive sexuality education (CSE) advisory group established, including Cosponsor partners such as UNAIDS, UNFPA, UNICEF, UN Women and WHO. The updated guidance, scheduled to be published in 2017, reflects new evidence and good practices, and reinforces focus on areas such as early pregnancy, puberty and gender equality.

In Africa, 30 countries have been trained by UNESCO to integrate core HIV indicators in their education management information systems (EMIS). Of these, nine have completed the integration, those being Botswana, Côte d’Ivoire, Ghana, Lesotho, Namibia, South Sudan, Swaziland, the United Republic of Tanzania and Zambia. Namibia and Zambia are now collecting and reporting EMIS data.

UNESCO supported the strengthened capacity of eastern and southern African countries to provide quality CSE following the 2013 ESA Commitment, which was reaffirmed through the ministerial call to action, *Let’s Step Up and Deliver*, at the International AIDS Conference. Progress against 2015 targets indicate 15 of 21 ESA countries provide CSE in primary and secondary schools, and 18 have CSE teacher training programmes (training courses reached 421 200 teachers). In the United Republic of Tanzania, more than 8500 pre- and in-service teachers received training, and 13 000 CSE and HIV-prevention materials were distributed in 1000-plus schools, which should benefit 8.6 million school-age children, 49% of them female.

In West and central Africa, a regional conference for representatives from 17 countries resulted in a call for action to strengthen CSE and access to SRH services, which has been followed up in nine countries. Information and communications technology (ICT) tools were used in 277 training institutions to deliver CSE to more than 92 000 students in five countries. Côte d’Ivoire and Togo applied the sexuality education review and assessment tool (SERAT) to national programmes, and a teacher training guide was published in partnership with ministries of education in Cameroon and Chad.

In partnership with UNFPA and UNICEF, CSE implementation reviews in China, India and Thailand collected data from more than 18 500 students, 1180 teachers and principals, and 578 schools. In Latin America and the Caribbean, UNESCO technical assistance in Brazil, Guatemala, Haiti, Jamaica and Peru strengthened teacher training and advocacy for CSE.

Youth health and education needs

As part of a Joint Programme with UNFPA and UN Women to empower adolescent girls and young women, UNESCO received a five-year grant from the Republic of Korea for projects in Mali, Nepal and the United Republic of Tanzania to expand access to education, CSE and
safe learning environments. In five districts of Nepal, for instance, UNESCO is mainstreaming CSE and gender-based violence prevention in school policies and teacher training, and promoting out-of-school services, which should help more than 300 000 girls.

In 2016, UNESCO strengthened the education sector response to early and unintended pregnancy, a key concern and one frequently resulting in girls leaving school, stigma and discrimination. Global guidance developed with UNFPA and WHO helps stakeholders identify ways to prevent early and unintended pregnancy, and ensure pregnant and parenting girls can continue their education in supportive environments. Workshops were held in Johannesburg in 2016 with national programme officers from 13 African countries, and in Dakar in early 2017. In South Africa, technical assistance from UNESCO is helping the Department of Basic Education develop a learner pregnancy policy, following a recent HIV, STIs and TB policy.

UNESCO is helping countries scale up puberty and menstrual hygiene education. Poor school facilities and understanding contribute to absenteeism and stigma, with studies showing that in some countries more than half of adolescent girls do not know what menstruation is when it first occurs. In 2016, a UNESCO good policy and practice document on puberty education was translated into Spanish and presented at a consultation with eight countries from central America, and Cuba and Dominican Republic.

In Côte d’Ivoire, Ghana, Nigeria and Togo, UNESCO collaborated with ministries of education, youth and culture to develop culturally appropriate classroom activities on gender and diversity. In China, UNESCO researched CSE and access to SRH services for young people with disabilities, with a workshop planned for 2017 to share findings.

**HIV services for key populations**

UNESCO, in collaboration with UNODC and WHO, led development of a good practice and policy booklet on education sector responses to substance use. A follow-up to a joint publication and 2015 expert group meeting in Istanbul, it will be published in 2017. The work was presented at the UN General Assembly Special Session (UNGASS) on the world drug problem, and at a meeting in June 2016 organized by WHO and the Government of Turkey on preventing substance use among young people. The guidance is particularly relevant to adolescents and young people from key populations.

Similarly, UNESCO’s work to prevent violence in schools on the basis of sexual orientation and gender identity/expression (SOGIE) benefits all students, but especially those identifying as lesbian, gay, bisexual, and transgender (LGBT), who are more vulnerable to violence and bullying, and more likely to miss classes or drop out of school as a result. Combating SOGIE-related stigma and discrimination in schools also helps dispel myths about HIV.
UNESCO also works to empower young people living with HIV and combat stigma and discrimination. In the Congo, UNESCO improved the effectiveness of more than 300 adult educators and 260 youth leaders to teach CSE, who in turn reached more than to 25,000 out-of-school young people. This included 285 adolescent refugees who sell sex, who were provided with CSE and toolkits to help them re-enter school.

Gender-based violence

In 2016, UNESCO focused on strengthening the education-sector response to school-related gender-based violence, including on the basis of sexual orientation and gender identity/expression. In December, UNESCO and UN Women launched international guidance, developed under the auspices of the global partners working group on school-related gender-based violence, co-chaired by UNESCO and United Nations Girls’ Education Initiative (UNGEI). A workshop for UNESCO staff in Africa familiarized them with the guidance, with the result Zambia trained government personnel on school-related gender-based violence, India carried out an assessment, and in the Russian Federation, a curricula and teaching toolkit was introduced in Chelyabinsk province, one of the country’s most HIV-affected regions. UNESCO’s Beirut office undertook a desk review on school-related gender-based violence in nine Middle East countries, and a case study in State of Palestine. In the Democratic Republic of the Congo, UNESCO supported a magazine for young people on the response to HIV and gender-based violence, and discussion groups were organized at six higher education institutes. In Asia and the Pacific, UNESCO collaborated with Plan International, UNICEF, UNGEI and UN Women to publish the Connect with Respect curriculum tool to help teachers address school-related gender-based violence, which reached more than 15,000 people via a social media campaign.

With support from the Netherlands and Norway, an international ministerial meeting on education-sector responses to SOGIE-based violence was held in May 2016, resulting in a call for action that has been endorsed by 56 countries. A report was launched, and a video and infographic released under #OutInTheOpen, which trended on Twitter and generated an audience of 20 million. In Asia and the Pacific, research was undertaken with education ministries from Indonesia and Viet Nam, and UNESCO and UNDP co-convened national consultations in China, Indonesia, Philippines and Thailand. In Thailand, UNESCO is also collaborating with Plan International on a three-year programme that will benefit more than 5,000 students, parents and teachers. In Latin America, a publication and teacher’s guide on SOGIE violence in schools was produced.

Technological and service delivery innovations

As part of efforts to scale up quality CSE, UNESCO is exploring several innovative media and ICT approaches. In the ESA region, work has been continuing to identify pragmatic, cost-
effective approaches to ICT-based education, including teacher training, with more than 2000 in-service teachers completing an online CSE course. In the WCA region, ICT-based training tools were used in 277 training institutions to deliver CSE to 92,000 students in five countries. In both regions, the online tools were complemented with resources and a teaching guide. UNESCO also supported teacher training on CSE in Argentina through a 180-hour online course.

In the EECA region, UNESCO and UNAIDS collaborated on several media initiatives, including four live-streamed talk shows with psychologists and celebrities addressing parent-child relationships, puberty, sexuality, CSE and HIV prevention. To help teachers deliver HIV education, UNESCO and UNAIDS also collaborated on a HIV video lesson. UNESCO developed two ‘edutainment’ videos that aired on the Nowchpok YouTube channel and were viewed by more than 550,000 young people, and produced a video cartoon on HIV prevention, transmission, testing and treatment that was viewed by more than 100,000 people in three days.

The media has also been used widely in other regions. In ESA, advocacy tools to strengthen community and parent engagement have helped 12 countries, and a radio and TV series on CSE, SRH and HIV prevention has reached more than five million people. In the Democratic Republic of the Congo, UNESCO supported 24 radio and 48 TV broadcasts aimed at young people on HIV prevention, CSE and SRH.

**Decentralization and integration**

There is growing recognition of the need for a comprehensive approach to coordinating education and health. Integrating health, including HIV, into the education agenda, and vice versa, are key objectives for UNESCO. The Global Education First Initiative identifies health as one of the core outcomes of good quality education, while the 2015 Incheon declaration (which sets out a vision for education for the next 15 years) states that quality education enables citizens to lead healthy lives. This relationship is a central focus of UNESCO’s new strategy on education for health and well-being, and the cross-cutting approach that contributes to SDGs 3, 4 and 5.