Evaluation of UNESCO’s Response to HIV / AIDS

Kim Forss
Stein-Erik Kruse

April 2004

The views and opinions expressed in this document are those of the author and do not necessarily represent the views of UNESCO or of the IOS. The designations employed and the presentation of material throughout this document do not imply the expression of any opinion whatsoever on the part of UNESCO concerning the legal status of any country, territory, city or area of its authorities, or concerning its frontiers or boundaries.
Foreword

A thematic evaluation of UNESCO’s action to fight HIV/AIDS was included in the evaluation plan for the Approved Programme and Budget 31 C/5. The Office of Internal Oversight (IOS) in UNESCO prepared the terms of reference for an external evaluation with the overall purpose of learning lessons that could be useful for improving and strengthening UNESCO’s future response to HIV/AIDS. The evaluation should contribute to a culture of learning in UNESCO and to improved performance and decision-making.

The Centre for Health and Social Development (HeSo) in Norway was selected as the evaluator after an international competitive process. HeSo suggested a team of consultants with a broad professional background and experience: Kim Forss and Stein- Erik Kruse were team leaders for the evaluation, co-authored the final report and carried out case studies in Vietnam, Thailand, Senegal, Brazil and Jamaica.

Three other team members provided important contributions to the final report. Marilyn Lauglo visited the World Bank and USAID in Washington and UN agencies in New York to obtain their views on UNESCO’s response to HIV/AIDS. She also visited the field office in Nairobi as part of preparing a thematic study on gender and equity. Clara Fayorsey carried out a country study in Ghana and was also responsible for a thematic study on the cultural aspects of HIV/AIDS. Manolo Sanchez visited Namibia, Angola and Mozambique and prepared a regional report from Southern Africa. The work started in September 2003 and the report was handed over to UNESCO in April 2004.

We would like to express our appreciation of the support from Edle Tenden and Geoffrey Geurts in IOS. They provided excellent assistance in preparing all our visits and interviews in Paris and to eleven different countries. They also took active part in two of the country visits.

UNESCO staff shared willingly and openly their views with us both at Headquarters, in the Institutes and Field Offices. The objective of the evaluation could not have been reached without their participation. Our aim is that this report should provide the information, reflection, and recommendations required for a stronger response to HIV/AIDS from UNESCO in the future.

Stein-Erik Kruse  
stein.erik.kruse@heso.no

Kim Forss  
kim.forss@mailbox.swipnet.se
# Table of Contents

Foreword ................................................................................................................. i  
Executive Summary ................................................................................................. iii

1. INTRODUCTION ........................................................................................................ 1  
   1.1. Background and Purpose .............................................................................. 1  
   1.2. Evaluation Approach ..................................................................................... 1  
   1.3. Methods .......................................................................................................... 2  
   1.4. Limitations ....................................................................................................... 4

2. POLICY RESPONSE .................................................................................................. 6  
   2.1. UNESCO’s Roles as a Specialised Agency ...................................................... 6  
   2.2. A Brief History of Activities ........................................................................... 8  
   2.3. Global Strategy, Programme and Budget on HIV/AIDS .............................. 11  
   2.4. The Preventive Education Strategy ................................................................. 13  
   2.5. Financial Commitment .................................................................................... 15  
   2.6. Concluding Remarks ...................................................................................... 20

3. IMPLEMENTATION: FROM POLICY TO RESULTS ............................................... 21  
   3.1. What Affects Results? .................................................................................... 21  
   3.2. UNESCO’s Roles in Practice .......................................................................... 21  
   3.3. Human Resources ............................................................................................ 29  
   3.4. Strategic Planning Instruments ..................................................................... 33  
   3.5. Structure of HIV/AIDS Coordination ............................................................ 35  
   3.6. Processes of HIV/AIDS Coordination ........................................................... 37  
   3.7. Decentralization ............................................................................................. 39  
   3.8. Concluding Remarks ...................................................................................... 41

4. PARTNERSHIPS ....................................................................................................... 42  
   4.1. Partnership at the National Level .................................................................. 43  
   4.2. Partnership at the Regional Level .................................................................. 48  
   4.3. Partnerships at the Global Level ..................................................................... 50  
   4.4. Concluding Remarks ...................................................................................... 52

5. RESULTS ................................................................................................................ 54  
   5.1. Methodological Issues .................................................................................... 54  
   5.2. Overall Findings .............................................................................................. 55  
   5.3. Roles and Results ............................................................................................ 60  
   5.4. Results Based Management .......................................................................... 64  
   5.5. Concluding Remarks ...................................................................................... 66

6. QUALITY AND CONTENT ..................................................................................... 68  
   6.1. Gender and Equity in UNESCO’s Response to HIV/AIDS ........................... 68  
   6.2. Quality Aspects on Preventive Education Activities ...................................... 72  
   6.3. The Cultural Approach to HIV/AIDS ............................................................ 77  
   6.4. Concluding Remarks ...................................................................................... 82

7. CONCLUSIONS AND RECOMMENDATIONS .................................................. 84  
   7.1. Conclusions .................................................................................................... 84  
   7.2. Recommendations .......................................................................................... 94

Annex 1: Terms of Reference ................................................................................. 99  
Annex 2: People Met ................................................................................................. 109  
Annex 3: References ................................................................................................. 117  
Annex 4: Acronyms .................................................................................................. 119
Executive Summary

Background
UNESCO decided to commission an external evaluation of its response to the HIV/AIDS epidemic in 2002. The purpose was to analyse results, assess performance, and develop recommendations for future activities. It was to be a participatory exercise, which should contribute to capacity building in evaluation.

The evaluation builds on data from Thailand and Vietnam in Southeast Asia; Mozambique, Angola and Namibia in Southern Africa; Ghana and Senegal in West Africa; Jamaica and Brazil in Latin America and the Caribbean; and Lebanon in the Middle East. Kenya was visited as part of a thematic study on gender issues. The organisational topics of strategy formulation, budgeting, monitoring and evaluation, decentralisation and coordination were analysed based on the field visits and on interviews at UNESCO Headquarters in Paris.

The evaluation team conducted some 300 interviews with UNESCO staff, government representatives in the above mentioned countries, UN partner agencies, civil society and stakeholder groups concerned with UNESCO’s HIV/AIDS activities. The evaluation perused documents in UNESCO and outside, and was also able to draw conclusions from observing activities being implemented.

UNESCO’s Response to the HIV/AIDS Epidemic
The first phase of activities lasted from 1987 to 1996. UNESCO developed a preventive education plan of action together with WHO. The Venice Appeal was a plea for action and the first international appeal to fight HIV/AIDS in Africa strengthening preventive education, training and scientific research. Some of the Field Offices initiated activities in curriculum development with ministries of education, but they were few and far between. HIV/AIDS was, at the time, not an organisational priority and received little funds.

The second phase lasted from 1997 to 2000. During this time UNESCO’s Sectors showed an increasing willingness to work with HIV/AIDS issues. A Coordinator and Focal Point for UNAIDS were appointed in the Science Sector, intersectoral cooperation was introduced and professional networks emerged. UNESCO’s Field Office in Brazil established itself as an important partner to the government in Brazil, and became the implementing agency for the government’s programmes in HIV/AIDS prevention.

The third phase started in 2001 and is ongoing. An organisational strategy was formed, the Coordinator moved to IIEP and HIV/AIDS focal points were established in Field Offices and in Headquarters sections. A network of professionals from different parts of the Organisation was consolidated. Some Field Offices initiated national and regional activities and the budget allocations increased.

The total amount that UNESCO devoted to HIV/AIDS activities in 2004 and 2005 is approximately US$ 1.1 million from the regular budget (likely a slight underestimation), and about 7.4 million from UNAIDS UBW. There were also extrabudgetary funds, but it is uncertain how much. UNESCO had a poor track record of spending allocated funds. There are no certain figures of global budget allocations or global spending. Funds are raised at national and regional level that are not shown in aggregate statistics. The government of Brazil, with funds from the World Bank, as well as from federal, state and municipal authorities, channel around US$ 130 million through UNESCO in 2004 to administer its HIV/AIDS projects. There is a surprising anomaly between the funds available to UNESCO in Brazil, and the funds available for HIV/AIDS activities in the rest of the world.

Results
The results are varied, and they must be interpreted in the light of the small number of activities and scarce financial resources. Nevertheless, there was a verifiable impact in the countries where UNESCO developed sizeable programmes. Brazil is the outstanding case, where UNESCO can be credited with its share in having reduced the spread of the epidemic and decreased the numbers of people falling ill and dying from HIV/AIDS. It is one of the success stories in the global struggle against HIV/AIDS.
Other UNESCO activities had an impact in shaping public opinion through culture and media.

Even if it has been shown that UNESCO can play a significant role and can initiate worthwhile activities, the response was hampered by the lack of resources. Consequently many activities have been too small to generate commitment, or they were isolated events that could not be sustained. It is particularly regrettable that UNESCO’s activities appear to have been less significant and less successful in the countries that would have needed the support most, that is, in Africa south of the Sahara.

It is useful to distinguish between the normative and operational roles of UNESCO. The normative roles can be specified as: (1) laboratory of ideas; (2) clearing house for information; (3) setting norms and standards; and (4) advocacy. The operational roles are: (5) capacity development; and (6) that of the implementing agency. It is only in Brazil that UNESCO had the role of the implementing agency, and it is an experience and opportunity that is not likely to be replicated elsewhere. Apart from that, the most successful activities were in advocacy and clearing house for information. The evaluation found less evidence of impact from the other roles. Capacity development is a special case, as those activities often were combined with advocacy and information sharing. It takes longer to see an effect, and in the end, the results would depend on many other factors than UNESCO activities.

Explaining Results
Among the features that explain why UNESCO has created an impact in some countries and regions (and not in others), the evaluation singles out:

- Strong partnerships, in particular with civil society organisation.
- Development of links with UN agencies, forming patterns of collaboration and functional division of labour with them.
- Close relationships to Ministries of Education, often with the help of UNESCO National Commissions.
- Leadership and commitment from UNESCO representatives in field offices.
- Personnel resources in the field offices, supplemented with high level, external expertise.
- Developing a programmatic response at country and regional levels.

It is worth noting that the response pattern is decentralised, and hence the activities, priorities and results vary a lot between one Field Office and another. Practice does not reflect an organisational response as such. There is not much evidence of coordination between Field Offices, or between Field Offices and Headquarters, nor were the positive results the evaluation found created by such organisational mechanisms.

The evaluation identifies factors that impede activities, or that had a high opportunity cost that detracted the Organisation from achieving its objectives in combating HIV/AIDS. Among these were:

- Cumbersome strategic processes that consume resources while they add little value to practical management.
- Low visibility of HIV/AIDS as an organisational priority.
- A contested expression of strategic intents and no clear focus.
- Lack of gender sensitivity; no gender specific needs assessment, no gender specific program components, and seldom gender disaggregated data for monitoring, evaluation and follow up activities.

It is necessary to focus on results – these cannot be achieved without a consistent high quality of outputs. Many products (publications, workshops, seminars, etc.) were of a high quality, others could easily be improved, but the evaluation also found work of a low standard.

UNESCO’s structures and processes of coordination have been unusual, in that it is the International Institute of Educational Planning that has coordinated the work of sectors. It has been a useful solution, given the organisational constraints some years ago. But it has put an emphasis on the structural processes of coordination, with too little attention given to the process of coordination, and to the end result - coordinated activities.
The response to HIV/AIDS must be understood as part of the overall management systems. In some cases these have been facilitating, as for example the processes of decentralisation. In no case has the evaluation found that the response at national or regional levels has been constrained by centralised management practices (which frequently happens in large international bureaucracies). In other cases the management systems have been an obstacle, as for example in respect of the strongly vertical lines of communication and reporting. These vertical structures make it difficult to develop an effective response through teamwork and around the concept of roles, and these structures are not conducive to organisational learning.

**Recommendations**

The evaluation concludes that UNESCO can respond effectively and can make a difference in the fight against HIV/AIDS. The response has been late and it is still rather insignificant in monetary terms (apart from in Brazil), but as it can work effectively it should be strengthened. The evaluation recommends five high priority decisions, each with specific, measurable and time bound targets:

- Increase monetary allocations to make HIV/AIDS a real priority.
- Recruit and maintain human resources with HIV/AIDS competence to implement activities.
- Develop personnel resources throughout the organisation to facilitate cross-sectoral approaches.
- Establish HIV/AIDS as a cross-cutting theme in the organisation.
- Recruit a senior coordinator and renew the design of the coordination function.

While the above are top priorities to develop the response to the epidemic, the evaluation also recommends that UNESCO:

- Develop and emphasise the gender perspective in all HIV/AIDS activities.
- Develop the current strategy as a tool for managerial decisions on resource allocation, setting targets and objectives.
- Clarify the programme profile, in particular to integrate activities in a framework where that has not yet happened.
- Set priorities in terms of geographic areas and sectors.
- Elaborate and apply the normative and operational roles of a specialised agency to the objectives and core tasks of the HIV/AIDS strategy.

A number of other useful activities can be developed; many are outlined in the text of the evaluation and others in conclusions and recommendations. UNESCO may suffer from too many priorities as an organisation, which means that nothing has real priority. The recommendations above would put HIV/AIDS activities on UNESCO’s map forcefully, and would enable it to mobilize internal commitment and external support, and assist the Organisation take its proper place among the agencies that lead the struggle against HIV/AIDS.
1. INTRODUCTION

1.1. Background and Purpose
The imperative to combat HIV/AIDS is compelling. Over the past few years, the international community has responded through a number of commitments at the highest level of the international agenda. One of the Millennium Development Goals is to halt and begin reversing the spread of HIV/AIDS by 2015. The 2000 World Education Forum in Dakar acknowledged the threat of HIV/AIDS and called for education programmes and actions to combat HIV/AIDS as a matter of urgency. The United Nations General Assembly Special Session (UNGASS) on HIV/AIDS set in place a framework with targets for countries to attain. In 2002, UNAIDS produced a framework strategy to focus attention on what is known and what needs to be known about scaling up the response to the epidemic through education.

Education has a key role in the international response to the epidemic. Strengthening education systems is one of the critical components in the fight against HIV/AIDS. HIV/AIDS is also impacting on education systems as teachers and other key personnel are dying, becoming ill, and taking on added responsibilities in their homes and communities. By virtue of being the UN agency for education, UNESCO has an important role to play.

UNESCO has been dealing with the issue of HIV/AIDS since the mid 1980s. Since 1996, UNESCO has been one of the cosponsors of UNAIDS. In April 2000, the Executive Board stressed that UNESCO can make a unique contribution to the fight against AIDS. Being a UNAIDS cosponsor commits UNESCO to support an expanded response to the epidemic. In June 2003, UNESCO took over the Chair of the Committee of Cosponsoring Organisations (CCO). While UNESCO has been dealing with the issue of HIV/AIDS since the mid 1980s, its efforts have evolved over time. To shape an effective response for the future, it is necessary to assess and learn from experience. Thus, a thematic evaluation of UNESCO’s action to fight HIV/AIDS was initiated. The objectives were to address:

- The mandate, strategies and objectives of UNESCO’s action and their relevance to local needs;
- The mode of implementation, and the effectiveness of the delivery of services;
- Coordination and partnership with other agencies; and
- Main results, their impact, sustainability and added value to the principal beneficiaries and users.

The evaluation should stimulate a culture of learning and improve performance by providing knowledge for decisions. The terms of reference are enclosed in Annex 1.

1.2. Evaluation Approach
The evaluation of UNESCO’s HIV/AIDS activities is a complex task. The evaluation has to consider different levels of activities (from global to local). Causal chains between activities and effects depend on several events and influences, as there are many actors
involved and as strategies have varied over time. In order to handle these complexities, the evaluation defined a model that describes the main fields of analysis of the evaluation and how these relate to each other. The purpose of the model was to organise the questions and issues raised and relate them to each other, as well as the empirical work. The model and approach were presented in an Inception Report in October 2003.

The terms of reference specify that the evaluation should be participatory and that it should contribute to capacity development in the field of evaluation in UNESCO. An evaluation is a process and the building blocks can be identified as:

1. the formulation of questions; that is, what should the evaluation find out, and what are the criteria used to assess worth or merit when responding to these questions?
2. decision on which methods will be used to find out the answers to the questions formulated in the previous step, how and from whom information will be solicited, and by whom?
3. the collection of data; that is, distribution of questionnaires, observation of field activities, interviews - with individuals and focus groups,
4. the compilation of data, analysis, and the development of conclusions – answers to the evaluation questions,
5. the utilisation of the findings for decision-making purposes and to promote organisational learning.

Exactly how participatory an evaluation is would be determined by who takes part in the different steps above. If all stakeholders are involved in all phases, we would have a highly participatory process, but also one which might be rather cumbersome and inefficient. In most cases, there is a division of labour, not least because there is a need to apply special skills in the use of scientific methods. The evaluation team worked closely with the Internal Oversight Service (IOS) and with the HIV/AIDS evaluation task force. During country visits, personnel at Field Offices were invited to be involved in interviews and in the interpretation of data. The team leaders reported back to the task force several times. However, there has been a clear division of labour, where the assessment relies on the evaluation team’s interpretation of events and facts.

1.3. Methods

The major components in the evaluation were country and regional studies, organisational analysis, thematic studies of programme areas and cross-cutting themes. Irrespective of whether UNESCO activities are global, regional or national, the outcomes must be traced in a national environment, where impact is created. The major share of the evaluation resources was used to describe, analyse and assess outcomes and impact in Member States. The following criteria were used to select countries:

- countries with different kinds of UNESCO presence; Regional Bureau, Cluster Office, National Office or no office at all;
- countries where UNESCO has played different roles, for example in advocacy, normative and standard setting activities, as well as in technical project and programme implementation;
- in the group of countries selected, we should not overlook activities of any UNESCO Sector;
- the countries should have a high prevalence of HIV/AIDS, or be in the risk zone of the epidemic spreading more in the near future;
- geographic and cultural diversity; presence of major world religions;
- and finally, a focus on countries in Sub-Saharan Africa and on countries where preventive education activities have been prevalent.
After consultation with the different Sectors and Services, the following countries were visited:

1. in Asia: Thailand and Vietnam;
2. in Southern Africa: Angola, Mozambique and Namibia;
3. in West Africa: Ghana and Senegal;
4. in Latin America and the Caribbean: Jamaica and Brazil; and
5. in the Arab States: Lebanon.

One more country was visited as part of a thematic study on gender and equity, namely Kenya. Of these eleven countries, six are in Sub-Saharan Africa, so we have a clear emphasis on that region, but we have also a high degree of variation in respect of all other selection criteria. Each country visit was prepared by looking at web-presentations of the Field Office, analysing plans and strategies, project documents and activity reports, monitoring and evaluation reports, and other documents. At the sites we interviewed UNESCO staff and consultants, government representatives (mainly ministries of education and health), UN partners and bilateral funding agencies, universities and research institutes, as well as non-governmental organisations (NGOs) and private businesses. At times we had an opportunity to join in seminars and workshops, or were invited to management meetings.

The evaluation carried out three thematic studies to analyse whether work related to HIV/AIDS was soundly and professionally conceived, at the forefront of research, relevant and significant. These discuss whether UNESCO products (working papers, education material, policy statements, databanks, best practice examples, etc.) are of high quality. The evaluation could not cover all of UNESCO’s five Sectors. Our first choice was to assess the quality of UNESCO’s work in the field of preventive education. UNESCO’s overall strategy is based on preventive education, so it was an obvious choice. The second field chosen for a thematic study was culture. UNESCO has a substantial programme on cultural approaches to HIV/AIDS, and is the only organisation that has brought the field of cultural studies to bear on the subject. Furthermore, the evaluation did a specific study of how gender and equity issues are handled in HIV/AIDS related activities. This was a cross-cutting study, covering all projects and programmes, as well as policies, strategies and organisational aspects of HIV/AIDS work. The thematic studies were based on data from all country studies.

UNESCO’s response to the HIV/AIDS epidemic must be understood in the context of the mandate of the Organisation, its other priorities, and its overall management, such as systems of planning, coordination, human resource development, decentralisation – and the ongoing reform of all of these. The evaluation includes analysis of the broader organisational setting in which the HIV/AIDS related activities take place. It is not a comprehensive organisational analysis of UNESCO, but it tells how outcome and impact are influenced by organisational structures and processes that are general – not specific to HIV/AIDS.

The evaluation relied primarily on interviews and documents reviews, supplemented with observation. Document reviews were essential for both the global analysis and
regional/country reports. Much of the output of the Organisation is reflected in writing, and many of the processes described verbally. The overall patterns of HIV/AIDS related activities are recorded in databases and project documents, where goals are formulated and where the rate of progress in implementation can be followed through analysis of financial data. We refer to documents analysed in footnotes through the report, and the reader finds a list of documents consulted in Annex 3.

Qualitative information concerning how and why things are done was also needed. This was only available in people’s minds and only accessible through qualitative interviewing. Interviews were our main source of information; a rough estimate is that 60% of our data came from interviews and 20% from observation and document reviews respectively. In total, we completed around 300 interviews; an average of 20 interviews in each of the eleven country studies, plus interviews with UN partners in Geneva, New York and Washington, D.C., meetings with UNESCO Delegations in Paris, and finally meetings at UNESCO Headquarters. A list of interviews is enclosed in Annex 2. We used structured guidelines for all interviews.

1.4. Limitations
There are many threats to the reliability and validity of the data. The evaluation presents conclusions that refer to UNESCO’s global response to the epidemic. These findings should be treated with caution as:

- the conclusions are based on a sample of eleven country visited, and even if the countries chosen reflect a variety of experiences and modes of operation, there must be variations that the evaluation did not cover – impact may be higher as well as lower in many countries;
- the analysis of impact builds on the situation at present, but impact is often the result of complex non-linear processes that require longer time to be properly assessed and understood in the full;
- assessment focuses on formal organisational processes and management systems; but UNESCO like other agencies possesses an organisational culture, informal systems, traditions and practices that cannot be assessed fully in a short period of time.

At a more detailed level, this evaluation must be understood as a study completed in a short period of time (although long and well-funded compared to many other studies), through decentralised research operations, and with team members from a variety of professions. The advantages were that this brought different competencies and experiences to the study, but the disadvantages were that the basis for value judgement may not be uniform, that the mode of interviewing and the ensuing response could vary, and thus that the comparability of efforts could be low.

The evaluation copes with these problems in three ways. First, there was a joint development of the structure of inquiry. Second, team members conducted the first interviews at UNESCO Headquarters together, in pairs or in smaller groups. Third, team members read and commented each others’ studies. Fourth, all country case studies were sent back to the Field Offices to make sure that the analysis and conclusions were right, not only as seen by the evaluation team member, but also by the evaluated organisation.
The main difficulty was that UNESCO has many Sectors and a wide mandate. UNESCO’s response must be understood in relation to its overall task and what Member States want the Organisation to do. Member States expect much and are not always clear on priorities. This is best expressed by saying that there are many priorities. The evaluation strikes a balance between high expectations of a response to the HIV/AIDS epidemic and realistic ambitions in view of all the other tasks the Organisation faces. In light of the challenge of the epidemic, the evaluation takes the position that expectations and ambitions must be high and priorities real irrespective of other demands on the Organisation.

The evaluation team presented a draft report to UNESCO on 1 April 2004, and we were glad that this draft was widely read and commented on. In this final report, we have corrected errors, elaborated some arguments, and cut back others. There were no inputs that suggested the overall conclusions and recommendations should be different. However, there were many ideas on activities, country experiences, etc. that could be reflected in the report. As we mentioned above, the evaluation gathered data through a sample of country visits and in each country, through samples of activities. We have no comprehensive coverage, and were never meant to have one. As an external evaluation team, we find it difficult to add or to recount experiences and activities that we have not ourselves been witness to or inquired about. Thus, we have not incorporated in the final report suggestions made by different parts of the Organisation concerning such activities.
2. POLICY RESPONSE

2.1. UNESCO’s Roles as a Specialised Agency

The specialised agencies of the UN were established to be focal points for intergovernmental deliberations and negotiations on common international issues in their respective areas. Member States designed them for the purpose of collecting and disseminating information linked to the setting of international standards and rules as well as safety regulations. Increasingly, they came to be seen as “centres of excellence” in their respective fields, initiating and organising international research efforts and campaigns. As such, they have also been important sources of information and advice for developing countries. This has often been referred to as the normative function, that is, providing an instrument for agreement on norms, standards and recommendations for the furthering of the common good.

With the launching of the United Nations Expanded Programme of Technical Assistance in 1949, the specialised agencies have increasingly become involved in the execution of technical assistance projects in developing countries. Some agencies are involved in disaster relief and other activities, which together can be described as the agencies’ operational function. For several years, there has been a debate on whether the specialised agencies have come to devote too much of their work to technical assistance and other operational activities, which may have had an adverse effect on other important aspects of their mandates¹. In this debate, UNESCO may be one of the major agencies that have faced the least criticism as the balance between the normative and operational functions is less eschewed in favour of the latter than in many other agencies².

However, in order to properly analyse the roles of UNESCO, it is necessary to use terms that are not overlapping, and that together cover the full range of activities of the Organisation. Without a comprehensive and distinct set of roles, any discussion of the subject could be misleading – more confusing than enlightening. We suggest that the roles of UNESCO be described as:

- **Laboratory of ideas**, whereby UNESCO becomes engaged in innovative and applied research. It is not the same as conducting research. UNESCO is not an academic institution. The role is rather to initiate and fund, to follow closely, and receive the results from pilot schemes of an applied research character. This role is illustrated in the project “Families First Africa” whereby the World Foundation for AIDS Research and Prevention, in cooperation with a network of research institutes, develop a vaccine to block mother to child transmission of the HIV virus.

² With the increased level of extrabudgetary funding operational projects tend to multiply – also in the area of HIV/AIDS. The case study from Asia for instance referred to the increasing number of “projects” funded through and coordinated by UNESCO – and the lack of attention to the distinction between normative and operational roles.
• **Clearing house for information**, whereby UNESCO collects information, for example on good practice on capacity development or experiences of curriculum development, organises this in databases, on CD-ROMs, or on the Internet, and makes it available to external audiences. In Jamaica, UNESCO has produced a CD-ROM on the use of graffiti to mobilise university students against HIV/AIDS and there are also examples from the clearinghouse in Bangkok.

• **Setting norms and standards**, whereby the organisation facilitates an international exchange of experience, for example by helping Member States define academic degrees that are comparable. Setting a standard means a binding mandatory agreement among Member States, for example, on the classification of a disease. Normative would imply suggesting good practice, as for example when UNESCO promotes an instrument for quality assessment of manuals on HIV/AIDS prevention and presents guidelines and strategies for HIV/AIDS and education.

• **Advocacy** is a role whereby UNESCO proactively tries to influence the external environment to take action. By organising seminars on how theatre groups may develop plays that contain preventive messages around HIV/AIDS, the Organisation is an advocate for this amongst groups that would not otherwise work in this field. One problem with this role is that advocacy work builds on providing information and setting norms and standards, so there is some overlap between roles. However, advocacy entails different activities, for example initiating conferences and meetings, as when Ministers of Education in the Caribbean signed the Havana Declaration, which committed the educational systems to respond to HIV/AIDS epidemic. The UNESCO Bangkok Office has also developed an advocacy tool kit for Ministries of Education.

• **Capacity development**, when UNESCO helps to build the capacity among other organisations to perform specific tasks, for example to develop teaching material, to change curricula, to produce and broadcast radio programmes on HIV/AIDS, or to work with the human rights implications of HIV/AIDS. Capacity development can be directed at any number of organisations at government level or in other parts of society. There is a widespread body of literature on capacity development as an instrument and a purpose of technical cooperation.

• **Project implementation** is a role whereby the Organisation provides administrative capacities. That is, where the specific skills and comparative advantage lie in the ability to organise and control a flow of resources, to transform this into operational activities and to supervise practical aspects of that work. This does not mean that the Organisation itself would draw on its human and institutional competence in the field of HIV/AIDS, but that it implements a project whereby such competence is brought to the client.

The first four roles are associated with the normative function of UN agencies, and the latter two are associated with their operational functions. It is worth noting that UNESCO as a whole plays all these roles, and the roles are also seen in relation to HIV/AIDS activities. The evaluation found that some roles are more prominent than others, and furthermore, the Organisation is more successful in some roles than others. The discussion of roles therefore has direct implications for the strategy, as well as for the development of partnerships. We have chosen not to include “catalyst for development cooperation” among the roles, as we find this overlapping the role of “capacity development”; instead we use “implementing agency”, and though this is only seen in Brazil, it plays a significant part in UNESCO’s response to the HIV/AIDS epidemic.

3 There is a sub category of this role which could be called project execution or coordination, in which UNESCO is mobilising financial resources (mainly extrabudgetary) for specific activities implemented by national partners (NGOs, ministries, etc.). Technical support is often provided by UNESCO Field Offices, but UNESCO staff are not involved in implementation. This role becomes more significant with the increase in funding of HIV/AIDS projects.
2.2. A Brief History of Activities

At first, it was not obvious that UNESCO had a role to play in fighting HIV/AIDS. It was not until prevalence rates were increasing and UNESCO was challenged by other UN organisations and Kofi Annan that UNESCO’s competence as an agency specialised in education, science, culture, communication and information could be envisaged. Apart from those first years between 1982 and 1987, when there were no activities, UNESCO’s response can be seen as three consecutive periods of increasing commitments:


In December 1986, the 40th session of the International Conference on Education, drafted a Plan of Action in Education for the Prevention and Control of AIDS as part of the Global Strategy for the Prevention and Control of AIDS. In response to this, UNESCO set up an AIDS prevention education programme with WHO – Global Programme on AIDS (GPA). These activities continued until the end of 2000 and include international seminars, school health and HIV/AIDS educational materials.

In November 1987, the 24th session of the UNESCO General Conference authorised the Director-General to undertake activities under the regular programme, and to accord particular attention to strengthening coordination with other UN organisations. The General Conference also encouraged Member States to participate actively, through education programmes and through activities for young people in the prevention of the disease, and invited Member States to make generous financial contributions to educational activities for the prevention and control of AIDS. Some of the highlights of this first period were:

- **In 1991, the Venice Appeal.** This initiative aimed at mobilising public opinion on behalf of preventive education based on scientific research and was the first international appeal for Africa in education. Another aim was to motivate leaders of civil society and major religious groups to address the ethical and cultural dimensions of the AIDS epidemic, mobilising public opinion on behalf of research, and ensure that AIDS orphans were given schooling.

- **In 1993, the World Foundation for AIDS Research and Prevention was created with special links to UNESCO, recognised by the Executive Board at its 141st session.** The Natural Science Sector collaborated with this initiative. The Foundation mobilised funding from private sources to develop a network of integrated research centres, particularly in Africa and Central America and encouraged cooperation between researchers in developed and developing countries.

- **A scientific network for ‘Man against Virus’ was established involving researchers in Eastern and Western Europe.** The network made available publications presenting results of scientific investigations designed to strengthen national capacities in basic research. The network also fostered east-west exchange of professional and academic expertise.

- **In 1994 – 95, regional seminars were held aimed at decision-makers in the education sector to assist in the development of national education policies for the design, execution, and evaluation of efficient programmes for the prevention of HIV/AIDS.** Activities often focused on young people to foster behaviour change.

---

4 The World Foundation is located in UNESCO, but is a foundation independent from UNESCO.
From the list above, it appears that UNESCO’s activities in the period 1987 – 1996 concentrated on HIV/AIDS prevention education and on fostering research efforts seen as important for HIV/AIDS prevention, cure, and treatment. UNESCO’s roles in those days were primarily in advocacy, clearing house for information, and laboratory of ideas. But activities were few and scattered, and it is not possible to establish whether any impact was created. If there were any changes that were intended, these were surely a result of a large number of other environmental factors.

**UNESCO’s HIV/AIDS work 1996 – 2000**

From 1996 onwards, there was a growing global recognition of the urgent need to address the HIV/AIDS epidemic. Moreover, UNESCO’s evolving HIV/AIDS efforts took place within a wider organisational context, such as the World Education Forum held in Dakar, Senegal, the Millennium Declaration, and the UNGASS Declaration of Commitment on HIV/AIDS. The Report of the Task Force on UNESCO in the 21st Century provides a framework for looking at UNESCO’s HIV/AIDS response.

UNAIDS was established in 1994 by the United Nations Economic and Social Council (ECOSOC) and launched in January 1996. As one of the co-sponsoring agencies, UNESCO endorsed priorities and strategies which were seen as being an entirely fitting context for its fight against HIV/AIDS. UNESCO asserted that its fields of competence in its Programme Sectors were relevant and that its trans-disciplinary approaches combining technical skills and ethical requirements enabled it to provide a key contribution to the Joint UN Programme on HIV/AIDS. As a result of this, there was broader involvement of all Programme Sectors. A total of 32 UNESCO activities funded by UNAIDS from 1998 – 1999 amounted to US$ 2.6 million.

In February 1997, a UNESCO HIV/AIDS coordination mechanism, including AIDS focal points within each of the five Programme Sectors, was established. This was coordinated by the Assistant Director General of the Natural Science Sector where the UNESCO-wide focal point for UNAIDS was located.

---

5 An interesting example can be made of the Section for Preventive Education that commissioned a paper entitled ‘The Impact of HIV/AIDS on Education: A review of literature and experience’ (1994). This identifies AIDS as a significant factor in social-economic development. It notes that HIV infection and AIDS have differential impacts by gender, age groups, region, and sector. It points out how HIV/AIDS requires the education system to deal with the difficult topic of sexual behaviour and to be more than merely a disseminator of knowledge i.e. to be an advocate for appropriate messages to youth and young girls at risk. It draws on research to point out the impact of the epidemic on the demand, supply, process, and quality of education. It discusses various issues arising in the response of the education system to HIV/AIDS in terms of clients and roles of the system, operations of the system content and methods of education, planning and management of the system. Finally, it looks at the implications of HIV/AIDS on training, research, and donor programming. It is a comprehensive and far-sighted document touching upon many aspects of HIV/AIDS which had previously not been systematically drawn together in UNESCO’s documents. It is contemporary with the World Bank’s *World Development Report 1993*, the World Bank’s *Better Health in Africa 1993*, and the 1994 International Conference on Population and Development (ICPD) Programme of Action. None of these gives HIV/AIDS the attention it deserves as an obstacle to economic and social development.
In 1998, at the 154th session, the Executive Board invited the Director General to continue UNESCO’s support to UNAIDS and to strengthen UNESCO’s programmes of action contributing to combating the epidemic, in particular by taking steps to ensure that population groups particularly affected by the epidemic could benefit from research efforts and means of prevention. A year later, UNESCO accelerated its work in HIV/AIDS. Information on ‘preventive education’ was reported to the 30th General Conference. The ‘Approved Programme and Budget for 2000 – 2001’ contained more details of HIV/AIDS activities. Among the activities were the continued mobilisation of decision-makers at ministries of education and health concerning the impact of AIDS on the supply, demand, and quality of education. HIV/AIDS and drug abuse continued to be a focus of activities. Activities to be undertaken by IIEP and IBE were noted and ‘expected results’ at the end of the biennium were included in the reporting.

In April 2000, the 159th session of the Executive Board stressed that UNESCO could make a unique contribution to the fight against AIDS. The Executive Board committed the Organisation to draw up a global UNESCO strategy on HIV/AIDS and to include it in the Organisation’s Medium Term Strategy and in the Programme for 2002 – 2003.

The Report of the Director General on activities 1998 – 1999 includes details about the work on HIV/AIDS, such as: promoting girls’ and women’s education in Africa; HIV/AIDS and drug abuse among youth; and regional seminars. The roles of UNESCO continued to be of a normative character, concentrated on advocacy and clearing house for information. The evaluation has come across few activities that could be classified as standard setting or laboratory of ideas. There were instances of capacity building technical cooperation, and it was also in 1998 that the Brazilian project, implemented by UNESCO in collaboration with UNODC, started.

**UNESCO’s HIV/AIDS work 2001 – present**

It is in the last of the three periods that there is an intensified response to HIV/AIDS. Emphasis shifted from a primary concern over HIV/AIDS prevention to include concerns over the impact of HIV/AIDS on individuals, institutions, and the education system. The emergence of ‘UNESCO’s Strategy for HIV/AIDS Preventive Education’ and the appointment of the Director of IIEP as the UNESCO’s Coordinator represent significant strategic decisions for the Organisation.

With these organisational changes, IIEP emerged as a key player in UNESCO’s response with four research programmes, distance education activities, information exchange, and workshops. Activities of the Culture Sector included the systemic development of a new body of knowledge on the impact of cultural factors on HIV/AIDS prevention. Communication and information activities included the expansion and consolidation of the INFOYOUTH network. The involvement of UNESCO in the Brazilian AIDS project came to stand out as a success story. UNESCO Bangkok established a HIV/AIDS Coordination Unit which increased information sharing and collaboration between offices in the region, built the capacity of focal points and raised funds for their salaries.
The response became better coordinated within UNESCO and the coordinating mechanism moved from the Natural Science Sector, via the Education Sector to IIEP. As part of the organisational changes, a consultative group, under the chairmanship of the Coordinator was established to advise the Director General on all matters concerning HIV/AIDS. Assistant Directors General of all Programme Sectors were supposed to be members of this group. A UNESCO focal point for UNAIDS was established under the supervision of the Coordinator. At the same time, UNESCO stepped up its participation in UNAIDS. In July 2003, it took over the chair of the Committee of Co-sponsoring Organizations (CCO). UNESCO became the convening agency for the Interagency Task Team on Education (IATT).

The most recent development in UNESCO’s fight against HIV/AIDS emerged from a meeting of the UNAIDS Committee of Cospending Organisations (CCO) in Zambia in March 2004. The CCO decided to launch a new initiative: “Towards an AIDS-Free Generation: A Global Initiative to Expand Prevention Education against HIV/AIDS” - complementing current initiatives to accelerate access to treatment by focusing on prevention education as apart of a more comprehensive approach to reduce young people’s risk and vulnerability. A special Task Force will be appointed to chart the way forward and establish a joint strategic framework for scaling up in as many countries as possible, with an emphasis on Sub-Saharan Africa. The new initiative is not covered by this evaluation.

HIV/AIDS is an example of a theme that affects all sectors of UNESCO’s work, and it must be recognised that cross-cutting work is still a rare phenomenon in the Organisation. Other recent examples are the two cross-cutting themes of information and communication technologies and poverty reduction. It might have been useful to compare the implementation and results of these themes with those of the response to HIV/AIDS, but that is beyond the scope of this evaluation.

In terms of the roles described above, all of them are now played by UNESCO. There is a gradual shift from the normative to the more operational (if Brazil is included, the shift is dramatic). But there is a symbiosis between the two, and the operational activities often follow on the normative work, and the two remain linked. UNESCO has a complex multi-level structure for presenting global strategies and priorities. The next section analyses how HIV/AIDS is defined and operationalised as a global priority in policy and strategy documents and in budgets.

### 2.3. Global Strategy, Programme and Budget on HIV/AIDS

**UNESCO’s Medium-Term Strategy 2002-2007 (31 C/4)** provides the overall direction and objectives for all Sector Programmes (education, sciences, culture, communication and information) and the cross-cutting themes for a five year period. HIV/AIDS does not appear in the overall policy architecture – neither as one of the strategic objectives and cross-cutting themes

There is **one unifying theme** – contributing to peace and human development. There are **three main strategic thrusts** - developing universal principles and norms, promoting pluralism, and empowerment and participation in the emerging knowledge society. There are **twelve strategic objectives** – three for each Sector and lastly **two cross-cutting themes** – eradication of poverty and contribution of information and communication technologies.
the twelve strategic objectives, nor as a cross-cutting theme.

HIV/AIDS is presented as a global challenge. In the introduction, UNESCO’s work in HIV/AIDS is primarily linked to education and partly to culture and science: “Education will be a key feature in the global campaign to fight HIV/AIDS... UNESCO has a clear obligation and comparative advantage in areas of work regarding preventive education against HIV/AIDS, in particular culture-sensitive approaches to HIV/AIDS initiatives, in encouraging scientific research for treatment, in highlighting the human rights implications and ethical challenges and in advocacy and policy dialogue”.

In the chapter about UNESCO’s mission, the need to help African countries establish a strategy for the prevention of HIV/AIDS is referred to in a text box (p.7). The fight against HIV/AIDS is to be found under Education and Strategic objective number 2: “Improving the quality of education through the diversification of contents and methods and the promotion of universally shared values”. The need for preventive education is presented as an element in the broad vision of EFA and “because education is the most important vehicle for checking the spread of HIV/AIDS” (p.21).

In Sciences, HIV/AIDS is briefly referred to as a complex issue “which demands innovative and inter-disciplinary approaches from both the natural and the social and human sciences”. The work of the World Foundation for AIDS Research is not mentioned here, though it is mentioned in the biennial programmes 31 C/5 and 32 C/5. HIV/AIDS is not referred to in the chapters on Culture and Communication and Information or for the two cross-cutting themes (poverty eradication and ICT). HIV/AIDS has become a part of UNESCO’s global policy, but with relatively low visibility in the Medium-Term Strategy; when visible it is mainly in the Education Sector. The integration with the other Sectors and cross-cutting themes is so far weakly developed.

The structure of this framework with strategic thrusts (3), strategic objectives (12) and cross-cutting themes (2) seems overly complex. Such a broad framework does not appear to be very helpful in providing clear direction for an organisation with few resources. UNESCO wants to give more attention to HIV/AIDS and provide an inter-sectoral response. If HIV/AIDS had been given a more prominent place as a strategic priority and acknowledged as a multi-sectoral issue, it could have been categorised as a cross-cutting theme either in its own right or under poverty eradication.

The next level in the hierarchy of global documents is the important Programme and Budget (C/5). We have looked at the Approved Programme and Budget for 2002-2003 and the Draft Programme and Budget for 2004-2005. These documents follow a particular structure and present budget figures for broad categories of interventions.

<table>
<thead>
<tr>
<th>Levels in C/5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Major Programme I – Education</td>
</tr>
<tr>
<td>2. Programme I.1 – Basic education for all</td>
</tr>
<tr>
<td>3. Programme: I.1.1: Basic education for all: targeting key goals</td>
</tr>
<tr>
<td>4. Main Line of Action (MLA) 5: Focusing on education and HIV/AIDS</td>
</tr>
</tbody>
</table>
Looking for budget figures committed to HIV/AIDS in the C/5 for 2004-2005 the trail in the textbox has to be followed.

Even the Main Line of Action (fourth level in the hierarchy) provides a very broad framework – reiterating that UNESCO’s contribution is in the area of preventive education, both formal and non-formal – including the cultural perspective on HIV/AIDS care and treatment. Projects or activities are not included in the MLA.

The expected results of the HIV/AIDS response in the C/5 for 2002-2003 are in three areas and are included without specific targets:

- Preventive education policies encouraged and enhanced in affected Member States.
- Development of new approaches to preventive education – especially aimed at young people.
- Sharing of information and best practices.

In the C/5 for 2004-2005 expected results and targets were introduced as:

- Preventive education promoted in all learning environments.
  - Performance indicators:
    - Number of countries where preventive education is integrated in the curricula.
    - Number of teachers trained in preventive education approaches.
    - Number of education programmes to combat the epidemic.
    - Percentage of the population in target countries reached through these programmes.
- Evidence based policy formulation and practice change as a result of impact studies.
- Changes and adaptations within education systems to ensure that HIV/AIDS affected and infected can realise their rights to education.
- Coordinated and concerted preventive education campaigns and advocacy across networks to stop the epidemic.\(^6\)

2.4. The Preventive Education Strategy

The preventive education strategy was launched in 2001. It followed a process of rapid consultation within the Organisation. The Executive Board had in April 2000 asked the Organisation to draw up a global HIV/AIDS strategy, but in February 2001 there was no document to be presented for a UNAIDS CCO meeting in Nairobi and the next Executive Board. Hence, IIEP was under considerable pressure to produce such a document and do it fast. There are diverging views on how it happened; some claim that it is more or less the work of one person, written rapidly and with limited consultation, others tell a story of a process lasting several months, with drafts shared, comments invited, and a gradual elaboration to the final document. IIEP can refer to several written comments and document a process of consultation, but given tight deadlines the strategy process as such did not build sufficient ownership and commitment.

Looking at the content, there is no doubt that HIV/AIDS as an important obstacle to development is firmly established. Given that there is no cure, that vaccination is not yet

---

\(^6\) There are also targets for the last three result areas not mentioned here.
in sight, and that treatment is too costly for the majority of people in need, preventive education is presented as the most effective strategy currently available. UNESCO’s key task is “to engage in advocacy, share information about the epidemic, build capacity to reduce risk, and improve care and lessen the institutional impact of the epidemic, through intensified preventive education.”

UNESCO ‘will invest most of its resources in preventive education, broadly defined, where, due to its mandate, experience and expertise can make the greatest difference.’ UNESCO’s strategy is directed towards five core tasks: (1) advocacy at all levels, (2) customizing the message, (3) changing risk behaviour, (4) caring for the infected and affected, and (5) coping with the institutional impact of HIV/AIDS. The strategy recognises the need for good coordination within the UN system and is committed to working closely with UNAIDS.

The question to be raised here is, “is it a good strategy?” This is not mainly of historical interest. A new strategy has been in place since February 2004, but many regional and country strategies will be formed in coming years. The new strategy is likely to be developed, and there are many other strategy processes in the Organisation. It would be important to reflect on the value of these processes and the documents they lead to.

First of all, the purpose of a strategy must be clear. In theory, a strategy is a tool of managerial control; a tool to provide direction, set priorities and allocate resources. In UNESCO’s practice, the strategy is primarily used to communicate intentions to external partners. We asked the question “who are the target groups?” several times and to many people (interview list, Annex 2), at Headquarters, as well as in Field Offices. Possible answers were; UNESCO staff (internal use), UN partners and governments of Member States (external use). Interview respondents at Headquarters saw the UN partners at global level as the main audience of the strategy. In the Field Offices, interview respondents mostly saw the governments as the main audience of the strategy. On second thought, most admitted that the strategy was probably directed at all categories. However, the information contained in the strategy, the level of background detail, description of activities of the Organisation, the tone of address, etc. should all be different for each of these target groups if the communication was to be effective.

Contacts with UN partners indicate that few knew about UNESCO’s preventive education strategy, and almost none had read it. At country levels, most interview respondents knew that UNESCO had an approach focusing on preventive education and a cultural approach, but none had read the document. If the main purpose was to inform others on intents, then it would surely have been more useful to choose another type of document and tailor the message for the intended readers.

Turning to the strategy as a management tool – which is the appropriate use of strategy – the process of developing, revising and using it is more important than the document as such. We had the opportunity to observe the development of a new strategy between

---

7 The fact that none or few have read the UNESCO strategy says little about the quality of the document, but reflects probably more an experience that few people read organisational strategies.
October 2003 and February 2004, and there seem to be many similarities with the process three years earlier. The process was characterised by:

1. being a strongly production-oriented exercise; that is, the point was to get the strategy document written, printed, and ready for external presentation;
2. being a one-shot effort; it emerged as a surprise to some when the initiative to rewrite it was announced to the HIV/AIDS focal points in a meeting in late October 2003. It was then to be finalised in January 2004. Later, it was agreed that the document was to be provisional and could later be amended, and that is the status it has today;
3. being improvised, meaning that we did not see much attention given to process design. The HIV/AIDS coordinator kept focal points and other key staff members informed about the review process, new drafts of the strategy were sent out as they were produced, and comments invited. There was also a debate on the nature of the exercise, but there were conflicting viewpoints on content and ambition. Issues were raised, but there was no mechanism to resolve conflicts, develop compromises and negotiate positions. The time schedule was too tight, and the process had not been planned to manage such inputs.

A strategy formulation process could be a forceful tool to galvanise an organisation, to generate commitment and enthusiasm for a purpose. In that sense, the process above did not realise its potential. It may have been an efficient production process, as an impressive looking document was turned out on time. But a review of comments to the drafts, process reviews and assessments, would suggest that – at least in February 2004 – the major part of those who commented on the draft were dismayed and felt that the strategy had not taken sufficient account of organisational experiences, nor that it provided a platform to develop multi-sectoral approaches to the epidemic, which could be one of UNESCO’s comparative advantages.

In conclusion, the different strategy processes must be understood together. There is a wealth of strategy documents, but they fail to give strategic guidance. The preventive education strategy is quite broad and general, it covers all the roles and also outlines the five core tasks mentioned above. It is not clear how these relate to roles, or whether all roles are relevant for all of them. On the other hand, apart from these four instruments, there is no level at which a more programmatic response could be formed at country level. Hence, the Organisation tends to move from a complex and very general, but also quite cumbersome strategy process at the global level to a situation without strategic guidance at country and regional level – or rather, whether a strategy is formed or not, and what content it has, is up to the staff of the Field Offices.

2.5. Financial Commitment

It is difficult to get an overview of UNESCO’s total financial commitment to HIV/AIDS. In this section, the evaluation presents different accounts of budgets and expenditures. It is, after all, through financial allocations that the intents of strategies become realities. No results can be expected if there is no commitment of resources, or if the commitment is not translated into expenditure. If we look at figures from the global programme and budget (C/5) and funds received from UNAIDS (through the Unified Budget and Workplan – UBW), the following pattern emerges (in US$ millions):
Table 2.1. Sources of Income 2002-2005

<table>
<thead>
<tr>
<th>Source of income</th>
<th>2002-2003</th>
<th>2004-2005</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular Budget</td>
<td>0.9</td>
<td>1.152</td>
</tr>
<tr>
<td>Extrabudgetary funds</td>
<td>6.0</td>
<td>1.725</td>
</tr>
<tr>
<td>UBW</td>
<td>4.0</td>
<td>7.200</td>
</tr>
<tr>
<td>Total</td>
<td>10.9</td>
<td>10.077</td>
</tr>
</tbody>
</table>

The total annual commitment is estimated to be approximately US$ 5 million, but aggregate figures are uncertain. The most accurate figure is the UBW commitment rising from 4 to 7.2 million from the previous to the current biennium. The regular budget figures capture only the Education Sector, but this Sector has also absorbed most of the resources. The amount of extrabudgetary funding at global and country levels is highly uncertain. The Programme and Budget for 2004-2005 presents a dramatic decrease in extra budgetary funds, while the UBW document for 2004-2005 introduces a significant increase in country level activities funded through extra budgetary funds – indicating a total of US$ 35.9 million.

Note that the large projects implemented on behalf of the Government of Brazil are not part of the accounts here. The annual budgets there increased from US$ 100 million in 2000 to a total of slightly more than US$ 130 million in 2004. The activities in Brazil are thus fourteen times the size of remaining activities all over the world. If we assume that the annual budget for the projects in Brazil will be as high in 2005 as in 2004, then the total amounts there would be US$ 260 million for the 2004 – 2005 period. The total budget would be US$ 270 million and Brazil alone accounts for 96% of the budget! The contribution from the Italian Government to the World Foundation for AIDS Research for the Families First project is neither included in the table (US $ 2 million 2003-2005).

Regular Resources – Small Increase

The estimated budget for HIV/AIDS activities for the biennium 2002-2003 was US$ 900,000 (regular budget) and US$ 6 million (extra budgetary). The activity budget for HIV/AIDS amounted to approximately 3% of the total allocation for the Education Sector. This is an insignificant part of the total programme budget. There were HIV/AIDS activities also “hidden” under other labels and included in other sector budgets, but not visible and detectable in the global programme and budget (C/5). No exact global figure exists for how much UNESCO invests in HIV/AIDS using its own resources.

If we look at the C/5 for the biennium 2004-2005, HIV/AIDS is referred to in the introduction as one of the key challenges for UNESCO’s action in 2004-2005 (see text box). HIV/AIDS is again to be found under Education, but now under Basic Education for All as Main Line of Action 5. The regular

*“Given the dire trends in the HIV/AIDS epidemic in virtually all regions, we will be called more than ever to promote preventive education so as to attain MDG 6 which calls for halting and beginning to reverse the spread of HIV/AIDS. HIV/AIDS is now seen as the major challenge for the world community with repercussions in virtually all aspects of social life.”*
budget allocation is increased slightly to US$ 1,152,000, but the extra-budgetary funds are according to the document cut significantly from 6 million to US$ 1,725,700.

The focus on preventive education is confirmed with reference to UNESCO’s Strategy for HIV/AIDS Preventive Education, but expected results are broadened: *Preventive education promoted in all learning environments, including in curricula and teacher training programmes, evidence policy formulation and practice change as a result of impact studies, more focus on the rights of all to education, coordinated and concerted preventive education campaigns and advocacy across networks.*

The total appropriation for HIV/AIDS in UNESCO’s global budget document has decreased with 8% from US$ 3,137,300 in 2002-2003 to US$ 2,877,700 (including personnel costs) for 2004 2005 – a decrease which is in contrast with the statement in the introductory chapter of promoting preventive education. As noted above, funds for HIV/AIDS could also appear under other labels, but a reduction in the most important budget line reflects a significant gap between policy intent and practice.

**UNAIDS Unified Budget and Work Plan (UBW)**
UNESCO receives a large share of its HIV/AIDS funding from UNAIDS (UBW) so it is important to understand and analyse this source of income. The Programme Coordinating Board of UNAIDS (PCB) reviews and approves the UBW and is guided by the UN System Strategic Plan for HIV/AIDS 2001-2005 (UNSSP). The strategic objectives in this plan link the work of individual UN organisations with the overarching UN objectives of providing leadership and support to the work of national governments and their partners. Section III presents a summary of individual UN system plans – also for UNESCO – building on the comparative advantages of each cosponsor. It presents an overall general intent and UNSSP appears more as a synopsis of intentions and programmes than a plan providing strategic direction and guidance.

The development of the UBW is used as an exercise in collaborative and joint planning. It includes only global and regional level HIV/AIDS activities of the cosponsors and used to be comprised of three components:

(a) the regular budget of the cosponsors – how much they commit using their own resources,
(b) a “core” budget component from UNAIDS,
(c) a “supplemental” component raised by the individual cosponsors (extrabudgetary funds).

For the biennium 2002-2003 the distribution of UBW core, UBW supplemental and cosponsor resources were as follows (in $ '000):

<table>
<thead>
<tr>
<th>Table 2.2. Components of UBW Resources 2002-2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>UNESCO</td>
</tr>
<tr>
<td>Total UBW</td>
</tr>
</tbody>
</table>
Information about UNESCO’s country level funding was not reflected in the UBW. The most important figure is the US$ 4 million from UNAIDS since the supplemental UBW is an uncertain estimate. UNESCO appears in the UBW among the “small” cosponsors – allocated only 2% of the total core UBW. The second column should represent UNESCO’s own resources – the regular budget amount allocated to HIV/AIDS. This figure could be inflated and is not in line with the C/5 budget. The distribution of UBW core resources by global and regional management units for UNESCO was as follows:

Table 2.3. UBW Regional Allocation of Resources in US $’000 (2002-2003)

<table>
<thead>
<tr>
<th></th>
<th>Africa</th>
<th>Middle East/N.A.</th>
<th>Asia</th>
<th>Americas</th>
<th>Europe CIS</th>
<th>Regional Total</th>
<th>Global total</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNESCO</td>
<td>1.035</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>400</td>
<td>1,435</td>
<td>2,565</td>
<td>4,000</td>
</tr>
<tr>
<td></td>
<td>26%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>36%</td>
<td>64%</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

UBW resources were primarily spent on global Headquarters based and initiated activities (including the Institutes), secondly on regional activities in Africa and Europe, while nothing in Asia (except Central Asia which is included in the column for Europe), Americas and Middle East/North Africa (which does not preclude that some activities could have been carried out by Field Offices after common agreement with Headquarter units).

In the UBW for 2004-2005, there are some changes in the structure of the budget:

(a) The core budget includes funds from the cosponsoring organisations.
(b) The second component is an additional core inter-agency budget, which is presented for the first time identifying additional resources required.
(c) The third component contains supplemental budgets of the cosponsoring organisations.
(d) The fourth component is a summary of global and regional HIV/AIDS activities funded from that organisation’s own budget.
(e) In addition, estimates are provided of country level activities.

Table 2.4. Components of UBW Resources in US $’000 (2004-2005)

<table>
<thead>
<tr>
<th></th>
<th>Core UBW</th>
<th>Additional Core Inter-Agency</th>
<th>Supplemental</th>
<th>Agency global/regional resources</th>
<th>Total UBW</th>
<th>Agency country level</th>
<th>Grand total</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNESCO</td>
<td>7,200</td>
<td>----</td>
<td>6,471</td>
<td>4,259</td>
<td>17,930</td>
<td>18,000</td>
<td>35,930</td>
</tr>
<tr>
<td></td>
<td>250,470</td>
<td>20,000</td>
<td>140,640</td>
<td>111,184</td>
<td>522,294</td>
<td>818,100</td>
<td>1,340,394</td>
</tr>
</tbody>
</table>

The figures show that UNESCO remains a “small” cosponsor, but that core resources from UBW increased from US$ 4 to 7.2 million in line with the increase of the total UBW. Except for the core UBW, figures in this table are uncertain. The fourth and fifth columns should add up to UNESCO’s own contributions – using their own regular budget resources. If we compare the estimates from this table with the commitments in UNESCO’s Global Programme and Budget (C/5) – the latter indicate much lower figures. We are not aware how the US$ 18 million for country level activities was estimated, but assume that it was based on estimates of the “in kind services” provided by
UNESCO: staff costs, paper, printing, computers, etc. which are not included under regular budget programme costs.

The table also shows that global initiatives still absorb most of the funds (52%), but the level of regional commitments has increased – now including Middle East/North Africa, Asia and the Pacific and Latin America and the Caribbean. Geographic priorities for the current biennium have changed for UNESCO (in US$ ’000):

<table>
<thead>
<tr>
<th>Table 2.5. UBW Regional Allocation of Resources in US $ ’000 (2004-2005)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Africa</td>
</tr>
<tr>
<td>UNESCO</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

UNESCO has made an effort in the UBW document to account for how spending relates to the core tasks expressed in the strategy. The largest area of spending is prevention and vulnerability reduction. However, as the concepts merge, the distinction between that and, for example, advocacy and capacity building, is not clear. If we have an activity that is conceived as capacity building for preventive education, it would not be obvious how to account for the use of funds. That is one reason why a clear and comprehensive set of rules would be useful to describe real priorities.

**Low Disbursement and Implementation Rate**

There is an important distinction between funds obligated, disbursement and actual implementation. Budgets present only the first part of the translation of intent into results – level of disbursement and actual implementation is the next. The Interim Financial Report for the 2002/2003 UBW states that the implementation rate (or more precisely funds obligated) at the end of September 2002 was 33.4 %, while it should have been 75%. Concerns were expressed about the low implementation rate because any sum unobligated at the end of the year would have to be returned to UNAIDS and UNESCO would be unable to make a case for any increase of the UBW share the following year.

Figures showed that all Sectors, Institutes and Field Offices had been unable to approach the 75% rate. The Institutes had the best rates (46%) followed by Field Offices (mainly Dakar and Bangkok\(^8\)). Programme Sectors were generally in a good position (SHS, CLT and CI in that order, while ED had only a 10% rate. The Science Sector was alone with 0% implementation.) In the Final Financial Report for 2002 UBW Allotment the rate of implementation was 68.5%, which means that UNESCO had been unable to spend US$ 630,000 in 2002 which had been planned and submitted to UNAIDS for funding.

\(^8\) In October 2003 we were informed that the implementation rate in the Bangkok office was 88%.
2.6. Concluding Remarks

This chapter has demonstrated the roles UNESCO could play in order to contribute to the Millennium Development Goal to halt and reverse the spread of HIV/AIDS by 2015. There is no doubt that UNESCO has a mandate to act, and as the specialised agency for education, science, culture, information and communication, it has a key role. UNESCO’s response has evolved over time; activities are now better coordinated, more significant and coherent than they were at the beginning of the 1990s.

But the strategic planning tools of the Organisation need to be developed; there is a top-heavy planning process where the elements at the highest level add little value in relation to each other. On the other hand, there is no programmatic level where strategic intents are translated into programmes at country and regional levels.

The financial allocations are inadequate for achieving the strategic objectives, and the evaluation’s review of expenditures suggest that many objectives at the activity level are not reached simply because the money is not spent. Delays affect targets as the achievement of these depends on inputs from a number of actors, and when inputs are not synchronised in time, performance suffers. In conclusion, UNESCO’s response has come late, and there is still much to learn on how to set priorities, develop plans at different levels and translate these into programmes of activities, and finally to implement programmes. The next chapter will look more closely at implementation.
3. IMPLEMENTATION: FROM POLICY TO RESULTS

3.1. What Affects Results?

This chapter analyses the processes of implementing policy. In other words, it looks at how UNESCO’s internal processes contribute to translating intents into results in an effective and efficient way. The importance of implementation is supported by two interlinked findings. First, that the quality and level of UNESCO’s response to HIV/AIDS at regional and country level to a large extent depend on, and can be explained by, broader organisational characteristics. In other words, an assessment of the HIV/AIDS response is also an evaluation of UNESCO’s effectiveness as an organisation. Secondly, that results or performance depend more on the quality and characteristics of implementation than on the formulation of policies and strategies. The response often follows its own patterns at regional and country levels – and is only weakly linked to global strategy processes.

What are those processes affecting implementation? There are, of course, several external factors and processes supporting and constraining an effective response from UNESCO such as donor willingness to fund HIV/AIDS activities, national policies, trends in the epidemic itself, socio-economic factors, etc. UNESCO has a limited ability to influence such factors. Here, we focus on internal processes that are controlled by UNESCO and provide the enabling and disabling environment for an effective and high-quality HIV/AIDS response. These are:

(a) **Human resources** – availability of relevant and high-quality staff and a network of experts.
(b) **Structure of HIV/AIDS coordination** – including where the responsibility for HIV/AIDS coordination is located and how it is managed.
(c) **Strategic planning instruments** – availability of instruments and tools supporting a strategic planning system.
(d) **Processes of internal coordination** - how the various parts of the Organisation (Programme Sectors, Institutes, Field Offices) work together, complement and support each other.
(e) **Processes of decentralisation** – how the significant restructuring process of UNESCO affects the HIV/AIDS response.

3.2. UNESCO’s Roles in Practice

**Laboratory of Ideas**

There is evidence that UNESCO played an innovative role in the early stage of the response by introducing concepts and voicing concerns about the impact of HIV/AIDS on the education systems. IIEP organised several workshops addressing this issue and the IIEP clearing house regularly provides updated information. The efforts of the World Foundation for HIV/AIDS Research is also an example. Some of the activities in the elaboration of the cultural approach to HIV/AIDS could perhaps also be seen as an example of how this role is enacted. There are, however, few such examples of innovation.
A more systematic and scaled up response to HIV/AIDS happened first after 2001- not only at Headquarters, but also at regional and country levels as our case studies have documented. As such, UNESCO was a latecomer in the HIV/AIDS arena. The required learning curve was steep and UNESCO moved slowly upwards. UNESCO is not yet perceived as providing a “laboratory of ideas” by UNAIDS partners – a source of ideas and innovations, an organisation providing technical leadership, etc. UNESCO’s partners see few people with a relevant background working full-time in the laboratory.

**Clearing House for Information**

UNESCO has not only one “house”, but currently five clearing houses for information on HIV/AIDS: one in IIEP focusing on the impact of HIV/AIDS on education, one in IBE on curriculum development, and three regional clearing houses based in the Field Offices in Dakar, Bangkok and Harare.

Effective and high-quality clearing houses for information are prerequisites for normative roles like setting norms and standards, advocacy, and laboratory of ideas. UN partners praise in general the quality of products and services provided by the IBE and IIEP clearing houses. The regional studies, however, demonstrated a lack of awareness and knowledge about their work and what they could offer.

It is difficult to understand why UNESCO would need five different clearing houses instead of one global database with regional and thematic nodes (based on a common software platform). There is an ongoing dialogue between the five clearing houses for stronger and better coordination in order to reduce cost and improve utilisation.

The Clearing House in Bangkok is funded by the ADB and UNAIDS and collects, processes, repackages and disseminates information – in particular to support the information needs for with ethnic minorities in the Mekong sub-region. The activities include: the development and maintenance of bibliographic information and a curriculum and teaching/learning materials databank; the maintenance of a web site; the provision of enquiry services; and the publication of an HIV/AIDS bulletin.

---

9 The IIEP Clearing house has hosted the *UNESCO Bangkok HIV/AIDS prevention in the cross-border areas of GMS* site for the past six months. Three out of five clearing houses already use the same software for their databank.
IBE was founded in Geneva as a private, non-governmental organisation in 1925 and is now a UNESCO Institute with considerable functional and intellectual autonomy. The current mandate determines that IBE act in the area of contents and methods of education – with a special emphasis on curricular development processes for achieving the Education for All Goals.

IBE set up a special programme in 2002 with financial support from UBW on HIV/AIDS with the following aims:

- To gather and appraise curricula for HIV/AIDS prevention at primary and secondary levels.
- To provide access to research findings and other materials that enable curriculum developers in the most affected countries to be better equipped with skills and knowledge in providing national and regional responses.
- To develop and promote a dialogue on HIV/AIDS contents in school curricula among policy makers, curriculum specialists and practitioners.

The IBE Clearing House for Curriculum Development on Education for AIDS Prevention aims to deliver information-management and knowledge transfer services. Part of the work involves evaluating and publishing the results of curriculum development processes and curricular contents and methods that have been used to prevent AIDS. The project organises and participates in conferences and seminars (an expert meeting for discussing criteria for curriculum development, and a capacity building seminar with nine African countries on HIV/AIDS curriculum development in Swaziland 2003).

At the initial stage, a large quantity of documentation was assembled and made available through the IBE website and on a CD Rom. In a second phase, IBE works towards developing the data base on curricula further, so as to include a greater quantity of curricula and educational materials on HIV/AIDS prevention. The IBE team seeks also to establish closer links with curriculum makers in the field and contribute to the identification and distribution of “good practices” and to the extent possible offer technical support to countries.

The IBE clearing house is well established and managed by a full-time HIV/AIDS Coordinator. The use of the clearing house was in the beginning limited to – six to seven requests per month – and mainly from NGOs and few from curriculum developers in or working with MOEs – indicating a low level of curriculum development in the area of HIV/AIDS among MOEs. By February 2004 the number of contacts had increased to 30-35 per month. In addition, IBE distributed 1000 CD-ROM at the end of December and received over 400 additional requests for the CD ROM. This has been a great success because it facilitates access to the database for those who do not have direct access to the Internet.
IIEP HIV/AIDS Impact on Education Clearinghouse

The International Institute for Educational Planning (IIEP) was created by UNESCO in 1963 in Paris as a centre for training and research - specialised in educational planning and management. It is supported by grants from UNESCO and by voluntary contributions from Member States and others. IIEP is an integral part of UNESCO, yet it enjoys a large amount of autonomy. IIEP's goal is to help Member States improve the quality and effectiveness of their education systems. The Institute's core activities are training and research. It also provides services to Member States on request. The staff provides complementary skills and know-how, as it brings together economists, sociologists, statisticians, planners.

IIEPs Education Clearing House is an interactive portal dedicated to collecting and disseminating documentation on HIV/AIDS and its impact on education. It is designed as a tool for ministries, educational institutions, international agencies, consultants and other organisations for disseminating their own research and learning from the research of others. In addition to finding the latest studies and research, one can access related websites, participate in discussion forums and contact members of the site. Two full time staff are working on the IEEP clearing house. The “house” has 200 members, approximately 1,000 visitors and 8,000 page views per month and 25 requests for information. The clearing house is advertised in newsletters and through the web.

Setting Norms and Standards

There are several examples of manuals and guidelines being produced in the area of HIV/AIDS and education, e.g. teacher training manuals, a toolkit on HIV/AIDS and human rights, etc. The case studies found that several of those manuals are introduced by the same individuals to Field Offices (translated and presented in workshops). The news about a useful tool spreads by word of mouth more often than a deliberate normative strategy process. There are normative elements in the guidelines, but the documents are more considered as resource material available for adaptation.

Preventive Education and School Health Asia-Pacific

As part of ongoing technical assistance to MOE and UNESCO field offices, UNESCO’s Regional Bureau for Education in Bangkok has developed two different generic teacher training manuals:

(a) Focusing on how teachers can integrate HIV prevention into existing subjects in secondary schools.
(b) Focusing on HIV/AIDS in the broader context of school health. This manual was developed in Uzbekistan and will be adapted for use in Kazakhstan and other low prevalence countries.

The learning and dissemination of lessons from “below” – in other words from country projects are rare. Some regional and national offices have a reputation of performing well in the area of HIV/AIDS because of the commitment and quality of the Head of Office or Focal Point. Reputation is not so much based on dissemination of documented “best practices” and sharing of information. UNESCO has suffered from a weak evaluation practice meaning there are few tools to document and assess experience from country pilot projects to be shared with and replicated in other countries – in other words, tools and mechanisms for inter-organisational learning. It is said that UNESCO is a “vertical”
organisation in which each Sector and Field Office lives its own life with few effective links between them.

**Advocacy**

The Director General has contributed to raising the awareness about HIV/AIDS and education in his speeches and presentations, i.e. he has played an advocacy role, but other senior staff have not played a significant role in high-level international advocacy.

Regional and country workshops serve several purposes – including advocacy and capacity building. The case study from the Caribbean referred to the Havana Declaration as an important example. Being an effective advocate is built on several premises: high technical credibility and legitimacy (being accepted and trusted) – and the most basic – being present and rooted in the environment.

The presence and availability is linked to UNESCO’s network of regional and country offices. The current reform process in UNESCO has aimed at rationalising the use of technical expertise. Instead of spreading a few experts over a number of countries, it has been decided to strengthen regional offices, close some of the National Offices and replace them with stronger sub-regional Cluster Offices.

We are not in a position to assess the decentralisation process more broadly, but the new way of organising UNESCO’s offices has had an impact on availability and quality of advocacy and capacity building in countries where UNESCO is not present. The case study from Angola states that “UNESCO closed its national office in Angola in 2001, and since then the involvement and activities of UNESCO are very few.... And the presence of UNESCO has been weak”. With fewer National Offices, UNESCO will have fewer chances to follow country-related processes on a day-to-day basis, to be involved in capacity building processes, and to be perceived as a legitimate advocate.

**Southern Africa and Jamaica**

MOEs are key partners for UNESCO as shown in the case study from Southern Africa (Namibia, Angola and Mozambique) and “UNESCO is emerging as a very strong partner in the HIV/AIDS area in Mozambique and that having a professional person as focal point on HIV/AIDS is a current strength of UNESCO”.

In Jamaica UNESCO is said to be “distinguished by having been a partner for the Ministry of Education on a project to develop curriculum material in HIV/AIDS education as early as 1991”.

The case studies show that Field Office capacity vary – from Brasilia, Bangkok and Dakar with established HIV/AIDS Units and staff working full time on HIV/AIDS issues to small National Offices with only HIV/AIDS focal points serving several thematic areas. The major constraint is often not a lack of technical capacity, but high vulnerability and low predictability due to the use of short-term contracts and consultants for people working with HIV/AIDS.

UNESCO has also a unique role vis-à-vis Ministries of Education in terms of advocacy, capacity building, etc. and there is evidence from the case studies that UNESCO is sought
after in this role. A problem is that Field Offices often do not have the relevant skills and experience for playing a high level advisory and capacity building role in relation to Ministries of Education in the area of HIV/AIDS and education. The potential privileged role vis-à-vis the Ministries of Education is not realised.

UNESCO Bangkok has, however, developed an advocacy tool kit for the education sector, aimed at initiating and strengthening sectors responses to HIV/AIDS. The kit targets education policy makers in order to integrate HIV/AIDS issues into both formal and informal education settings.

Capacity Development

Capacity development is a major role for UNESCO. The case studies have also documented that this is an important priority and area of work. Concrete activities, however, are often time limited and singular events (workshops, seminars, etc.) – not part of a long-terms capacity building process. Funding is scarce and there are few comprehensive programmes providing a framework for thinking and action.

Capacity development requires special expertise – which is scarce in most Field Offices. The majority of UNESCO professional staff is based in Paris and only a few seem to be in demand for providing country level technical support. Both the demand and supply are low. The group of advisers able to provide high level advisory services is small – meaning that the same people are used in several regions. Field Offices are also often sceptical about the skills and not least, availability of Headquarters staff and prefer to use regional or national expertise. UNESCO Bangkok organised their own capacity development workshop in Hanoi in 2003 for HIV/AIDS focal points.

Several of the case studies portray UNESCO Paris as a distant, large and not always communicative Headquarters. A practical frustration is the lack of response to questions and e-mails – even sent from senior officers in Field Offices. A cultural shift is called for – in which Headquarters defines itself more as a service and support organisation for regional and country activities.

Caribbean experience – UNESCO Kingston

Much of the organisational response has been impressive. It appears to be more the result of a small number of people in the office, its Director, Education Programme Specialist and Consultant. If any or all of these would be relocated or contracts not renewed fast enough, it is very uncertain if the momentum would be kept up. The support and engagement from Headquarters is weak; the response to the epidemic in the Caribbean has been initiated and managed from the Field Office.

There are examples of international HIV/AIDS experts hired by UNESCO providing useful advice and support to countries. A consultant from Zambia has for instance been used extensively by several Field Offices in the Caribbean, South East Asia, and Africa. The network of experts appears small. We have not come across a more institutionalised UNESCO network – meaning a list of consultants screened and recommended by the Organisation. Networks are personal – linked to individual staff members working on HIV/AIDS as short-term staff and consultants.
Implementing agency
As we have mentioned in chapter 2, UNESCO is the implementing agency of HIV/AIDS projects funded by the Government of Brazil. These are actually several projects, at federal, state and municipal levels. Why does the government of a Member State turn to an international organisation to implement activities that would normally be handled by its public sector? The history of the Brazilian case is as follows:

The Brazilian government responded to the epidemic in the beginning of the 1990s and set up a National Coordination Programme under the Ministry of Health. It did so with the use of World Bank loans as well as significant allocations from the Treasury. As there were several constraints on how to use these funds for an active response (such as the need for proper, transparent and reliable procedures, managerial capacity, and systems for project management) the government of Brazil turned to the UN agencies for assistance. The first large project was implemented by UNODC and UNDP.

When the second project was to start in 1998, the government wanted to involve UNESCO, particularly because of its expertise in the education sector. The initial volume of funds was US$ 300 million over a three year period, but in the course of implementation more money was made available. Even though UNESCO’s experience of handling such large amounts is quite recent and not really proven prior to the end of the 1990s, it worked well. The Office in Brazil recruited a qualified team of experts, now five in total, and their unit is well integrated in the Office. The project is evaluated carefully, both by independent, external evaluators, and through the evaluation and research unit in the Office.

An external evaluation\(^\text{10}\) concluded that “the capacity of the office to act as a catalyst to State reform, including the national implementation of international conventions, declarations or plans of action, is widely recognized. Moreover, the UNESCO Brasilia Office seems to be able to combine a double alliance with the governing authorities on one hand, and with civil society on the other. These characteristics, as well as the contextual situation of the country, have generated a modus operandi in which Brazil allocates significant resources to the UNESCO office in order to implement projects that are mainly and directly of benefit to Brazil”. At the time when the quoted report was written, the Office was running 70 cooperation agreements amounting to US$ 105 million for the year 2001, with some 2 350 project personnel employed to execute the activities.

However, the role of UNESCO in Brazil must also be seen in a wider context. Other UN agencies, not least UNDP, assumed similar roles in other Latin American countries in the 1990s. This changed the pattern of funding, as the practice developed at a time when “Northern” donor agencies came to rely less on the UN for development cooperation. But a debate on the virtues of “national execution” as it was called emerged. Some claimed that the role of the UN agencies was perverted, as they were not set up for such purposes. It was suggested that other aspects of their work became less effective. It was implied

that their resources were channelled to activities where they made more money than in their traditional functions as specialised agencies, funds or programmes. There were also those who claimed that the cost-efficiency of the operations was low, as the salaries/contract fees were higher than they would have been if the governments had maintained the implementing role for activities.

By consequence, UNESCO’s role as an implementing agency is contested. Certainly, UNESCO was not created to implement activities on that scale in some Member States only. The fact that some of the UN agencies do so, in some countries, is an emergency solution, where it would always have been better to find local solutions to the capacity building and organisational problems. Nevertheless, a second best solution is better than none, particularly when it comes to halting the spread of HIV/AIDS. A pragmatic response would be that as long as it works as long as UNESCO does a good job as an implementing agency, there is no reason to object to the practice. This can be qualified:

1. It must be ascertained that implementing a government project through UNESCO does not become a more expensive solution in the long run (read higher salaries and overhead costs), but that the activities of the international organisation are gradually incorporated by national organisations at central government, state or municipal levels, or elsewhere in society.

2. It must be ascertained that the practice of implementing government projects does not obstruct or disqualify other roles of a UN organisation, such as setting norms and standards, or engaging in advocacy for specific purposes.

3. UNESCO’s potential strength lies in its ability to integrate inputs from many sectors, as well as sharing its information from global experiences. When the organisation acts as an implementing agency, it would justify that role if that knowledge and those experiences are also put to use on the projects.

Reflecting on the experience in Brazil, it would seem as if the first aspect is well taken care of. We have commented on the audit and evaluation processes. At present many of the contracts are being taken over by state and local governments, and a more decentralised response is being managed. As for the second qualification, UNESCO has been engaged in setting norms and standards, for example through its work with the Brazilian senate and Congress on Human Rights legislation. There are no indications that it has been any less effective; on the contrary, it has had better access and more credibility because it is such an important player in the Brazilian struggle against HIV/AIDS. As for the third qualification, UNESCO has initiated several projects to share the experience from Brazil with other Portuguese speaking countries. There were exchanges with Mozambique in particular, where youth organisations have worked together with information campaigns and advocacy. Lessons learned were also shared through publications, presentations, workshops and seminars.

So, UNESCO has been quite active in the role of implementing agency, but it is, so far, only in one country. The evaluation did not find any evidence of negotiations that could lead to a similar role in other countries. It is therefore likely to be a singular experience, and hence it will not be reflected as much in this evaluation as its relative share of funding – or the impact – would merit. But how do internal processes affect and explain
roles and results? The following sections throw light on some of the linkages between organisational behaviour, roles, and results.

3.3. Human Resources

Does UNESCO have the competence and capacity to play all its roles and effectively support its HIV/AIDS response? Different types of capacity and competence are required for the various roles and also for planning and managing HIV/AIDS activities:

- technical expertise in HIV/AIDS and education;
- strategic planning and programme development skills;
- coordination, management and administration experience;
- experience from normative roles: advocacy, standard setting, laboratory of ideas, and policy development, etc.;
- monitoring and evaluation capacity.
### Table 3.3. HIV/AIDS Capacity in Headquarters Programme Sectors and Institutes (2003, unless otherwise stated)\(^{11}\)

<table>
<thead>
<tr>
<th>Sectors</th>
<th>Staff</th>
<th>% time spent on HIV/AIDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Natural Sciences Sector</td>
<td>Programme Specialist (recently joined), (no background in HIV/AIDS)(^{12})</td>
<td>5%, expected to increase (1 post)</td>
</tr>
<tr>
<td>Culture Sector</td>
<td>Assistant Programme Specialist (+ two assistants) (HIV/AIDS Culture Research) partly HIV/AIDS competence network of experts</td>
<td>100% (1 + posts)</td>
</tr>
<tr>
<td>Social and Human Science Sector</td>
<td>Contracted staff (1) HIV/AIDS and Human Rights</td>
<td>100% (1 post)</td>
</tr>
<tr>
<td>Communication and Information Sector</td>
<td>Chief of Executive Office Programme Specialist (No specific HIV/AIDS background)</td>
<td>5% (0,15 posts) 10%</td>
</tr>
<tr>
<td>Education Sector(^{13})</td>
<td>Programme Specialist (Young Children and HIV/AIDS)</td>
<td>20% (4,5 posts)</td>
</tr>
<tr>
<td></td>
<td>Programme Specialist (Life skills education)</td>
<td>80%</td>
</tr>
<tr>
<td></td>
<td>Programme Assistant (Education and HIV/AIDS)</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Senior Programme Specialist (teacher education)</td>
<td>95%</td>
</tr>
<tr>
<td></td>
<td>Senior Programme Specialist (teacher policy)</td>
<td>5%</td>
</tr>
<tr>
<td></td>
<td>Programme Specialist (Preventive Education)</td>
<td>25%</td>
</tr>
<tr>
<td></td>
<td>Programme Specialist (Literacy and non-formal education)</td>
<td>30%</td>
</tr>
<tr>
<td></td>
<td>Senior Programme Specialist (Recently joined as expert on education and HIV/AIDS)</td>
<td>100%</td>
</tr>
<tr>
<td>IIEP</td>
<td>HIV/AIDS Coordination Unit (Coordinator and support staff)</td>
<td>7 posts (100%) (including General Staff)</td>
</tr>
<tr>
<td></td>
<td>IIEP Programme (including Clearing House)</td>
<td>5.5 posts (100%) (including General Staff)</td>
</tr>
<tr>
<td>IBE</td>
<td>Clearing House</td>
<td>(100%) 1 post</td>
</tr>
</tbody>
</table>

A comprehensive assessment of the level and type of capacity and competence in UNESCO has not been carried out.\(^{14}\) The following builds on findings from case studies

---

\(^{11}\) There are six education institutes, but only IBE and IIEP were visited as part of this evaluation.

\(^{12}\) The Natural Science Sector informed us in April 2004 that a Director spends 5%, the Programme Specialist now spends 20% and a Consultant and an Administrative Assistant 100%. From 1996 to 2002 the HIV/AIDS Focal Point was located in the Natural Science Sector.

\(^{13}\) The figures do not include Directors level.

\(^{14}\) A survey on staff time devoted to HIV/AIDS was conducted by IIEP in April 2004 based on a request from UNAIDS, but the results were not finalised in time to feed into the evaluation.
Implementation and visits to Headquarters. An overview of staff currently working on HIV/AIDS at Headquarters and in two Institutes is presented in table 3.3 above.

Analysis of the table and the implications for human resource management suggest:

- Staff time spent on HIV/AIDS in the Natural Sciences, Culture, Social and Human Sciences and Communication and Information sectors is relatively small. In the Education Sector between four and five full-time posts are now dedicated to HIV/AIDS. A full-time HIV/AIDS education expert has recently been funded by USAID.

- Most of the staff have a general technical background relevant for working on HIV/AIDS, but few are experts on HIV/AIDS and education and with relevant experience.

- IIEP has the managerial capacity to manage UBW funds and coordinate UNESCO’s HIV/AIDS activities, but the Coordination Unit does not play a major technical role.

- Both IBE and IIEP Clearing Houses have important capacity and relevant expertise in knowledge management.

- Skills and capacity in strategic planning is scarce. The same is true for monitoring and evaluation of HIV/AIDS activities except for regular reporting.

- Regional studies demonstrate extreme variation in capacity: The Regional Bureau in Bangkok has a reputation of strong capacity and commitment to HIV/AIDS, but the regional HIV/AIDS unit is young (established in August 2002) and extremely fragile, supported only by short-term staff and consultants. Small National Offices in the Asia and Pacific region (e.g. case study from Viet Nam) have not had any HIV/AIDS capacity until recently. The Regional Bureau has been able to establish and support focal points in 12 UNESCO Offices and provided funds to Hanoi and Beijing and allocations are planned for Jakarta, Almaty and Apia to hire full time consultants to work on HIV/AIDS and school health.

- In UNESCO’s Regional Bureau in Nairobi the Programme Officer for publications was designated as the HIV/AIDS focal point in 1997 and gender focal point in 1998. No training was provided for these new responsibilities. Since then she has also been appointed focal point for youth and culture. Although little time was devoted to HIV/AIDS in 1997, she estimates now that 60% of her time is spent on HIV/AIDS.

- In BREDA – UNESCO’s Regional Bureau in Dakar, an associate expert was appointed focal point for HIV/AIDS activities in 1999. In 2002, a programme assistant was recruited. When the associate expert left in early 2003, a local programme officer was employed. The HIV/AIDS focal point and the programme assistant do not work full-time on HIV/AIDS activities. They estimated that roughly 80% and 100% (then that makes it full-time) respectively of their working time is devoted to such activities. There is also a documentalist working part-time on the BREDA HIV/AIDS information clearinghouse.

15 An HIV/AIDS adviser supporting Field Offices was seconded from DFID until December, 2003.

16 The assignment of “focal points” for specific areas of work does not come with it any funds with which to carry out work in the given area.

17 The educational backgrounds are excellent; one Ph.D. in natural sciences and one Master’s degree in social sciences. It is a good combination for multi-sector work in HIV/AIDS. In addition, both had previous experience of working with HIV/AIDS issues in different capacities (in clinical as well as in social science, applied research).
Office mobilises almost two person years of work each year – or somewhat below 30% of the total professional personnel resources.

- As for human resources in UNESCO Windhoek, there is only one person assigned to HIV/AIDS and education. Her time is divided among several tasks related to her position as education programme officer. Given that Namibia is a Cluster Office serving five countries (some of which have high levels of prevalence such as Swaziland, Lesotho and South Africa), the case study found it surprising that UNESCO had not hired somebody full-time to work exclusively on HIV/AIDS and education for the five countries.

- Regarding human resources for HIV/AIDS and education, the Mozambique National Office has one person working full-time on HIV/AIDS and education, assisted by the programme officer who coordinates the youth UNFIP project. The fact that the Office has somebody assigned full-time on HIV/AIDS and education has been a plus in the work of UNESCO and has contributed to the increased credibility and leadership of UNESCO in this area. The problem is that the focal point on HIV/AIDS is an associate expert paid by the Netherlands government and her contract ends this year.

- UNESCO has no system of introduction and professional development in HIV/AIDS work for their staff.

The case studies found that UNESCO staff working on HIV/AIDS are mostly employed on short-term consultancy contracts. Several contracts last for only one to three months. This is an arrangement that does not provide the necessary continuity for the work. It is an uncertain working solution for the individuals concerned and the risks are high that the organisational learning experience will be lost if contracts cannot be renewed in time – or if more competitive alternatives appear for the individuals concerned. An effective response to HIV/AIDS requires coordination within the Organisation, as well as with external agencies. Whereas consultants can do these tasks, the work would be better served by permanent staff. Coordination builds on negotiation and persuasion and in a complex and hierarchical organisation such as UNESCO, where there are many alternative uses of resources, a permanent post at senior level would also have more bargaining power than consultants on temporary posts. If UNESCO genuinely assigns priority to HIV/AIDS activities, it is necessary to create permanent posts in this field.

**Technical Expertise or Capacity for Network Management**

UNESCO is a specialised UN agency – with a comparative advantage not in funding projects, but in normative and technical work. A challenge for UNESCO is its broad mandate and the inability to recruit experts in all areas of its mandate. In principle, there are two ways out of this dilemma: UNESCO could select only a few programmatic priorities from its broad mandate, invest most of its resources in those areas and do them well. There have been efforts of setting clearer priorities in UNESCO, but the process has been slow and not very successful at least in the area of HIV/AIDS.

Another approach is for UNESCO to redefine its comparative advantage as a specialised agency in education and HIV/AIDS – in other words drop the idea and ambition of having in-house technical expertise and only bring in external international experts and consultants when required. Instead of having the knowledge, UNESCO could become the manager of a technical network – a broker of knowledge in which UNESCO staff have a
more general educational background, but with the skills to work with and support technical areas – also HIV/AIDS.

This sounds like an intriguing idea for a resource-constrained organisation. UNESCO’s comparative advantage would neither depend on funds, nor expensive in-house experts, but the capacity to identify and effectively utilise (broker) international knowledge. Such an approach has been discussed lately at senior management level in the Organisation.

We believe there are several problems involved in such an approach:

- UNESCO should not aim at technical excellence in all thematic areas, but such excellence is required in priority programme areas. UNESCO has defined HIV/AIDS as a priority, but has not yet matched the priority with human and financial resources. If this does not happen or is not possible, UNESCO may have to admit that HIV/AIDS is not a top priority.

- UNESCO is not a research organisation and does not necessarily need technical research expertise, but a priority programme area would need staff with a solid theoretical background and, not least, practical experience from relevant HIV/AIDS work. The case studies show what happens with HIV/AIDS focal points being reduced to workshop organisers and project administrators. They also document what a few committed and experienced focal points can do even with scarce resources from the regular budget.

- Effective networks are most often personal and maintained through exchange of information between equals - members receive, but are also expected to share and have something to share. A generalist – or a new UNESCO staff member with no previous HIV/AIDS experience does not easily access formal, and certainly not informal, HIV/AIDS networks.

- A stockbroker needs to know the stock market. A UNESCO HIV/AIDS focal point needs to know HIV/AIDS. If UNESCO wants to provide international leadership in education and HIV/AIDS and to be taken seriously – the organisation needs staff with international credibility and trust – and not only the ability to bring in external expertise.

- If UNESCO is reducing its contribution to HIV/AIDS to a “brokering role”, countries and UNAIDS partners will bypass UNESCO and access the technical experts directly. Why should UNICEF or a member country approach UNESCO for advice, when they can contact national and international experts themselves? With a brokering strategy UNESCO may undermine its own future relevance.

3.4. Strategic Planning Instruments

The way UNESCO plans its response to HIV/AIDS has a bearing on roles and performance – and in particular its long-term strategic planning. The case studies indicate that UNESCO has weak strategic planning instruments while others are missing. Such deficiencies point to important systemic constraints for processes of implementation.

A Lack of Overview

When preparing the case studies for the evaluation it was difficult to obtain a complete overview of UNESCO’s support to HIV/AIDS activities in countries and regions even if a picture emerged over time. There was no regional or country programme document providing such information. A manager in UNESCO who wishes to know about the level of HIV/AIDS spending would not easily find the data.
Data on activities funded from regular budget and extrabudgetary funds has to be collected from various sources (SISTER and EASY data bases). SISTER – System of Information on Strategies, Tasks and Evaluation of Results – the new mandatory tool for results-based programming, management, and monitoring was not found very helpful for the country studies – partly because information was incomplete and/or inaccurate when looking at country level activities. As a result, it was difficult to determine the amount of resources spent on HIV/AIDS and to get an overview of all HIV/AIDS activities.

**Missing Programme Level**
Strategic planning tools and systems are missing at the programme level. Long-term corporate priorities are articulated in the Medium Term Strategy and the two-year Programme and Budget. Global and regional policies and strategies are formulated providing broad guidelines and intentions, but there are no country or regional programme documents defining objectives and activities supporting the direction for regional and country work. The regional or country “programme” is more an aggregate of discrete activities taking place in UNESCO’s various sectors.

There are cases in which UNESCO supports broader programmes at country level. The argument is that such examples are not supported by strategic planning tools or articulated in programme documents. A coherent regional and country response to HIV/AIDS from UNESCO is, in general, not based on a specific situation and feasibility analysis at country and regional level followed by a programming exercise.

**Too Short Planning Cycle**
The two-year global budget cycle is also too short for a long-term strategic approach to regional and country level efforts. Building of capacity requires continuous programmatic efforts. UNESCO often ends up with a series of stand alone activities due to shortage of funds as illustrated in several of the country cases. Shortage of funds complicates planning, but is not an argument against a stronger programmatic approach. On the contrary, a premise behind strategic planning is to position and use scarce resources more effectively.

**Shift Attention from Policy to Programme Planning**
The case studies pointed to the lack of knowledge about UNESCO’s preventive strategy in the Organisation and among external stakeholders. They also showed that the level and quality of response was not linked to such knowledge or even the presence of a strategy. UNESCO needs strategy documents, but the importance of such documents should not be overestimated.

UNESCO should shift its attention from producing general policy statements to more substantive programmatic planning at regional and country level.\(^{18}\) The regional and

---

\(^{18}\) Two consultants were employed to develop a regional strategy for Sub-Saharan Africa. It reads more like a situation report and analysis with recommendations, than an organisational strategy for a particular group of countries. It consists of 75 pages of text, which alone makes it less suitable as an explanation of strategic intent. It is divided into eight chapters, again more like a book than a strategy.
country adaptation of the global strategy should be a brief process and result in a short
document. Time and resources at regional and country level should be invested in
preparing selected programme areas based on UNESCO’s comparative strengths, specific
needs, and availability of human and financial resources.

3.5. Structure of HIV/AIDS Coordination

Another important feature is the internal coordination of HIV/AIDS in which UNESCO
has followed an untraditional pattern by placing the central coordination in one of the
Institutes. In January 2001, the Director of IIEP, Mr Gudmund Hernes, was appointed by
the Director General to chair an inter-sectoral working group to develop a comprehensive
and visible strategy on HIV/AIDS, focusing particularly on the role of preventive
education. The group met during February 2001 and had by the end of the month
prepared a draft paper. The full document, “UNESCO’s Strategy for HIV/AIDS
Preventive Education”, was presented by the Director of IIEP at a meeting of UNAIDS
CCO in Nairobi in April, published in the same month and enthusiastically approved by
the Executive Board in May (Woodhall 2003).

Subsequently, in October 2001, the Director General confirmed Mr. Hernes as UNESCO
Coordinator for all the Organisation’s HIV/AIDS programmes and projects, with
responsibility for “ensuring the coherence of the UNESCO programme in the field of
HIV/AIDS and for inter-agency coordination within the framework of UNAIDS”. IIEP
established a HIV/AIDS Coordination Unit and the Director General appointed also a
UNESCO focal point for HIV/AIDS. IIEP also coordinates an HIV/AIDS Clearing House
which aims to be a “source of recent and reliable documentation and research
concerning the impact of HIV/AIDS on education”. The plan according, to the Director
General was that the coordination function would revert back to the ADG for Education
when a new ADG was in place, but this did not happen.

The high profile and vigorous efforts of IIEP in preparing a HIV/AIDS strategy and
taking an active lead in the coordination of UNESCO’s response have had numerous
benefits for UNESCO as well as IIEP – and also some drawbacks. On the positive side:
with its relative autonomy as an Institute in UNESCO, IIEP was able to move fast and in
a short period of time prepare a global strategy placing HIV/AIDS on UNESCO’s
agenda. IIEP was also able to establish a structure for coordination between sectors in
UNESCO and provide management of UBW support from UNAIDS. UBW funding had
been withheld for one year in 2001 because of UNESCO’s delinquency in reporting, but
UNAIDS decided to resume funding in 2002. The result was a significant expansion of
funding and a higher visibility of UNESCO’s response globally, beginning in 2001,
among UN and government partners.

The personal commitment behind the process was important. IIEP had also the
administrative infrastructure in place to manage planning, implementation and reporting
processes for UBW funds. By being outside UNESCO Headquarters, IIEP could also work with all sectors and in principle, facilitate an inter-sectoral approach.

UNESCO’s HIV/AIDS profile would have been much weaker without the active involvement of IIEP, but most organisational solutions have their drawbacks. It is an open question if IIEP should continue coordinating UNESCO’s HIV/AIDS activities also when the current Director retires in 2004.\footnote{During the process of finalising this report we were informed that the Director of IIEP will not retire before the end of 2005 which gives UNESCO more time to plan, but does not change the following arguments and options.} It is an organisational anomaly to locate a coordination function for an important cross-cutting issue in one of UNESCO’s Institutes, but it has worked, and worked quite well in a mobilisation and building-up phase. Another organisational solution may be required when entering a period of consolidation and further expansion.

The role as HIV/AIDS Coordinator was given to Mr Hernes in his personal capacity and partly based on his reputation for efficiently driving through large reforms in the health and education sectors. The support to this arrangement was not found to be wholehearted from all Sectors and Field Offices. The short time in which the strategy was prepared did not create and ensure sufficient ownership in all corners of UNESCO – and in particular not in regional and country offices. The HIV/AIDS Coordination Unit has also limited opportunities – and power – to ensure effective coordination. In the coming years, there is a need to increase and secure the involvement and ownership to the HIV/AIDS response from all sectors in UNESCO which may require a stronger mandate and platform for the Coordinator. Coordination cannot be imposed from the top, but formal authority helps.

A new organisational location for HIV/AIDS coordination in UNESCO should bear in mind that:

- Personal commitment and interest is important for driving an inter-sectoral response – often more important than formal authority and position.
- A new HIV/AIDS Coordinator should be recruited externally – a person with technical credibility and ability to position UNESCO among UNAIDS partners\footnote{There seem to be few, if any suitable internal candidates. An active recruitment process is required. There are also few external qualified candidates and he/she is most likely not looking for a job.}.
- The HIV/AIDS Coordination Unit needs sufficient skills and capacity for managing projects and funds, to be involved in planning and reporting, etc.

There are, in principle, five options:

(a) Coordination could continue in IIEP – depending on the interest and willingness of the new Director to take on such a role. There are several pragmatic reasons for such an option (existing experience and capacity, etc.), but this solution seems not to be ideal.

(b) Coordination could be placed in one of the Sectors and with UNESCO’s focus on preventive education – Education would be the most obvious Sector. Such a solution could, however, be seen to contradict the inter-sectoral nature of the response. The other sectors could lose interest and motivation by being
Implementation

reduced to “supporting sectors” for UNESCO’s response to HIV/AIDS. The commitment from the Sector Management is also questioned.

(c) It could be placed in the Bureau of Strategic Planning (BSP) having an overall and inter-sectoral mandate in the organisation\(^2\). But BSP’s mandate is planning - not implementation and BSP has not sought a coordination role for implementing the Organisation’s activities. The managerial capacity to be responsible for HIV/AIDS coordination is also currently limited.

(d) The HIV/AIDS Unit could also be placed directly under the Director General as a Unit with an inter-sectoral mandate.

(e) The most radical solution would be to locate the coordination function in one of the Regional Bureaux – for instance Bangkok or Nairobi. This could be part of UNESCO’s efforts to decentralise and shift human and financial resources from central level (Headquarters and Institutes) to regions and countries. Given that such a Coordination Unit would need to be in close contact with all sectors in Paris and UNAIDS coordination at Headquarters level – a central HIV/AIDS Unit would still be required. A compromise would be to keep a small global level secretariat in Headquarters and decentralise more of the programmatic coordination to regional level.

An active search for a new coordinator should start early 2005. The arguments in favour of and against the two major options should be discussed further: (a) a location in the Education Sector and (b) in the Director General’s Office. The Education is currently most affected by the epidemic and also most involved in terms of activities and staff. The inter-sectoral nature could be emphasised more strongly by locating the HIV/AIDS Unit directly under the Director General. However, distance to the Sectors could occur and also complex lines of command. Several other programme areas may also pressure for a similar organisational status. These and other arguments need to be discussed further.

3.6. Processes of HIV/AIDS Coordination

Whereas the section above dealt with the structure of coordination, this section will look at how coordination is actually achieved; that is, how the practical work to make sure that the results are coordinated is done. It is useful to remember the words of Herbert Simon that “much effective coordination is quite messy in the process”. What Simon meant to say was that the work of coordinating activities is built around compromises and mutual adjustment, and the decisions to achieve these compromises mostly involve some form of sacrifice. It hurts to coordinate, but in the end the results are better.

None of the country studies indicated that there was a problem with overlapping activities. In an organisational review such as this, it could be expected that parts of the Organisation takes initiatives and start activities that someone else has already done, or that some unit would think is within its mandate, and not in another place. Rivalries around common themes would not be uncommon. However, UNESCO is different. It does not have that problem. Nowhere did the evaluation find overlapping activities or in that sense wasteful use of scarce resources.

\(^2\) Gender as a cross-cutting issue is located organisationally in BSP.
The problem is, rather, that activities do not benefit from each other as much as they could do. Information on HIV/AIDS activities is not easily accessible, and hence if a Field Office in one part of the world gets engaged in a capacity building project, it cannot easily find if there are any lessons learned from a similar project elsewhere in the Organisation. In practice, the means of coordination around HIV/AIDS activities is a functional and geographical division of labour.

Given that coordination is achieved through division of labour, the question is then how UNESCO ensures that coordination – in the sense of knowing what others are doing, learning from them, contributing to their work, etc. – is achieved. In principle, there are three means of coordination: (1) decision-making and orders, forcing coordinated practice on Field Offices and Sectors; (2) mutual adjustment, whereby people are encouraged and given the means to learn from each other, seek assistance and solve problems together; and (3) through the creation of networks for information exchange. The existence of a formal network could by itself create coordination, but could also be a step towards more frequent mutual adjustment. UNESCO has adopted the network approach and there are such networks at global, but also at regional level (e.g. in the Bangkok Office).

The HIV/AIDS Consultative Group is a useful coordinating device at Headquarters level.\textsuperscript{22} It meets regularly, and it combines sticks and carrots. It has the function of reviewing budgets, commitments and expenditure. It also serves to exchange information. To some extent it works well, but there are also shortcomings. The ADGs are supposed to attend, but do not any longer attend any of the meetings and representation is at a consistently lower levels. As a result, the Consultative Group is not a high-level decision making body.

One of the most interesting, and possibly also most controversial projects is the one on the development of a mother to child vaccine, which is managed from the World Foundation for AIDS Research and the Natural Sciences Sector. In October 2003 many of those present in the Consultative Group meeting were not aware of the existence of this project, though it is one of the flagships and, if successful, could be one of the most important contributions from UNESCO to halt the epidemic\textsuperscript{23}. It reflects poorly on coordination that many did not know about it. The evaluation has also found that few UNESCO staff members had any grasp of what the organisation does in Brazil, and that is after all where 95\% of the funds are spent. If people do not have knowledge, they cannot make effective contributions if called for.

The construction of a network for cross-cutting work is necessary, but a great challenge. The major lines of communication are said to be vertical, and to break that tradition will take time. The HIV/AIDS network seems to represent a form of innovative sub culture in

\textsuperscript{22} In the Bangkok Office there is also a HIV/AIDS Coordination Unit working with the Education, Culture, Social and Human Sciences and Information Programs and Services Units as well as with all other UNESCO Offices and National Commissions in the Asia-Pacific Region.

\textsuperscript{23} The World Foundation is an independent entity, but located in UNESCO and with historic and informal links to UNESCO.
the Organisation. Members appear to be younger than average, and there are more female participants than one would have assumed from overall organisational employment statistics. This indicates a stronger, innovative, practical and results-oriented approach to work, but could also be a problem, as it means that the network has a sub-culture that is less hierarchical and tradition-bound than the rest of the Organisation – and also with less power.

There are organisational units that have a special role to play in coordination. The Bureau of Field Coordination is the first place to look. However, the coordination done there is primarily of two kinds; the first is to disseminate information that could be of use. This is essential, and it would be the first step that could facilitate mutual adjustment and learning from activities across the organisation. The second aspect of coordination is decisions on posts, transfer of personnel, and related human resource management of the field office structure. Whereas the first aspect of work relates to substantial coordination, it is also not much. It leaves the actual work to staff in different parts of the Organisation, and that is also realistic. Coordination from a Bureau at Headquarters would hardly be effective if it came to take coordinating decisions that must be done at local levels.

The Bureau of Strategic Planning could also coordinate activities by setting priorities, controlling approval of activities, and the like. However, according to the Blue Note issued by the Director General in 2001 (DG/Note/01/28) IIEP is given the responsibility for planning-coordination and strategy making for HIV/AIDS. The overall strategic planning tools and documents were so wide that they left Field Offices room for whatever local response they found appropriate. This is also realistic; the problem is that organisational rhetoric indicates a more proactive coordination process, with less “laissez faire”.

As coordination is mainly through division of labour, there are few instances where a multi-sectoral approach is realised at the level of activities. In the Field Offices, people keep each other informed. The organisations are so small that information is easily shared. In Jamaica, for example, everybody knew that a youth project of the culture sector contained a section on culturally appropriate HIV/AIDS messages, and there was an interesting evaluation component. However, that activity did not borrow any competence from other sectors, nor did it contribute to work done there – at least not as far as could be observed by the evaluation. In conclusion, multi-sectoral in UNESCO today means that several sectors contribute in the struggle against HIV/AIDS; it does not mean that they cooperate to integrate perspectives, competence, methods and instruments.

3.7. Decentralization
Much of the empirical data in this evaluation comes from Field Office visits. As the evaluation conducted many interviews at UNESCO Headquarters in Paris, there are observations on the nature of relations between Headquarters and Field Offices. There is always a strained relationship between the two concerning, for example, the control of funds. To what extent can the HIV/AIDS activities be said to emanate from central
decision-making processes, and to what extent are they formed by local responses to events and decisions taken locally?

At a first glance, it would seem as if UNESCO is a strongly decentralised organisation. More than 95% of the annual budget for HIV/AIDS activities is taken without any formative influence of Headquarters. That is because more than 95% of the budget comes from the government of Brazil. It is the UNESCO office in Brazil that is the main partner. Naturally such a major programme of significant policy implications needs to have Headquarters involved in the decision. But the driving force in the programme and its development is the Office in Brazil and its partnership with the government. Thus, most of the money used for HIV/AIDS is subject to decisions in a Field Office.

To relate the concept of decentralisation to control over global budget is one thing but control over the regular programme budget and UBW another issue. The process here is that Field Offices are encouraged to propose activities. These are then subject to decisions at Headquarters. There are very few directives on what initiatives to take, or rather, as that is supposed to be shaped by the strategy, almost everything could be possible as long as it relates to the cornerstones of the strategy and the roles of the Organisation.

But then the decisions on which projects to approve are taken centrally, by the HIV/AIDS Consultative Group. At Field Offices, it is not clear how decisions are taken. Some Field Offices note that they made suggestion of activities with a budget of several tens of thousands on US$, but received an allocation of a quarter of that amount, and with no explanation of how the selection was made and why. Other Field Offices had all proposals accepted, but still without any explanation of motivation. Not only are such important decisions centralised, they are also not transparent, and hence it becomes difficult for Field Offices to plan with a reasonable degree of certainty.

Decisions in relation to personnel are also centralised, and perhaps it could not be otherwise. It is beyond the scope of this evaluation to enter into the personnel and human resource policies of UNESCO. However, it is quite clear that the centralised nature of appointments and decisions on consultancy contracts is an obstacle to the local responses to HIV/AIDS. During the field visits the evaluation team saw several examples of where the UNESCO Representatives wanted to strengthen the Office by making posts permanent, or by securing longer-term consultancy support. The funds were available, but the decision to change the nature of posts rested with Headquarters and the response from there was to disapprove of or delay the suggested decisions. There is no doubt that decentralised decisions on personnel issues would have secured the human resources necessary for an effective response, whereas the present decision-making process has delayed and fragmented the response.

In sum, the Field Offices are free to shape their response to the HIV/AIDS challenge as they best see fit, within the overall framework of activities suggested by the strategy. They can do so as long as they do not demand any services from Headquarters in terms of personnel or budgetary allocations. Most of these decisions are still taken centrally. But if
Implementation

the Field Offices can develop initiatives, mobilize funds, negotiate structures for implementation, and manage activities, they are welcome to do so.

This does represent a form of decentralisation; it would be possible to imagine a closer Headquarters control over new initiatives and, for example, negotiations for trust funds. UNESCO Kingston has mobilised substantial amounts of funds from the government of Japan and from the Inter-American Development Bank. These negotiations have not been facilitated by Headquarters, nor have they been constrained, apart from the question of the administrative charge of 13% that is claimed by Headquarters.

UNESCO has a decentralisation strategy that aims to increase UNESCO’s effectiveness in the field organisation. It should be seen as a means to ensure that UNESCO designs and implements programmes that, although global in scope, are adapted to the needs and specific circumstances of Member States. One of the key issues is the new management approach with more delegation of authority accompanies by accountability. There is also to be an enhanced decentralisation of programme accompanied by budget and staff. As far as regular programme budget is concerned, it is only around 3% of the budget that concerns HIV/AIDS activities, and the control of how this money is spent still relies on centralised decisions. We have not seen any effect in terms of delegated authority or control of budget decisions or staff relating to HIV/AIDS activities – outside Brazil and in respect of the extrabudgetary funds that field offices may negotiate.

3.8. Concluding Remarks

This chapter argues that internal processes for implementing the response to HIV/AIDS affect how UNESCO performs its roles and what results are achieved. After analysing how UNESCO roles are performed in practice, the chapter shows that the internal human resource base is limited and weak and does not cover all relevant types of expertise. It is also argued that UNESCO needs a core group of staff with sound theoretical knowledge and broad practical experience from HIV/AIDS work in order to be a credible network organisation. There are weak and/or missing strategic planning instruments, like an effective and reliable information management system providing an overview of programmes, funds and progress, a programme level at country level and too short a planning cycle. UNESCO needs to recruit a new HIV/AIDS Coordinator and identify a new location for the Coordination Unit – either in the Education Sector or directly under the Director General.

Processes of coordination do not ensure sufficient sharing of information between Sectors and Offices. The means of coordination is a functional and geographical division of labour. The construction of a HIV/AIDS Consultative Group is useful, but the major lines of communication and coordination have remained vertical and to break the tradition will take time. Despite the ongoing restructuring process, UNESCO is still a relatively centralised organisation. The Field Offices are free to shape their response to the HIV/AIDS challenge as they best see fit, within the overall framework of activities suggested by the strategy. They can do so as long as they do not demand any services from Headquarters in terms of personnel or budgetary allocations.
4. PARTNERSHIPS

Even though UNESCO is a specialised agency of the UN system, and a fairly large organisation by any standards, it is dependent on others to create results. As we have seen in the previous chapters, the financial resources are limited and an effective response depends on the ability to partner with organisations that have more financial clout and that possess competent staff, innovative ideas, and additional networks.

UNESCO’s part in the Brazilian government’s success in reversing the spread of HIV/AIDS is largely due to an effective partnership with civil society. More than 1,000 NGOs were contracted to take part in the initiative. It is by no means obvious that an international bureaucracy should establish close links to NGOs in the HIV/AIDS community. But it can be done, as shown by UNESCO, and it can be very successful. But what are the other partnerships?

In this analysis, we discuss three different kinds of partnerships: (1) with the international community – that is, co-sponsors of the UNAIDS, other UN agencies, funds and programmes, and bilateral development agencies; (2) national governments and public authorities in Member States; and (3) NGOs, civil society organisations, research institutes and universities, as well as the business community. Furthermore, it is possible to distinguish partnerships at different levels: globally, regionally and nationally. This is illustrated in the table below.

The table anticipates the analysis; in our findings UNESCO has strong partnerships with most actors at the national and local levels, and a weaker but nevertheless essential relationship with actors at regional level. However, UNESCO is often not seen as a strong partner at global level; Member States have low expectations and other international organisations doubt that UNESCO will be a major player. The challenge is to build on the partnerships that have proven effective and change the expectations and perceptions of partners at other levels.

<table>
<thead>
<tr>
<th></th>
<th>International community</th>
<th>Member States and public authorities</th>
<th>NGOs, civil society, academic institutions, business community</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Global</strong></td>
<td>Weakly developed, but high expectations of UNESCO</td>
<td>Weak in respect of HIV/AIDS and low expectations</td>
<td>Weak links, not much interaction</td>
</tr>
<tr>
<td><strong>Regional</strong></td>
<td>Few regional meeting places, limited activities</td>
<td>UNESCO activities contribute to regional exchanges</td>
<td>Regional links reinforced by UNESCO activities</td>
</tr>
<tr>
<td><strong>National</strong></td>
<td>Mixed experiences, but sometimes strong and substantial partnerships</td>
<td>High potential and strong links, but not much used for HIV/AIDS work</td>
<td>Strong links and good working relations</td>
</tr>
</tbody>
</table>

Table 4.1 Effectiveness of partnerships
4.1. Partnership at the National Level

The kind of partnerships that UNESCO forms in different countries varies considerably. Nothing else would be expected. The quality and intensity of partnerships is strongly correlated with the financial and human resources that UNESCO devotes to HIV/AIDS work. In the countries where UNESCO did not invest in HIV/AIDS prevention, potential partners in the UN system disregard the Organisation and express disappointment. Where UNESCO takes active part, devotes financial and human resources, it is an appreciated and highly regarded partner. Perhaps the most striking observation is that it does not take much to make a difference; it is often a relatively small investment in personal time and a share of the budget that is required. Most UNAIDS partners are well aware that UNESCO has limited financial resources, but technical inputs are expected.

There is only a brief chapter on partnerships in the global strategy and the concept of achieving results through complementary partnerships is weakly developed. Such a concept is partly based on an understanding of roles – that different agencies play different and complementary roles. As long as the strategy of UNESCO has not clearly defined its roles as a specialised agency, the partnership concept will suffer. The other UNAIDS partners are uncertain what to expect from UNESCO. They realise that UNESCO will not be able to contribute significant financial resources, but they are not always certain what level and type of technical expertise UNESCO could provide in the area of HIV/AIDS either.

Partnerships with UN Organisations

UNICEF in Bangkok made the comment that UNICEF and UNESCO staff profiles were quite similar. They could offer more or less the same in terms of experience with and expertise in for example child development and life skills education. It also takes time to develop internal competence and capacity and UNESCO entered the HIV/AIDS arena late. UNESCO has so far had little to offer in a global partnership where there is an expectation of reciprocity.

The box on next page presents the analysis made of coordination between the UN agencies in Jamaica. In sum, there are three distinct patterns of how the partnership is enacted among the UN organisations.

- First, there are some agencies that UNESCO works closely with; the agencies develop activities together, as UNICEF and UNESCO do to strengthen the Ministry of Education. UNESCO worked together with UNODC in Brazil and in Vietnam, together with UNDP, UNICEF and UNFPA in Thailand.

- Second, there can be an exchange of information in the UNAIDS thematic group, but by and large the organisations work each within their own field of expertise and competence. Their cooperation is based on a division of labour, where each agency develops its own activities together with government and/or civil society.

- Third, there are also cases of overlapping ambitions and activities, which may lead to rivalries and competition for resources. Table 4.2 outlines the main forms of partnership in the different countries visited in the course of the evaluation (It is of course a question whether the third variety
could be called “partnership”; we choose to do so because, formally speaking, the agencies are partners as co-sponsors of UNAIDS).

Box. 4.1 UN coordination in respect of HIV/AIDS on Jamaica

In Jamaica, there were four working groups to coordinate the work between government and international organisations under the umbrella of the UNAIDS thematic group. There is one where only the UN specialised agencies, funds and programmes meet, and there is one which also includes the multilateral financing agencies, bilateral funding agencies, and government of Jamaica. It is the latter of these that is the most important group. It is presently chaired by UNICEF and before that PAHO. It has not yet been chaired by UNESCO.

The Strawberry Hill consultations is another venue for UN coordination that has been initiated by UNESCO (named after the location where they take place). The UNESCO field office took the initiative to call the first of these meeting in mid-2002. The different UN agencies met to discuss approaches to HIV/AIDS and experiences of the agencies. The first seminar was appreciated, and a second meeting was organised in mid-2003. As the meetings were hosted by UNESCO, introductory speeches informed the participants on UNESCO’s role and activities and thus raised their awareness of what UNESCO does.

Since 2002, UNESCO Kingston has published an electronic newsletter, which is also strongly appreciated by others working in the field of HIV/AIDS. It shares information about activities and sums up major events. It is a well-designed newsletter, reader-friendly and to the point. It has enabled the Office to reach out to UNAIDS thematic groups in the Caribbean outside Jamaica, which was the main rationale for developing the newsletter.

In the Jamaican context, UNESCO works closely together with UNICEF. The two agencies cooperated in strengthening the internal HIV/AIDS coordination in the Ministry of Education. They have common interests in reaching children and youth in and out of school. Life-skills education is one of the largest UNICEF programmes in the country. UNESCO has developed teaching and training materials that are of relevance for this programme. UNESCO’s work in capacity development will also strengthen life-skills education. The presence of UNICEF’s program also contributes to the achievement of UNESCO’s objectives. There is a good partnership between the two agencies. Similarly, UNESCO worked together with IDB to develop the technical assistance project, and will continue to work with the Bank in implementation.

UNESCO’s relation to several other agencies is based on a division of labour. The agencies are partners in the UN effort to fight the epidemic, but the partnership builds on a division of labour according to each agency’s comparative strengths, and at times on an explicit choice to work with different aspects of the disease. UNFPA focuses its activities on care and protection of those affected, especially vulnerable children. It does not work in the same areas as UNICEF, and besides it has a geographic focus on Belize, Guyana and St. Lucia. PAHO works closely with the Ministry of Health and the National AIDS program, all building on its role as a technical agency. During each of our visits to other agencies, we asked which other UN organisations had a significant role to play in UN coordination as well as in contributing to the fight against HIV/AIDS in the region. All except one mentioned UNESCO as one of three most significant agencies. But they were careful to point out that it is a change which has come about during the past two to three years.
Why have the patterns of partnership developed as they have? It is not part of any strategy on the part of UNESCO, as the strategy does not distinguish between different types of partnership, nor does it suggest that some close working relationships would be a higher priority than others. UNICEF is very active in the field of HIV/AIDS, and with its focus on children and youth, it will naturally start to work in the education sector. Sometimes that will lead to joint activities with UNESCO, if there are UNESCO activities in the field of education, but at other times the result may be overlapping activities and a sense of lacking coordination. In some countries the evaluation found that UNDP expressed an ambition to be the lead agency in developing the UN system’s response to HIV/AIDS, and that is (often silently) resented by others, and leads to overlapping ambitions at the policy formulation level.

In countries such as Thailand, Brazil and Jamaica, the evaluation suggests that the partnerships are well-functioning. They build on a sensible division of labour and on some jointly developed projects. In other countries, it does not work that well, as for example in Senegal. This conclusion is based on the following indicators:

- First, the regional strategy for Sub-Saharan Africa has no review of activities by others, World Bank operations are not mentioned neither are WHO, UNDCP or UNDP. It seems as if the strategy has been developed without consultation or inputs from other UN agencies.

- Second, there are few cross-references to UNESCO work in the publications from other UN organisations. UNDP published a Human Development Report on Senegal. UNESCO is not even listed among the two pages of organisations whose abbreviations are explained, nor is UNESCO mentioned on any of the 216 pages, nor in the chapters on education, nor in relation to what is written about HIV/AIDS. The World Bank has recently published a resource book on HIV/AIDS interventions in Africa. It has no references to UNESCO’s strategies, and no reviews of UNESCO projects. There is a chapter on Senegal, and it is mentioned that UNESCO provided support to a civil society organisation, but with no details.

- Third, none of the 12 activities implemented by UNESCO were done in collaboration with any of the other UN agencies. As UNICEF has done much work and has much practical experience in life skills training, UNESCO’s development in this area could have benefited from closer cooperation.

- Fourth, interviews indicated that UN partners were not familiar with UNESCO’s HIV/AIDS strategies and did not know which activities UNESCO was engaged in. Some knew that there were activities in the field of the cultural approach, but that was all. However, the respondents also say that UNESCO has only recently started working with HIV/AIDS activities, and they look forward to more collaboration as the activities develop. Global partners are of the opinion that UNESCO does not deliver – as promised and expected.

---

Table 4.2 Patterns of collaboration with UN agencies in Field Offices

<table>
<thead>
<tr>
<th>Country</th>
<th>Joint activities, project and programme</th>
<th>Division of labour</th>
<th>Overlapping ambitions and rivalry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vietnam</td>
<td>UNODC</td>
<td>WHO, ILO, World Bank, UNICEF, UNDP</td>
<td>None</td>
</tr>
<tr>
<td>Thailand</td>
<td>UNDP, UNICEF, UNFPA</td>
<td>WHO, ILO, World Bank, UNODC</td>
<td>UNICEF (similar staff profiles)</td>
</tr>
<tr>
<td>Mozambique</td>
<td>UNICEF, UNDP, UNFPA</td>
<td>WHO, ILO, World Bank,</td>
<td>None</td>
</tr>
<tr>
<td>Namibia</td>
<td>None</td>
<td>WHO, ILO, World Bank, UNICEF, UNDP, UNODC</td>
<td>None</td>
</tr>
<tr>
<td>Angola</td>
<td>None</td>
<td>WHO, ILO, World Bank, UNICEF, UNDP, UNODC</td>
<td>None</td>
</tr>
<tr>
<td>Ghana</td>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Senegal</td>
<td>None</td>
<td>None</td>
<td>UNICEF/UNFPA (all offering similar manuals)</td>
</tr>
<tr>
<td>Lebanon</td>
<td>UNFPA, UNAIDS</td>
<td>UNFPA</td>
<td>UNICEF</td>
</tr>
<tr>
<td>Brazil</td>
<td>UNODC, WHO</td>
<td>ILO, UNICEF, UNDP, World Bank</td>
<td>None</td>
</tr>
<tr>
<td>Jamaica</td>
<td>UNICEF, IDB</td>
<td>WHO, ILO, World Bank, UNODC</td>
<td>UNDP</td>
</tr>
</tbody>
</table>

**Partnership with Civil Society Organisations**

Although UNESCO Dakar has not developed partnerships with other UN organisations, its work with the cultural approach has generated links to theatre groups, radio and other media, and other culture related groups. The work on theatre groups has received much attention and appears to be well known. In a recent research report on HIV/AIDS in Africa UNESCO’s publications on the cultural approach are the most frequently quoted references. The publications helped define the research questions and were also used in the interpretation of data and in the development of conclusions. So it is not only cultural groups, but also research agencies that recognize UNESCO and see the Organisation as an important partner. The project on HIV/AIDS and human rights also collaborates extensively with civil society organisations.

The experience from Brazil is also significant. In the overall implementation of the programme, the most important partnerships were with civil society organisations. All indications point to this as a special strength of UNESCO, and it is said to be one of the reasons why the government chose UNESCO as an implementing agency. UNESCO Kingston developed links to HIV/AIDS related civil society organisations as well as to

---

business (publishers). The links were formed by finding topics of interest in seminars and conferences. Since then the contacts have been maintained. UNESCO was helped by UNESCO Clubs in many secondary schools – at least in Jamaica. With such a basic infrastructure in place and with a relatively active National Commission with a good reference library, UNESCO has built credibility and new links can be formed around information-sharing and various pilot schemes.

In Lebanon the UNESCO HIV/AIDS Human Rights Kit has been translated into Arabic and introduced to a large number of NGOs. Involving youth and youth organisations is also a priority in the regional strategy. UNESCO Ghana has forged close partnerships with local organisations and with the HIV/AIDS coordinating organ the Ghana National HIV/AIDS Commission which is very active in all HIV/AIDS activities. The UNESCO National Commission was involved in the Elmina conference.

**Partnerships with Governments**

UNESCO National Commissions exist in all member countries and are usually located in Ministries of Education or Foreign Affairs. Both UNESCO Offices in Bangkok and Hanoi emphasised that National Commissions could be powerful partners in supporting the response to HIV/AIDS depending on their effectiveness and interest. A positive example is Lao PDR where the National Commission is involved in HIV/AIDS activities. The National Commission in Viet Nam was said to be strong (located in MOFA). The Commission had played a role in establishing partnerships between UNESCO and the Youth Federation in Vietnam.

The evaluation met with the Lebanese National Commission for UNESCO which is an independent entity in Lebanon funded by the Government. The Commission works actively with Associated Schools and UNESCO Clubs. HIV/AIDS information is disseminated through those two channels. The General Secretary also offers strong support to activities initiated by the Regional Office in Lebanon. The Commission has been involved in HIV/AIDS campaigns, but there seems to be an underused potential for more joint initiatives with the Regional Office also on advocacy vis-à-vis the Government and in particular the Ministry of Education.

The key partners in Namibia are the two Ministries of Education, especially the Ministry of Basic Education, Sport and Culture. The partnership is regarded as very strong and reciprocal. The participation of UNESCO in Ministry policy development on HIV/AIDS and technical support for EFA related activities is much appreciated by the two Ministries. Through the *Take Control Campaign*, the Ministry of Information and Broadcasting is another partner. Here the partnership is viewed as good, but it is thought that UNESCO could be a stronger partner in the area of information and communication.

In Mozambique, the partnership with the Ministry of Women Affairs and Child Welfare is relatively new but could become a strong one in the area of OVCs and HIV/AIDS. Other partners are: the Ministry of Education, through the EFA activities; the Ministry of Youth and Sports; National Youth Council (CNJ); and UNESCO Brazil Office through the Sharing Best Practices in HIV/AIDS preventive education project.
Most of the Field Offices are Cluster Offices. These are the main platform for the delivery of all UNESCO activities and are multidisciplinary in character. The contacts with national governments will depend on the size and complexity of the cluster. In the Caribbean region, Jamaica is special. UNESCO Kingston has a strong partnership with the Ministry of Education. But it is likely that the sense of partnership is less strong in other countries covered by the Office. The Office is expected to cover 19 countries with a staff of four programme specialists. Communication is quite difficult, distances are long and flight connections poorly developed. We suspect that if the evaluation were to visit the Ministries of Education in Surinam or in the Netherlands Antilles we would not observe the presence of UNESCO in HIV/AIDS related activities to be as strong as we did in Jamaica.

4.2. Partnership at the Regional Level

One of the features of UNESCO activities is that they often have a regional character; advocacy activities are directed at regional audiences; clearing houses of information serve a larger geographical area; there are capacity building projects covering several countries. UNESCO/UNAIDS Youth Initiative on HIV/AIDS and Human Rights aimed at raising awareness and understanding of HIV/AIDS related discrimination and other relevant human rights issues among young people, and in particular among youth organisations and student organisations. In 2002 there were training workshops in Indonesia, with representatives from 14 countries in the region, and in South Africa, also with participants from 14 countries. The following year similar workshops were held in Lebanon and Cameroon.

In Lebanon, UNESCO and UNAIDS organised several regional meetings – the so-called Brumana workshop – representing the kick-off for the strategy process and new activities. The workshop to discuss the life skills manual was also regional and brought together representatives mainly from ministries of education in the Arab States. There are few regional meeting opportunities like these, and it seems that UNESCO is one of the few organisations taking regional initiatives – benefiting in particular small countries. The Regional Office in Bangkok is also organising several regional and sub-regional meetings and workshops. The Kenya Office has facilitated a process that has resulted in the development of education sector HIV/AIDS policies in cluster countries. Together with USAID, UNESCO has engaged the Mobile Task Team (MTT) from South Africa to lead consultations to assist the ministries of education to systematically develop an HIV/AIDS policy. The process has come the furthest in Kenya but further consultations are planned in the other three cluster countries. Table 4.3 presents the number of regional activities that the evaluation encountered during field visits, and relates these to the roles of UNESCO.
Table 4.3 Regional activities in different UNESCO roles, as encountered in the Field Offices

<table>
<thead>
<tr>
<th>Country</th>
<th>Laboratory of ideas</th>
<th>Clearing house for information</th>
<th>Setting norms and standards</th>
<th>Advocacy</th>
<th>Capacity building</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vietnam</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Thailand</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kenya</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Namibia</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Angola</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ghana</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Senegal</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lebanon</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Brazil</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Jamaica</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

As the table shows, UNESCO does have many regional activities. Will this help or hinder achievement of objectives? It depends on what the alternative is. The evaluation observed a regional workshop in Senegal, and this was found to be effective. Targets were reached and the meeting had an impact. A particular problem is that this kind of regional meeting and activities will often be part of broader fields of causal events. Most of the time, one could not attribute change to these activities alone. They are nevertheless likely to be valuable, and they are highly appreciated by participants. It is a way for UNESCO to have a relatively strong impact with small amounts of money.

The question is when and how it is appropriate to speak of partnership? Inviting an organisation to a workshop, hosting such a meeting (often in cooperation with either the government or an NGO), is not in itself a partnership. Perhaps it can lead to forging partnerships in the future, but that depends on the purpose of the activity, and the capacity of participants to sustain links among themselves and with UNESCO. The work on Human Rights is a case in point; it would be right to say that UNESCO formed a partnership with the International Medical Students Association. They are the ones who join in producing the regional workshops. But as for the participating organisations, much as the venue is useful for them, they do not necessarily lead to a partnership with UNESCO.
4.3. Partnerships at the Global Level

The Joint United Nations Programme on HIV/AIDS (UNAIDS) was launched in January 1996. It is now made up of nine Co-sponsors and a Secretariat. UNAIDS is guided by a Programme Coordinating Board with representatives from 22 governments from all geographic regions, the nine UNAIDS Co-sponsors, and five representatives of NGOs, including associations of people living with HIV/AIDS. The Co-sponsors and Secretariat also meet twice a year as the Committee of Co-sponsoring Organizations (CCO). The Secretariat undertakes its own programmes when these are particularly innovative or when they plug a gap unfilled by the Co-sponsors. However, it also undertakes its coordinating/catalysing role through a variety of mechanisms such as:

- **UN Theme Groups on HIV/AIDS**, permit Co-sponsors, national governments (and, increasingly NGOs, international donors and national development agencies) to share information, plan and monitor coordinated action, and decide on joint financing of major AIDS activities within individual countries. There are now 129 such Theme Groups on HIV/AIDS; in many of them rotation of Theme Group chairs is increasingly practiced. As of February 2000, 40% of Theme Group chairs were from WHO, 25% from UNDP, 19% from UNICEF, 12% from UNFPA, 2% from UNESCO, 1% from the World Bank, and 1% from UNDCP.

- **Strategic Planning Development Funds** for projects prepared by national partners together with the Theme Groups. Over the 1998-99 period, the Secretariat channelled close to US$ 22.9 million (US$ 15.7 from the core budget and US$ 7.2 from multi-bilateral sources) through Theme Groups in support of countries' responses to AIDS, funding some 260 projects in 117 countries. The funds are considered “catalytic” as they often complement existing funding or directly leverage additional funding (US$ 14.7 million in 1998-99). Preparation and monitoring of most projects rests with one of the Co-sponsors (referred to as the “executing agency”), while actual implementation is by NGOs and national AIDS programmes. In 1998-99, UNDP was the executing agency for 40% of the projects, WHO for 29%, UNICEF for 14%, UNFPA and UNESCO for 4%, and national governments for 9%.

- **Inter-Agency Working Groups and Task Teams**. These have been created in priority areas including access to drugs, education, mother-to-child transmission and voluntary counselling and testing. As noted above, UNESCO chairs the Inter-Agency Task Team on Education.

As mentioned, UNAIDS consists of nine co-sponsors from the UN family. In terms of mandate, it can be easily seen that WHO, UNFPA and, to a lesser but still significant extent, UNODC have mandates directly related to the health aspects of AIDS. As agencies concerned with development, UNDP and the World Bank have more indirect mandates, but ones clearly justifiable given the impact that the epidemic is having on developing countries and those “in transition.”

In terms of comparative advantages, UNDP, UNFPA, UNICEF and WHO have powerful advantages in their field presence (i.e., numbers of offices and staff, past and ongoing programming); UNFPA, UNICEF and WHO have considerable expertise in their clearly defined fields; and, as funding agencies, UNFPA, UNICEF and World Bank clearly can bring enormous resources to programming.

---

26 UNAIDS/PCB(9)/00.2 2 May 2000. Provisional agenda item 3. Report of the Executive Director
Even though an area of work may rank highly within UNESCO, it still must be considered in relation to the rest of the UN response, particularly with reference to gaps, overlaps and duplication. First, however, the terms “gaps, overlaps and duplication” should be examined more closely for their implications to planning for real-world activities as complex as the response to AIDS.

- Gaps in the response would mean that some populations are not being served and significant issues are not addressed adequately. In some cases, where its mandate is appropriate or where comparative advantages can be brought to bear, these gaps should be regarded as opportunities for UNESCO to increase or better focus its contribution to the UN system response. For example, no agency has yet taken a clear global lead in advocating for or implementing AIDS-related services for aboriginal peoples.

- Overlaps are not necessarily negative. It can be perfectly valid for different organizations to overlap if, in doing so, each adds value to a valid effort. For example, the fact that UNESCO, UNICEF and UNODC are all highly involved in AIDS education should not be viewed as a problem so long as all add something positive in this huge field. Overlaps are negative, however, when they lead to duplication or when one organization performs its work significantly less effectively than another.

- Duplication occurs when similar services are being provided to the same populations, such that resources are wasted that could be better employed elsewhere. In such cases, each organization must ask if their value added is significant, and consider whether to put their resources elsewhere.

In the course of this evaluation, a number of representatives from different parts of the UN system were interviewed. The purpose was to provide feedback to UNESCO, through this evaluation, of how actual and potential partners perceive the Organization.

First of all, it is widely recognised that UNESCO is not a ‘programme’ fund and that it has few resources. Many of the respondents pointed out that UNESCO’s most effective work is seen to be carried out by certain regional offices e.g. Bangkok. UNESCO Headquarters has not demonstrated that it has adequate HIV/AIDS expertise. Several respondents mentioned that the IIEP Clearing House is a depository for materials which would be more useful if synthesised and integrated. It is uncertain how it is used at country level, but the majority of users are from developing countries and particularly Sub Saharan Africa. Through ongoing collaboration with the Education Research Network for West and Central Africa (ERNWACA) IIEP has been involved in capacity building in five countries in West Africa and two workshops were held in 2003 (Accra and Bamako).

The IBE Clearing House is also seen to be a useful initiative with a good screening of the quality of materials included on its website. Equally important, it is seen to capitalise on regional interest and build regional capacity through such activities as a workshop in Swaziland.

Second, good communication with the other organisations is essential. There were many complaints of difficulties in communicating with UNESCO Headquarters. This is seen to

---

27 Clearing house staff informed us that 25% of all 600 downloadable documents are summarised and in addition to several national synthesis papers.
be related mainly to structural factors (IIEP being outside the Headquarters Education Sector). One reason for asking UNESCO to chair the IATT was to ‘bring the agency in’ to the work on HIV/AIDS. While UNESCO responded by appointing a full-time focal point as requested, UNESCO Headquarters is seen to be providing poorer quality education expertise than before.

Third, respondents commented on the division of labour and roles. The Education IATT was established in 2001 with UNESCO as the chair, continuing an earlier group which had been chaired by UNICEF. The membership includes all UNAIDS Co-sponsors, a number of bilateral agencies and NGOs. In addition to UNESCO, meetings and activities have been hosted by the World Bank, USAID, Ireland Aid and CIDA. The IATT now has a membership of 65 persons (mostly representing institutions), and some 35 participants attend meetings.

Among the activities were capacity building seminars; a world wide survey on HIV/AIDS and ministries of education, a policy paper contributed to the EFA monitoring report; work on indicators; a policy paper on quality education and HIV/AIDS, etc. It could probably be said that the central task of the IATT was to produce the paper, *HIV/AIDS and Education: A Strategic Approach*. There are (naturally) different opinions on the output. According to interviews, UNAIDS wanted more of a policy framework which could be used with ministries of education, including those in low-prevalence countries. There are differing views on ownership of the paper. It was said that feedback from other IATT members was offered but not taken on board. As a result, people lost interest. Another view is that there is considerable ownership of the paper by all the IATT members.

It is very difficult to get to the bottom of the problem, as people have contradictory opinions on the collaboration. As evaluators we can note that these differences exist, but we did not have the time or the opportunity to find out who was actually right and who was wrong. Similarly UNESCO is viewed as providing weak leadership (again, according to the evaluation team’s interviews) in identifying critical issues in the field of education and HIV/AIDS, but of course UNESCO staff members have a different view of this. The criticism was substantiated by pointing at the preparation of the issues paper, at IATT meetings, and in planning future IATT initiatives, but on the other hand UNESCO staff can point to the achievements of IATT as mentioned above. The whole debate and the controversy is indicative of the difficulties of organising a fundamental contribution at this level.

**4.4. Concluding Remarks**

Partnerships are essential, and without strong partnerships UNESCO is not likely to create much of an impact from any of its activities. The analysis here shows that UNESCO has been most successful at building partnerships at the local/national level. It is often a well respected and welcome actor in respect of HIV/AIDS, but many regret that UNESCO is a late-comer.
The most successful partnerships have been with civil society organisations. UNESCO appears to have had a particular advantage in creating links with NGOs and collaborating with these. There are also strong links to ministries of education, schools, teacher training colleges, universities and research institutes. In many places, the National Commissions are active and useful, in some places they are dormant. In the latter case, reviving them and using them to develop activities may well be the most cost-effective way to develop activities.

UNESCO has many regional activities, and it appears to be an arena where few other actors have initiatives as diverse as UNESCO does. Whether it should be called partnership or some less intense form of cooperation is open to debate, but the point is that few other organisations provide the same opportunities for exchange of experiences between governments and NGOs on a regional level as UNESCO does.

The partnership with UN agencies is often based on a division of labour. The evaluation did not come across many instances of overlapping activities, though there were some such cases. There were many more examples of collaborative efforts, and against that background some overlap is not a major issue. Doing the same things at times testify to the importance of an issue, and can be seen as healthy competition and/or trial with different solutions to the same problem.
5. RESULTS

5.1. Methodological Issues

The ultimate aim for UNESCO is to create results – make a change in social and cultural variables affecting the spread and impact of HIV/AIDS. But what are the areas of results for UNESCO? Can the results be measured and does UNESCO have an adequate monitoring and evaluation system in place for measuring results?

We are using UNESCO roles as results-areas and the following summarise findings from our global, regional and country level studies. Results can be measured, but not all the results – at least not using the same methods.

Results cover three levels: the immediate results of implementing activities (outputs), their short term-effects (outcomes) and long-term impact. The further out in the results chain, the more difficult it is to measure because of complex and multiple determinants of impact.

Impact is not defined by number of workshops organised and participants attending, new guidelines and reports produced and countries covered by advocacy efforts, but through the changes introduced and created by such activities. Impact means change – in knowledge, attitudes and behaviour, social and cultural systems and eventually in incidence and prevalence of HIV/AIDS. Such impact is not determined by UNESCO alone and it requires special efforts to collect such information.

Several of UNESCO’s roles have also intangible results. It is difficult to define outcomes and impact and precisely measure the success of activities like advocacy, capacity building, etc. For most of these roles, it is not feasible to measure impact using a classical application of causality, that is, something necessary and sufficient for the impact to be observed. We have not during the conduct of this evaluation, encountered any such causal links.

UNESCO’s projects and initiatives have had a role to play, but they have always been contributing factors among many others. In such cases impact can be described in narrative form by providing examples and arguments that roles have been played effectively, reports been used, workshops have introduced new ideas, such ideas are adopted and put to use, etc. UNESCO has made a difference – and the knowledge of how that comes about is more important than a measure of change, which is anyway bound to be arbitrary.

The basis for assessing results, and in particular outcomes and long-term impact, is weak in UNESCO. Evaluations are carried out at country level\textsuperscript{28}, but they are relatively few, most often of specific projects and happen as a result of donor requirements. Monitoring

\textsuperscript{28} The number of evaluations at global level seems to have increased significantly, while we are referring to the number of evaluation reports available for the country studies.
of impact is also not adequately covered in time-limited project evaluations since time series data are often required for measuring change.

We did not find any systematic monitoring and evaluation plan or capacity at regional and country level to monitor and evaluate activities and immediate outcomes – except in the Brazil office. The lack of systematic monitoring of outcomes and in-depth evaluations has limited our ability to assess progress, quality and results of UNESCO interventions. We may know what UNESCO intends to do, but available data and information about what has been achieved are inadequate.

5.2. Overall Findings

• Increased Awareness and Visibility
Despite a few activities during the 1990s, UNESCO became involved in the fight against HIV/AIDS more systematically and on a larger scale as late as 2001- fifteen years after the epidemic started to affect member countries in Africa, Asia and the Americas. But then, in a short period of time, UNESCO formulated a global HIV/AIDS strategy on preventive education, established a HIV/AIDS Coordination Unit and scaled up a number of activities with support from UNAIDS at global level and in some countries. This is a major achievement for the Organisation as such.

The same trend can be seen at regional level. The regional office in Bangkok has the reputation of having a strong HIV/AIDS profile. This profile, however, is not more than two to three years old. The visibility of UNESCO has increased recently as a result of strong commitment from a few individuals.

UNESCO has also become much more visible among UN partners, Governments and civil society in the Arab region during the last two years by organising regional seminars setting HIV/AIDS and education on the agenda, but the contributions to follow up and implementation are still few and small. The recent increase in visibility and profile can also be found in the Caribbean – and certainly in Brazil. The situation in Africa is mixed. Awareness has been mobilised, but the visibility of UNESCO in our case countries varies greatly between Mozambique (high), Namibia (high), Kenya (moderate), Senegal and Ghana (moderate) and Angola (low). Higher awareness and visibility is clearly correlated to the performance and commitment of a few UNESCO staff and consultants.

Interviews at Headquarters confirm that awareness and visibility of HIV/AIDS have increased in the Organisation since 2001, but that it is still more a priority for selected parts of UNESCO than a corporate priority. In other words, it is not sufficiently mainstreamed across all Sectors.

• Important Achievements, but Limited Resources
The response to HIV/AIDS has become more visible and better reflected in global policy documents and the case studies have documented important achievements, but the financial commitment remains limited and the overall impact small. The human resources as well as the financial commitment to fight HIV/AIDS are inadequate. The response has
not matched challenges and expectations facing UNESCO. There is also not a realistic relationship between goals and ambitions and the level of resources and type of means the organisation is able and willing to invest in HIV/AIDS.

<table>
<thead>
<tr>
<th></th>
<th>Human resources for HIV/AIDS activities (estimates 2003)</th>
<th>Financial resources</th>
<th>Number of activities</th>
<th>Results (as described in country case studies)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brazil</td>
<td>More than 5 full time in Field Office</td>
<td>US $ 130 million in 2004</td>
<td>27 projects in presentation, but some very large</td>
<td>High</td>
</tr>
<tr>
<td>Jamaica</td>
<td>Somewhat less than 2 full time</td>
<td>US $ 520,000 2002-2003 US $ 1.5 million estimated for 2004-2005</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Dakar</td>
<td>3 part time</td>
<td>US $ 299,200 over three years</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Ghana</td>
<td></td>
<td>US $ 160,000 over two years</td>
<td>3 projects</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>1 full time</td>
<td>6 projects</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Angola</td>
<td>None</td>
<td>US $ 230,000 over two years</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Namibia</td>
<td>1 part time</td>
<td>US $ 170,000 over two years</td>
<td>Moderate</td>
<td></td>
</tr>
<tr>
<td>Kenya</td>
<td>1 part time</td>
<td>US $ 120,000 over two years</td>
<td>Moderate</td>
<td></td>
</tr>
<tr>
<td>Bangkok</td>
<td>3</td>
<td>US $ 1.5 million for 2001-2005</td>
<td>Moderate</td>
<td></td>
</tr>
<tr>
<td>Vietnam</td>
<td>1 part time</td>
<td>US $ 150,000 over 2 years</td>
<td>6 projects (most small)</td>
<td>Low</td>
</tr>
</tbody>
</table>

• **An Educational Response**
UNESCO’s response has mainly been an educational response. The Culture, Communication and Information and Human and Social Science sectors have become involved under the broad preventive education umbrella, but to a limited extent; Culture more than the others because of the global research programme on HIV/AIDS and culture. The Natural Sciences Sector used to coordinate UNESCO’s response to HIV/AIDS during the 1990’s, but has been marginally involved since IIEP took over. The Families First initiative (by the World Foundation for AIDS Research) is currently not an integrated part of UNESCO’s response, but could play a significant role if the vaccine research becomes a success.

• **A Varied Response Across Sectors and Countries**
The response and achievements at country level shows a surprising variety. There is a great difference in resources available for HIV/AIDS activities; the Field Office in Brazil is one extreme with an annual budget of around US$ 130 million, but many field offices have HIV/AIDS budgets below US$ 10,000. The Education holds the lead and dominates in most countries, but there are also examples of where most HIV/AIDS activities are in Culture.
Social and Human Sciences and Communication and Information activities are prominent in some countries, absent in many others, and of marginal significance in others. UNESCO’s roles vary between: being an implementing agency; engaged in capacity building; laboratory of ideas; clearing house for information; standard setter; and advocacy. In some countries all roles are played, in other countries there is a focus on one or the other, or a more narrow range of roles.

There are also important regional differences. In the previous biennium, no UBW funds were allocated to Asia\textsuperscript{29}, the Americas or the Arab States – only Africa and global level. For the current biennium the focus has remained on Africa, but the other regions have received a share of UBW funds, but significantly less than Africa. Our case studies do not form a representative sample of Field Offices, but it seems that UNESCO’s visibility, commitment and actual performance is higher in Asia and Americas than in Africa – in particular in the high prevalence countries. Maybe there are too many other strong actors in such countries in Africa being involved for several years while UNESCO arrived only late. The awareness about the epidemic at policy level has also improved over the last few years – also in Ministries of Education in African countries. The need for advocacy and raising of awareness seems higher in some of the low prevalence countries in South-East Asia and maybe also the scope for UNESCO involvement.

The following describes different types of results and also more specific achievements for each of the roles. The case studies illustrate three groups of results:

(a) Some Results are Quantifiable and Significant
There is a group of immediate and measurable results of UNESCO activities. Such outputs are also documented in the reporting system. Despite low disbursement and a significant variation between sectors and countries, there has been a rapid increase in the number of successfully implemented activities. The number and scale of regional projects initiated for instance by UNESCO Bangkok has increased significantly over the last two years (from US$ 250,000 to US$ 1.5 million in two years in extrabudgetary funds).

The Brazil experience is an atypical example, but can document important concrete results. Most case studies record an increase in the volume of HIV/AIDS activities – Jamaica, Mozambique, Senegal, Namibia, Ghana, Lebanon and several countries in South-East Asia. The global research programme and HIV/AIDS has also produced 21 publications (country studies, methodological papers, manuals) over a three

\begin{center}
\textbf{Brazil – a unique and contested experience with significant results}
\end{center}

The case study concludes that the response in Brazil has been very successful. Because UNESCO’s role is unique and contested, its performance has also been under close observation. It is possible to point at minor shortcomings in implementation, but the main result is that impact has been considerable – that is impact in terms of behaviour change in sexual life, use of condoms, impact on knowledge about HIV/AIDS and how it spreads and impact in terms of reduced infection trend. Despite several players, UNESCO must be credited with a share of the achievement.

\textsuperscript{29} US$ 200,000 was allocated in the end to Asia.
year period. The work in the field of HIV/AIDS and Human Rights has also met with interest, and is a contribution to thinking in that field. The clearing houses in IEEP and IBE and in the regional offices are well established. Outputs are increasing, but utilization is still low.

Thailand and Vietnam

If UNESCO’s achievements is assessed by the work and immediate outcomes of the newly established regional HIV/AIDS Unit and the UNESCO office in Hanoi taking into consideration their small resources, results are impressive, but there is currently not a realistic relationship between objectives and the level of resources and type of means to achieve them.

The basis for assessing results – and in particular long-term impact – was weak. There is no systematic monitoring and evaluation plan or M&E capacity in the Regional Office to monitor activities and immediate outcomes or to evaluate issues like relevance, sustainability, effectiveness, etc. The reporting is focussing on financial inputs and physical outputs. Evaluations are few, of specific projects and initiated by external donors (Two independent evaluations were conducted in 2003). Many of the activities are too small to expect any independent impact.

(b) Other Results Can be Described and Analysed

The reporting of outcomes and impact – short- and long term change is much weaker than data on activities and outputs. The outcome of the work in advocacy, development of standards and guidelines, capacity building, etc. is most often not directly measurable, but can be described and analysed in terms of outcomes and impact. When UNESCO in Lebanon convenes meetings and workshops to discuss HIV/AIDS and education, human rights or a life skills manual with representatives from Ministries and civil society organisations in Arab States, there are most likely effects, but often long-term, indirect and supportive of other ongoing efforts.

The Bangkok Regional Office has prepared an advocacy tool kit for Ministries of Education which have to be assessed through case studies and evaluations. The Havana Declaration, signed by Ministers of Education in the Caribbean Region in the course of a UNESCO instigated conference, has for instance contributed to increased political awareness about HIV/AIDS, even if it is impossible to measure how much. The case studies describe several similar normative activities and are positive about their likely effects.
Jamaica – stronger political commitment and civil society involvement

In spite of poor treatment of results in the planning and consultation documents, the case study found that the results had been considerable: the Ministry of Education has changed considerably during the past year and there is a stronger political commitment to make the school system an important actor to prevent HIV/AIDS. Management at higher levels know more and speak more often on HIV/AIDS issues; a national policy has been elaborated and accepted and an organisational structure for HIV/AIDS related work has been set up and is funded by the Government.

Several informants confirmed that the Ministry had begun to respond to HIV/AIDS. That UNESCO staff would say so and that other UN organisations say so are important indicators. But they are all engaged in advocacy with the Government, and may not be the most unbiased of observers. When representatives of the NGO community also testify that they see much change in the Ministry, and when independent researchers also say so – in response to a carefully worded question – then it is more trustworthy.

What are the results in other parts of the Caribbean? In some, there seems to have been changes in Ministries of Education along the same lines as in Jamaica. One of the interesting activities that UNESCO worked with was to gather Ministers of Education in Havana and in the course of a conference on HIV/AIDS foster a consensus that resulted in the “Havana Declaration” setting out priorities and manifesting a consensus to work with preventive education. Some claim the Havana Declaration has been important, others say it had little impact. Nevertheless it was signed by all 19 countries, and may have led to changes in some of the states.

(c) Many Activities Have Not Produced Any Results.
The evaluation also found activities without any results. They had been isolated events – forgotten and not been followed up by UNESCO or others and not clearly related to an articulated demand. For many activities it is also too early to expect and measure any effects. The cultural study of HIV/AIDS in Thailand, was for instance, not known in UNESCO Bangkok except for the Focal Point or among partners and had hardly been read and used. It has also been difficult to trace any concrete results of seminars and workshops arranged and reports produced.
Southern Africa
Few activities and results could be found in Angola. UNESCO in Mozambique funded several projects showing good immediate results while in Namibia several small activities having no prospects of sustainability. The partnership with the MOE was the strongest- in particular in the area of policy development.

Senegal
The case study concludes that roughly one third of the funds is likely to have an impact on behaviour change, one third will, depending on the application within the educational system, definitely contribute to the fight against HIV/AIDS, and one third has no visible impact, as the funds were used mostly for internal, preparatory and administrative programming processes.

The Arab States
The case study concludes that the attention, awareness and number of activities relating to HIV/AIDS prevention in UNESCO during the 1990s were negligible. After a regional seminar in Brumana in 2001 and the formulation of the regional strategy HIV/AIDS appeared on the agenda for UNESCO and the new document also provides a direction and defines programmatic priorities. UNESCO is a latecomer with a slow and still weak response to the HIV/AIDS challenge, but is improving. The translation and introduction of a life skills manual and HIV/AIDS human rights kit are the two main activities. It is too early to assess how much and how well the new awareness and activities have translated into action and results.

5.3. Roles and Results
The following table seeks to summarise impressions (based on the country studies) of level of efforts and achievements for each of the UNESCO roles using a score from 0 to 3. The most important is not the individual scores, but the differences between roles. The table serves also to illustrate and introduce more specific findings.

<table>
<thead>
<tr>
<th>UNESCO ROLES</th>
<th>LEVEL OF EFFORTS</th>
<th>RESULTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laboratory of ideas</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Clearing house</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Setting norms and standards</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Advocacy</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Capacity building</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Implementing agency</td>
<td>Globally none, in Brazil</td>
<td>3</td>
</tr>
</tbody>
</table>

- The table indicates that most efforts are invested in advocacy, sharing of information (clearing house) and capacity building – not in innovation (laboratory of ideas), policy development and implementation – even if there are examples of new ideas and innovations (focussing on the system effects of HIV/AIDS, cultural aspects of prevention, large scale implementation in Brazil, etc.).

- Most of the efforts and results are in advocacy and capacity building while achievements in other roles are weaker.
Laboratory of Ideas
UNESCO entered the HIV/AIDS arena late and it takes time to become and be seen as a laboratory of ideas – a centre of excellence. New ideas and innovations emerge often as a result of sustained hard work, experimentation, frequent failures and some hard-won successes. A core group of technical experts needs to work full-time in the laboratory. UNESCO has not met the preconditions for being a laboratory and few new ideas have emerged. Preventive education was not invented by UNESCO, but the idea of the preventive power of education had a strong booster through UNESCO efforts. There are, however, some achievements:

- Issues relating to the impact of HIV/AIDS on education systems were addressed by UNESCO in the early 1990s, an analytical framework was formulated and several seminars and workshops organised. IIEP has followed up and supported technical work on this topic including the clearing house.

- The World Foundation established two research centres in Abidjan and Yaounde.

- UNESCO has placed the cultural dimensions of HIV/AIDS prevention and care on the agenda through a global research programme. UNESCO is the only UN agency with a mandate in culture and should be commended for its efforts. The research programme is unfortunately not well known, utilisation and follow up of the research could also have been better. The quality of research varies a lot and several of the findings and recommendations appear quite trivial (see chapter 6.2).

- The country studies could document few innovative experimental projects. Most of the approaches and initiatives are well known from other organisations, but there are exceptions: UNESCO Bangkok is starting an experimental project focusing on men having sex with men (MSM) in selected countries in the region. The Office has also been working with an interesting Social Sentinel Surveillance Project - a GIS-linked (Geographic Information System), village-based system for tracking and analysing the trade in girls and women from the Upper Mekong region into Thailand. The project is developing an “epidemiology” of trafficking to provide a current and accurate estimate of the scale and geographic distribution of the problem – to be presented visually by computers.

Clearing House
The Institute for Educational Planning (IIEP) has successfully established a clearing house on HIV/AIDS and impact on education systems, while the International Bureau of Education (IBE) has formed another clearing house on HIV/AIDS and curriculum development. The level of knowledge about and utilisation of the two clearing houses is still relatively low – in other words their impact (see chapter 3.2).

Several of the UNESCO offices visited (for example Jamaica, Brazil and Senegal) had well-equipped libraries and Field Offices contribute to disseminate information and literature. UNESCO Field Offices are important sources of information.

Setting Norms and Standards
Preventive education is not an area with clear technical norms and standards. Providing broad guidelines and policy development is a more accurate description of what UNESCO is doing. HIV/AIDS became a global priority for UNESCO with the new Director General and the formulation of the strategy for preventive education in 2001. UNESCO has played a role in policy development through the formulation of its global strategy on preventive education which has served as a basis for regional strategies in South-East Asia, Africa, the Middle East and the Americas. Headquarters and all regions
have spent considerable time discussing and formulating policies and strategies for their work on HIV/AIDS. This evaluation has questioned the value of such efforts. The strategy documents are not well known or much used. They are all broad and general and not effective management tools for the Organisation.

UNESCO played also the role as coordinator for the UNAIDS Inter Agency Task Team (IATT) and its joint publication “HIV/AIDS. A Strategic Approach” enabling UN agencies, a number of bilateral organisations, some NGOs and experts to express their views and policies and actions to prevent HIV/AIDS and mitigate its impact on education systems. This publication has several normative elements, but we do not know how the document has been used or its impact.

UNESCO has also prepared several manuals and tool kits for life-skills education, human rights and HIV/AIDS, advocacy, etc. Most of these initiatives have primarily capacity building and advocacy functions, but there is also a normative element involved. We have been able to observe that the manuals have been translated, printed and presented in workshops, but exact information about adaptation of ideas and follow up is missing.

Advocacy
UNESCO gets a relatively high score in its advocacy role. Advocacy takes place at several levels and through various means. The Director General of UNESCO has increasingly included HIV/AIDS issues in his speeches and statements emphasising in particular the preventive power of education. It is an open question to what extent this is advocacy – defined as a role whereby UNESCO proactively tries to influence the external environment to take action. The Director General’s speeches and statements most often reach the already converted, but the messages contribute to confirm UNESCO’s commitment to HIV/AIDS externally and to mobilise UNESCO internally.

At the global level UNESCO has contributed to an increased attention to and understanding of the interrelationships between HIV/AIDS and education – and in particular the preventive power of education and the negative impact of the epidemic on educational systems.

Advocacy at regional and country level has mainly taken place through workshops and seminars sensitising high level officials about HIV/AIDS and education. In addition, there is written material. UNESCO Bangkok has prepared an advocacy tool kit on HIV/AIDS and education which will be used in ten countries with the clear purpose of disseminating information and raising awareness. As mentioned previously, there have been results, but it is a huge task to describe and analyse them. We have done so in the country studies, particularly where we came across UNESCO staff or consultants involved in high level advocacy and capacity building with Ministries of Education. We can probably conclude that the privileged access to MOEs is an underutilised potential.

Capacity Development
UNESCO has invested significant resources in training and capacity building at regional and country level. The evaluation gives UNESCO a high score in this role. The mode of
capacity building, however, was found to focus on training in workshops and seminars and production of publications. As such, UNESCO contributes to human resource development, more than institutional capacity building. The latter requires a longer time perspective and a broader range of interventions including organizational and systems development.

Project Implementation
UNESCO in Brazil is implementing a major HIV/AIDS programme on behalf of the Brazilian Government and is the only example of project implementation. Generally, there has been an increase in the number of specific HIV/AIDS projects funded (coordinated and executed through UNESCO) – in particular with the support of extra budgetary funds. They are often not sufficiently linked with UNESCO’s normative roles (policy development, advocacy, etc.). The youth project in Quang Ninh in Vietnam is funded with support from UNAIDS. It is located near Halong Bay which is a Cultural Heritage Site and, in addition to channelling funds, UNESCO provides some advice and technical support to the implementing partner.

Another example of a similar project is the Radio and Trafficking Prevention Project Among Highland Minorities in Mekong. The purpose of this project is to develop, test and disseminate a series of radio programmes and audio-tapes aimed at the prevention of HIV/AIDS among ethnic groups. The programmes are being developed in local languages, broadcast on radio stations in Thailand, Lao PDR and China (Yunnan province) and can also reach listeners in Myanmar. UNESCO Bangkok has been instrumental in initiating the project, selecting implementing partners and closely following and supporting implementation.

There are also a number of global initiatives and projects in which UNESCO moves into the role as project coordinator and donor. The Human Rights and HIV/AIDS project offer for instance small grants to local NGOs which clearly provide useful incentives for follow up. The problem with funding of such micro projects from a global source is that management of such funds is time-consuming and should have happened at a national level. UNESCO Headquarters and an International Review Committee is not well placed to screen project proposals from local NGOs and project coordination and management tend to divert attention away from technical and normative roles. In that sense, the increase in extrabudgetary funding of operational projects is a mixed blessing.

A conclusion is that UNESCO has played all its roles in a wide variety of ways across regions and countries. The Organisation has been uncertain about what roles to play, which, together with weak capacity, has impacted negatively on performance. UNESCO has been hesitating between a technical normative role and operational activities – ending up with too many roles and dealing with too many issues rather than to concentrate on roles and issues in which they have a comparative advantage and a realistic chance to make a difference.
5.4. Results Based Management

Like most other agencies, UNESCO has introduced the concept of a results based approach to management and governance as part of the global reform process. It implies a shift in focus from activities and processes to results – outcomes and impact. In such an approach effective monitoring becomes a *sine qua non* for UNESCO.

Results based management (RBM) is often defined by a set of interrelated activities:

1) defining what should be achieved (at output, outcome and impact level);
2) defining measurable indicators for all levels;
3) establishing monitoring systems for regular collection of data;
4) collecting data and assessing to what extent objectives are achieved;
5) utilizing information and findings about results for learning and decision making (performance based funding).

RBM means that data about results should not only be collected as part of a reporting process, but used to improve performance and provide incentives for project managers by funding and supporting success.

The evaluation does not look at this system as a whole, but from a HIV/AIDS perspective. It is necessary to focus on results, to set priorities in terms of results to be achieved and to know whether results are achieved. Is there evidence from our study that UNESCO is moving towards a results based management system for its HIV/AIDS activities?

- There is a much stronger focus on projects, activities, processes and intentions in UNESCO than on reporting of results.
- Most of the activities (production of materials, workshops, etc.) are small and limited in time and not presented in project plans with objectives, measurable targets and indicators and consequently not systematically measured. The cost of an evaluation or survey would often be higher than the budget for an activity.

### An Experience from the Caribbean

UNESCO Kingston has been able to secure the services of a senior researcher-cum-consultant on HIV/AIDS and education. This is very fortunate and gives continuity, focus and strength to the efforts. It would not have been possible to initiate such a complex process on a part-time basis, which is what the permanent staff would have to do in light of their other responsibilities.

But the strength also reveals its weakness. As the consultant is employed on short-term contracts, at times for less than a month, it is a vulnerable situation. Its effectiveness relies on personal professional networks, access to information and to centers of power, that is vested in people with a long professional record and a personal reputation and standing that carries much weight. It would not take much in terms of temporary illness, staff turn-over or that the consultant gets tired of the uncertain employment situation, for the whole response to be seriously jeopardized.

- UBW projects are presented in a log-frame format with expected outcomes and indicators, but we have not found evidence that indicators are systematically used - meaning that data are collected for the outcome and impact indicators during implementation.
• Regional and country offices have weak systems and capacity for collecting outcome and impact data for HIV/AIDS projects (in most cases it would require special surveys to collect data about changing attitudes and behaviour). Reports cover financial inputs, activities and outputs – to a marginal extent outcomes.

• There are no systematic mechanisms for using results data for learning or for informing funding decisions (performance based funding). Planning of new projects is more based on availability of funds than documented experience and success.

The problems with using RBM are not unique for UNESCO, but reflect well-known methodological issues and constraints in results based management systems\textsuperscript{30}.

• The lack of measurable indicators for outputs and outcomes makes the link between inputs and results complex and often invisible.

• Objectives are at a very general level with few specific targets.

• Activities aiming at attitudinal change and change of policies and norms have few concrete and easily measurable results.

• UNESCO’s inputs are small and it is difficult to determine and measure their relative importance with so many other external factors at play.

• Normative activities are often catalytic and take a long time to mature. Inputs are mostly related to building of competence and knowledge. Even small activities may have a significant impact – with no causal and proportional relationship between level of inputs and their impact.

\begin{center}
\textbf{Attribution of results}
\end{center}

There is no doubt that the MOE in Jamaica has changed considerably during the past year and has begun to respond to HIV/AIDS. Is this the result of UNESCO’s activities? Obviously not. There are at least four driving forces behind the change: the facts of the epidemic itself, increased attention from other government actors, increased concern in the Jamaican community and international advocacy. Much as one cannot attribute the change to UNESCO, it would not be correct to “write the history” of those changes without describing UNESCO’s activities – as a part of the change. To be intellectually honest, it must be described as such, and not in terms borrowed from project management literature, with simplistic notions of causality.

It is fashionable to speak of indicators in the field of performance management and in particular UN agencies have spent considerable time and resources to develop indicators to measure performance. Indicators can be useful as instruments to follow up specific, often technical projects and in systems where production is fairly standardised and simple\textsuperscript{31}. In complex programme activities where the links between activities, results, outcomes and impact are non-linear it may be better to opt for a more sophisticated qualitative approach to monitoring and evaluation. Systematic field visits, recorded through qualitative “notes to the file”, based on critical reflection, would be often easier, cheaper and more reliable.


Aggregation of Results
The expected global results for the end of the biennium 2002-2003 (C/5) were:

- Preventive education policies concerning HIV/AIDS encouraged and enhanced, through incorporation of formal and informal education strategies in national EFA plans and through encouraging the participation of all education sector stakeholders.

- Development of new approaches to preventive HIV/AIDS education especially aimed at enabling young people to reduce their vulnerability to HIV/AIDS and at reducing HIV/AIDS-related discrimination.

- Sharing of information and best practices through the establishment of two clearing houses on HIV/AIDS and education.

UNESCO has not tried to aggregate results from activities – as a basis for assessing global achievements at higher objectives level. Measurable targets were also missing, but in the light of the discussion above, there is no need to be overly worried about that. It is more important to understand how and when the Organisation makes a difference. UNESCO has contributed to all the three objectives. Based on our sample of countries and interviews at global level, we would conclude that UNESCO has invested most efforts in objectives one and three – encouraging preventive education policies concerning HIV/AIDS and sharing of information, but less on development of new approaches to preventive HIV/AIDS education. Results are consequently better for objectives one and three. It would make sense for instance to describe and assess UNESCO’s efforts for achieving the global UNGASS targets, the Millennium Development Goals, etc., but not to try measure precisely the relative contribution of the Organisation.

5.5. Concluding Remarks
This chapter starts by explaining some of the methodological problems in measuring results – in particular long-term impact and in areas and roles with intangible impact measures. UNESCO’s global achievements are said to be a stronger response, higher awareness about HIV/AIDS created in the Organisation and increased visibility. The response, however, is constrained by scarce resources and varies between sectors and between regions.

Results are presented in three groups: those results that are measurable and significant; others that can be described and analysed; and lastly, activities that have not produced any results. UNESCO has played all its roles with a wide variety across regions and countries. The Organisation has been uncertain about what roles to play, which together with weak capacity has impacted negatively on performance. UNESCO has been hesitating between a technical normative role and operational activities – ending up with too many roles and dealing with too many issues rather than concentrating on roles and issues in which the Organisation has a comparative advantage and a realistic chance to make a difference. The roles in which UNESCO (apart from operations in Brazil) has

---

32 In the C/5 for 2004-2005 performance indicators were introduced.
created most results are in advocacy, information sharing and capacity building while less in norms and standard setting and laboratory of ideas.

The chapter ends with a discussion of the monitoring and evaluation capacity in UNESCO, and the present system for results based measurement and management and highlights some of the constraints in using such a system for measuring results from UNESCO activities.
6. QUALITY AND CONTENT

The results in the previous chapter are primarily explained by the organisational processes analysed in chapters 2 through 4; that is, by strategic intents, how those are put into practice, and how partnerships are developed. However, there is another explanatory variable and that is the quality of the work done. How good are the publications, seminars, workshops, advocacy tools, data banks, etc. that are the repositories of knowledge and the devices through which knowledge and information are communicated.

It is a very large task to assess the quality of such wide-ranging work as that contained in UNESCO’s HIV/AIDS response. We have selected three themes to assess. First, as gender and equity issues are crucial in all HIV/AIDS related work. Second, UNESCO’s strategy emphasises preventive education, and thus it was necessary to look closely at some of the material developed in the Education Sector. Third, we selected Culture, as it is often said that UNESCO’s work in this Sector is unique, and of theoretical as well as practical interest.

Our assessment is based on close reading and observation of the work done by UNESCO. It is by necessity random, and our views reflect only a minor share of total activities. Nevertheless, we are confident that the general conclusion would be maintained if we did a larger study, not least as we have also seen much more of the work than is reflected here.

6.1. Gender and Equity in UNESCO’s Response to HIV/AIDS

Gender based role expectations and gender inequality are significant driving forces of the spread of HIV. An effective HIV/AIDS response requires sensitivity to a range of gender issues. The key issues are:

a. Girls and women are more vulnerable to HIV than men and boys due to biological, social, cultural, economic, and political reasons. Recent years have seen the feminisation of HIV/AIDS globally. In 1997, 41% of adults living with HIV/AIDS were women. By 2000, this figure had increased to 50%. At the end of 2003, in Sub-Saharan Africa, 58% of those living with HIV/AIDS were women.

b. Empowerment is the key to changing these vulnerabilities, but this is not the only element in a gender sensitive HIV/AIDS response.

c. Men and boys also face disadvantages placing them at risk, especially those resulting from gender -based role expectations which lead to risk taking behaviour.

d. Men who have sex with men (MSM) represent a significant component in the spread of HIV/AIDS in some regions. Reducing stigma and protecting MSM is critically important in creating a supportive environment that enables men to take advantage of testing and treatment opportunities.

e. As the epidemic grows and moves across regions, more people living with HIV/AIDS need information on how to cope with being HIV positive, self-care, and coping with stigma.

f. Care of family members who are ill has traditionally been the work of women. Care of people living with AIDS places an unduly harsh burden on women and girls. As increasing numbers of families are touched by AIDS, it becomes imperative that men and women are better equipped to take on care tasks.

g. Better education can be part of the solution to reduce the spread of HIV/AIDS and to cope with its impact. Promoting Education For All (EFA) and responding to HIV/AIDS are inter-linked. Addressing
gender inequalities is an integral part of EFA. However, achieving gender parity in education cannot be equated with having a gender sensitive HIV/AIDS response.

h. Behaviour change communication and curricular materials should be especially careful to promote positive gender and HIV/AIDS images and to reduce stigma.

Policy Intentions

There are no policies, strategies or programmes which are specifically aimed at including gender issues in UNESCO’s HIV/AIDS response. A rapid quantitative study carried out by IIIEP and BSP on UNESCO’s responsiveness to gender issues in the area of HIV/AIDS found that none of the Director General’s speeches addressing HIV/AIDS referred to gender issues or to women’s specific experiences. The Director General’s comments for World AIDS Day in December 2003 did not refer to gender issues either.

“UNESCO’s Strategy for HIV/AIDS preventive education” (2001) gives scant attention to the role of gender in HIV/AIDS. Gender – based factors are not listed under the ‘facts’ or ‘situation’ sections. Although it notes the importance of girls’ education in EFA and states that UNESCO will ensure that gender issues are explicitly addressed in formal and non-formal education, gender issues do not figure significantly in the five core tasks.

Under the Core Task: Customising the Message, the Preventive Education Strategy notes that, “The spread of HIV, on the other hand (compared to highly infectious diseases such as measles or mumps), is relatively easy to prevent and it can be prevented by informed and motivated individuals. For most at risk, as long as sex is voluntary, people can on the whole choose not to be infected”. This sentence indicates a serious lack of understanding of the gender-based dynamics in HIV prevention.

“UNESCO’s Strategic Approach to HIV/AIDS and Education in Sub-Saharan Africa” recognises the impact of HIV on girls and women early in the document. Gender is identified as one of the main contextual issues relevant to HIV transmission. The strategy notes the existence of harmful cultural practices, e.g. female genital mutilation and suggests how they should be addressed. In the discussion of care, more attention could be given to the differential burden that falls upon girls and women. The Sub-Saharan Africa regional strategy includes gender equity in its vision. Achieving EFA is one of its goals and a special concern for girls and women has a part in prevention approaches.

“UNESCO Regional Strategy for HIV/AIDS in the Asia-Pacific Region” also identifies gender-based vulnerability at the beginning of its document. Gender issues are well integrated in the analysis. There is a call for gender sensitive tools for preventive education. The greater impact of HIV/AIDS on girls schooling is noted. In the field of Culture, using the positive expressions of culture are highlighted. Within the field of Social and Human Sciences, there is no mention of the critical importance of gender-disaggregated data. Raising the issue of MSM would have made the strategy more complete.

“Regional Strategy for HIV/AIDS Preventive Education in the Arab States” refers to gender a few times late in the document under the section dealing with the “Action Plan”. Neither gender issues, nor the relative lack of power held by women are identified under
“factors of vulnerability”. Reference is made to “harmful gender stereotypes” in the Action Plan with no further elaboration of what this means.

“Latin America Regional Strategy on HIV/AIDS Prevention” makes no reference to gender issues.

“UNESCO’s Gender Mainstreaming Implementation Framework (GMIF)” is the main gender policy document for UNESCO. While women were a priority group in the previous Medium Term Strategy period, their needs are now considered a ‘mainstreaming issue’ in this framework. Gender mainstreaming is considered to be an appropriate means to ensure that women’s needs are met. The GMIF provides a framework, but it is difficult to ascertain whether gender mainstreaming is a priority. Conceptually, it leans heavily on a woman in development (WID) model. It is not certain that this is the most suitable for ensuring gender sensitivity in response to HIV/AIDS. Although women’s empowerment is unquestionably an important part of HIV/AIDS prevention activities, behavioural change among males should also have a prominent part. And, while empowerment is the key to reducing women’s vulnerability, other dimensions of HIV/AIDS activities listed above, should be addressed.

Human and Financial Resources
There are over forty gender focal points throughout UNESCO. In common with the HIV/AIDS focal points, most gender focal points are designated on a part-time basis. Gender and HIV/AIDS represent new areas of work for many UNESCO staff. Despite the best intentions, many people are not comfortable dealing with gender and HIV/AIDS issues. Training has been provided for some gender focal points, but not uniformly throughout the organisation. There does not appear to have been any training in the gender aspects of HIV/AIDS for gender or HIV/AIDS focal points.

Tracing financial allocations to gender activities is very difficult. Attempts to do so highlighted weaknesses in the reporting system for the allocation of funds. One of the stated responsibilities of the gender focal points is to ‘stimulate the wider inclusion of gender concerns and intensified responses to women’s needs in a Sector programme. Encourage and support initiatives that are conducive to the greater integration of women’s needs and gender issues in programme implementation.’ Without a budget for activities and a clear HIV/AIDS workplan or other management mechanism, inserting a gender perspective into HIV/AIDS does not appear to have happened in Field Offices.

---

33 http://portal.unesco.org/en/ev.php@URL_ID=17865&URL_DO_TOPIC&URL_SECTION=20
As noted above, gender is closely associated with women’s concerns. A majority of gender focal points are women. A gender sensitive HIV/AIDS response requires awareness of issues relating to the gendered identities of both men and women. Particularly in the area of behaviour change, it is important to have a balanced male/female presence. UNESCO has not demonstrated a commitment to including gender issues in its HIV/AIDS response if one looks at the allocation of human resources, training activities, or funding.

**Activities and Implementation**

We have not been able to gain an overview of gender related components of larger activities and projects. As discussed elsewhere in the report, although the SISTER system includes some information about intended plans, it is not designed to give much information on specific actions carried out under each activity. Moreover, it has not been possible to see which activities were implemented.

Nonetheless, a limited number of activities were brought to our attention and materials were shared with us. While many of the materials appear to be ‘gender blind’, there are examples of excellent gender sensitive work carried out in parts of UNESCO e.g. developing gender sensitive IEC materials by UIE, the cultural study in India, non-formal education materials, and the active Bangkok office. But information about these does not appear to be well disseminated; materials and lessons learned are not shared; technical expertise involved in these activities does not appear to serve as a resource to others in UNESCO. It is especially surprising that the lessons learned at the project level did not seem to have filtered upwards so that they were included in the strategies e.g. the preventive education strategy. None of the material reviewed addressed the gender biased care responsibilities girls and women face.

Although UNESCO Bangkok seems to be ahead of other regions in progressing gender sensitive responses, a Gender Audit carried out for them pointed out some shortcomings in the region which could possibly be generalised to UNESCO globally and especially to HIV/AIDS and gender. Among the most important are: the lack of gender disaggregated data, the lack of training, the ‘untapped interest and positive energy’ found in individuals and certain UNESCO units.

**Partnerships**

UNESCO is recognised as being a small agency with few resources. It could enhance the impact of its work in education through strategic alliances with other agencies or NGOs. Technical HIV/AIDS expertise, gender expertise, and/or gender tools (for example a checklist for the gender sensitivity of educational materials) can be found outside UNESCO.

UNFPA has had a long-standing collaborative relationship with UNESCO which was undergoing review at the time of the Evaluation. Whereas there was previously a strong partnership with UNFPA staff at UNESCO, this has declined in recent years.
UNESCO participates in UNAIDS interagency task teams e.g. education, gender, and youth. The education IATT is discussed elsewhere in this report. As a member of the gender IATT, UNESCO helped prepare the revised resource CD produced by the gender IATT. Members on the gender IATT have found UNESCO to be an active member of the IATT and its fact sheet for the revised resource pact, useful. The way UNESCO went about preparing its contribution was seen to be innovative because it was developed in an unusually participatory manner. However, UNESCO as an organisation overall, is not noted for having a profile in gender activities.

The IATTs could provide a way for UNESCO to strengthen its ties with other UN agencies. However, at the time of the Evaluation, other UN agencies on the IATTs questioned the future role and function of the IATTs so they cannot be seen as a reliably sound way for UNESCO to plan to forge and strengthen alliances.

**Conclusions**

Capacity to bring a gender perspective to UNESCO’s HIV/AIDS activities can be found in the Organisation, but there is little commitment to gender issues in UNESCO. This requires a conducive policy environment and allocation of resources (human, financial, training). A gender and HIV/AIDS strategy policy would only be useful if a) the overall technical capacity on HIV/AIDS issues is strengthened, b) the Organisation was prepared to allocate sufficient financial, human, and capacity building resources to it, and c) management processes for following the implementation of policies at the programme and project level and in the Field Offices were strengthened.

There appears to be a wide range of capacity across regions/countries. Starting a gender sensitive HIV/AIDS response can be done on limited funds with committed advocates with vision at the highest level. Communication and Information activities appear to be de-linked from efforts in the Education Sector despite the common issues curricular and training materials share with behaviour change communication.

A closer working relationship with UNFPA, UNIFEM, and NGOs at global and national levels could help fill gaps in UNESCO’s relatively small organisation by taking advantage of each agency’s comparative advantage in terms of technical expertise and access to networks. This does, however, require a good understanding of the other organisations’ needs and role. More importantly, for UNESCO to develop a recognisable niche of expertise which is useful and relevant to the other agencies, it needs to boost its technical capacity in HIV/AIDS

**6.2. Quality Aspects on Preventive Education Activities**

Three different activities were selected to assess the quality of work done in preventive education. The question here is; was the activity good enough? This is followed by another question; could it have been better? Evaluation is commonly defined as a “systematic inquiry into the worth or merit of an object”. Worth or merit can reflect many aspects of value assessment. A good seminar would, for example, be one where the content is logically displayed, the lecturer is enthusiastic and responsive to the audience,
the targets are met, and so on. We will now turn to three examples of preventive education activities.

**Case 1. A Text Book on HIV/AIDS in the Caribbean.**
During a seminar that UNESCO initiated with Ministries of Education in the Caribbean, it was decided to undertake research and publish a book on HIV/AIDS for the region. The book was to set out the education sector’s response and provide a number of strategic options on the sector’s role. The idea of the book was conceived in 2002, published by IIEP in the autumn of 2003 and launched at a seminar in October 2003.

The book is of around 250 pages, so it is a rather comprehensive text. This has its limits, as well as advantages. The book informs the reader on most aspects of the HIV/AIDS epidemic generally and globally, as well as on what impact it has in the Caribbean. It discusses the spread of the disease in the region, and explains how gender issues and sexual behaviour contribute to make the region vulnerable. Is it too comprehensive? The length of the text makes it less accessible.

In the course of interviews, we did not meet one single person who had read the book – and then we did meet people who must be considered the prime audience. If anybody had read the book, they would be the ones. Our country visit took place only four months after the book launch, so it is too early to say that the readership is low. There will certainly be more people who read it later. The book received an enthusiastic review in one of the local papers (also available on the web). Such a review will help to make it better known in the long run.

There are several sections of the book that are well-written and have an engaging and relevant message. This is particularly the sections that discuss the impact of HIV/AIDS on the region and the effect it has on education systems. The sections dealing with gender issues and sexuality also appear very focused and relevant, and it seems that they break new ground in the region.

The sections explaining the disease and portraying its global spread are also focused and well written. However, one must ask how much of this information that must be presented here. That depends on the target audience. If the book is aimed at readers who have no knowledge at all of HIV/AIDS, then it must be there. If the target audience is people in the education and health sectors who already know what HIV/AIDS is, how it is spread and how different countries are affected, then it is not necessary, and if so, the text could have been made shorter and thus more accessible.

There is a section that outlines the mechanism of response in Ministries of Education. This is the weakest part of the book. It is founded on very basic ideas of public sector management; on the formulation of policies, projects, setting targets, etc. There is, for example, a section on setting targets that recommends the application of SMART criteria. The qualities of specific targets would depend on the context and tradition of a particular ministry, and sometimes a certain vagueness could be preferable – depending, for example, on the nature of the opposition to be overcome. This part of the book would
need to be better anchored in administrative practice in the region, which would surely also differ significantly between nations.

The final editing and proof-reading of the book appears to have been done very fast. Some tables are spread over several pages. Text boxes with examples are sometimes long, other times short, and they are not set out to distinguish them from the main text. Some titles are connected to the ensuing text. There is a need to emphasise some messages more clearly.

Is the book good? Yes, in that it fills a need. Nobody else has published on that theme, and there is a shortage of information on the subject. It was a worthwhile initiative. The answer is also: yes, in that much of the content is of a high standard, well written and very interesting. However, there are also sections of dubious value, implying that it is not quite clear for whom the authors were writing – or if it is a good idea to address all possible audiences through the same text. There are also some sections that appear much less useful – particularly those that outline the managerial and administrative response in ministries. There is no doubt that final editing should have received much more attention. Could it be done better? Yes, and UNESCO has taken the initiative to work with commercial publishers in the Caribbean on HIV/AIDS information. One of these publishers will redesign the book to publish a Caribbean edition; one which is more readable and better suited to the market. It shows that the initiative was right, but that the book first published was not quite up to the standards that could be expected of a specialised UN agency.

**Case 2. A Regional Workshop on HIV/AIDS and Life Skills Education**

The origins of this activity can be found in Asia. UNESCO’s Field Office in New Delhi developed a manual for Teacher Educators on HIV/AIDS and Life Skills. The manual lays the foundation for a five-day training on the above mentioned subject – to an audience of teachers/professors at teacher training colleges. These are, in turn, expected to teach their students, that is, the future teachers, these subjects. The training starts with general information on the global impact of HIV/AIDS, progresses through facts on how the disease is spread and who is affected, to how it impacts on the human community. It goes on to protection, strategies for working together against HIV/AIDS, and then, more specifically, on how to integrate HIV/AIDS preventive education in the curriculum. There are also sections on teaching methods, as well as assessment tools. It is, no doubt, a comprehensive manual.

The Government of Senegal and UNESCO decided to organise a regional seminar to adapt the manual to West African conditions. The seminar drew a broad attendance from civil society and government in Senegal, plus two participants from Gambia, Cape Verde, and Guinea-Conakry. The preparation was done quickly, and the seminar took place some five months after the idea was hatched. The question is, was it a good seminar?

The workshop had several positive qualities. The participants were the right ones, people with high levels of responsibility, but also in positions to act on curriculum development. The workshop was well planned, neither too long nor too short; it had a rich agenda.
There was a mixture of lectures, group work, plenary discussions, role play, and other pedagogical devices, well suited to convey the messages of the seminar. The facilitator was dynamic and led the audience through lectures and group exercises in a very professional and enthusiastic way. The participants were active and the group dynamics helped to get engage everybody. Translation was provided and worked well. The location was tranquil and conducive to a good learning experience.

There were also some elements that could be criticised. The programme was too tight, and there were soon problems with time management. These were partly caused by rather ineffective spatial arrangements. Shifting from group work to plenary sessions and back again took long. As a consequence, there was little time to reflect on the content and jointly discuss adaptation. The seminar was more a demonstration on what had been done in other countries (which was a necessary component), but left the issue of adaptation open. No part of the workshop dealt with follow-up activities. Could it be done better? Yes, it would be quite possible to solve the problems mentioned by revisiting the objectives, adapting time and space management, and thus conduct the workshop more efficiently.

Most important, the objectives of the workshop were reached. It may be too early to tell, but it does seem likely that a new version of the manual, adapted for use in the West African context, can be produced and many of the participants can develop the curriculum content without waiting for a new manual to appear. They got the points from the workshop and can certainly apply as much as they need to. In conclusion, the quality of the seminar was high in most professional respects, but could be improved in terms of micro-management.

**Case 3: A Rating Scheme to Appraise Curricular Materials**

In July 2003, the International Bureau of Education in Geneva convened a meeting on how to appraise HIV/AIDS prevention curricular materials and teaching – learning resources. There is a need for criteria to guide the appraisal of HIV/AIDS materials in schools. There are many teaching – learning materials available, but not all are relevant or appropriate. It would be essential to highlight good or promising practices.

The IBE appraisal criteria go back to early 2002, when IBE started to adapt existing criteria developed by Schenker and Berger. These were reviewed by an expert panel and there were pilot tests and internal revisions. A fourth draft was developed before the workshop. The rating scheme presented in the seminar had thus been developed over a period of 18 months, and in several stages. The intended users of the rating scheme were “IBE and its partners, to select, highlight and disseminate good and promising practice for anyone interested in:

- Evaluating their own material
- Selecting existing material
- Adapting existing material to their own context, needs and resources
- Developing new material”.

The rating format consists of six core criteria and three additional criteria. Each criteria consists of a batch of specific questions concerning the material to be rated. The actual rating is done on a scale consisting of the values 0, 1 and 2, where 0 means that the issue in question is poorly addressed, while 2 means that it is well covered. The ratings are aggregated for each indicator, and then all of these are aggregated. A teaching – learning manual that is assessed could thus get a score of between 0 and 100.

Is it a good rating format? In our view, there are both a number of technical issues that can be questioned and some more general issues. First, the rating scale is very restricted. With only three possible ranking alternatives, it is very likely that there will be strong bias towards the middle alternative. The scale suggested does not differentiate between the useful and not so useful approaches well enough. Second, the criteria themselves, as well as the indicators in respect of each criteria are not equally important, but there is no weighting system. Hence, the overall conclusions based on the rating could be misleading. Third, it is not always clear what to rate; sometimes this is expectations for the future, at other times experiences of the past, and yet other times the actual content of the teaching-training material.

At a more general level, we find it surprising that the rating format does not include more indicators that relate to gender and equity issues. To have such a content would certainly distinguish good practice better than, for example, whether the manual makes use of role play. Yet another objection relates to the system of aggregating scores in the rating format. It means that a focused training package, with a limited set of objectives, target audience and means of delivery will always receive a poor rating compared to very general and all encompassing training packages. We think that focused training material could many times be better, and hence the rating scheme could be misleading.

Finally, the determinants of a high score could at times be questioned. Measurable outcomes would be useful, but how does one apply a criteria that the objectives should be time-bound on a scale from 0 to 2? And, if there is balance to be tread between when an objective can be measured and when it can be attained, what should appear most desirable? In sum, the rating format that had been developed over the course of 18 months used as an input to the seminar, and subsequently to be further used in Field Offices, needs much more attention. It is, in its present shape, not up to the standards, and should not be either disseminated or put to use until issues like those mentioned above are resolved.

Could a rating format have been done better? It is likely that a more useful scheme could have been developed as none of the issues above are technically or conceptually impossible to resolve. The use of rating systems in all kinds of evaluative exercises is common, and there would be much to learn from in the literature on the subject. But it is not clear that a rating scheme would be the best mode of assessing teaching-training materials. Perhaps a more direct approach could be used at a lower cost and better utility. In the two examples mentioned first, the book on HIV/AIDS and education and the regional seminar in West Africa, we had no doubt that the initiative as such was right, but we are not that sure about the initiative to develop a rating scheme.
6.3. The Cultural Approach to HIV/AIDS

This section discusses three of the products that have come out of the work on the cultural approach to HIV/AIDS. They are assessed in terms of practical utility and added value. The section is concluded by an analysis of theoretical perspectives on the concept of culture.34


This is a handbook of 48 pages on the above-mentioned subject. The introduction says that the handbook is specifically devoted to presenting methods for building culturally appropriate programmes and projects. Although there is no mention of a specific audience, this must be interpreted generally, that is, the intended audience is presumably anyone developing such projects and programmes, not only UNESCO staff.

There are many handbooks on project design, implementation and evaluation. Most bilateral and multilateral aid agencies have manuals, so a quick market survey would suggest that there are at least some 20 such manuals around in the development community. There are also many academic publications on the subject, as well as administrative handbooks from commercial publishers and government printers. Is there a need for a new one?

Among the many guidelines and manuals, there is actually none that has a particularly cultural approach. Several of the well-known manuals on participatory design, stakeholder evaluation and the like, point to the need for contextual and local specific information – but not of a specifically cultural lens. Sage publications have field guides that contain similar messages, for example in their series on Cross-cultural research and methodology. Volume six in that series (Lonner and Berry, 1986), Field Methods in Cross-Cultural Research, has many observations and practical hints on evaluation in cross-cultural settings. But the Sage volumes are not well-known among people working in development cooperation or with HIV/AIDS prevention, and besides they are quite extensive. So, something practically useful, with a cultural content of around 40 to 50 pages would seem to fill a gap on the subject.

The UNESCO handbook starts with a foreword, followed by an executive summary, a reminder of the cultural approach, and then an exposition of the challenges in fighting HIV/AIDS. The format is the same for all the methodological handbooks. Then there is an exposition of current design and implementation modalities. The problem is that the real subject matter does not start until page 22. Then a page is devoted to define what a project is, and on the next page the readers arrive at an exposition of interacting factors.

---

34 UNESCO’s work on culture is presented on the website www.unesco.org/culture/aids. It is well designed and easily navigable. It is also commendable that the publications are made available there. UNESCO has a role to play in disseminating information, being a clearing house for ideas and information. There is then an obligation to do that professionally. In the course of this survey we looked for the country specific studies on Kazakhstan, Kirgizistan and Russia. They were listed on the web, with the note that they would be available soon – but the webpage was latest updated in September 2003, and the text was still there in March 2004. The report “Life Forces and Civil Choices” was listed as coming soon, and that webpage was last updated in July 2003. This is clearly not professional information management.
and there are guidelines for preliminary evaluation. This content is very basic and many readers would find the introduction too long, and these first pages too trivial. If the target audience needs that information, then much of what follows is too brief to be useful. If, one the other hand, the audience is sophisticated enough to make use of pages 25 to 45, then there would not be much need for the first 25 pages.

The choice of tools is important. The section on the choice of culturally appropriate tools gives two examples of useful tools for preliminary studies, and they are rapid rural appraisal and beneficiary assessment. The text on page 34 says that “beneficiary assessment methods can be used to make a project palatable to the local population, in order to secure its approval and cooperation with respect to the external preventive and medical action.” What does this mean and how useful is it as a guide to project design? The statement as such is of course not wrong, but beneficiary assessment is not a method as such, but rather something that can be done (must be done), and there is a wide range of methods to use. Beneficiary assessment can be very helpful, if done well, and it can actually undermine a project if not done properly. But the handbook is not concrete on this subject, although the top of page 35 suggests (on six lines) that there are limitations to the tools. Therefore, we would question the balance in the report between a rather long and general introduction, and weak substantial guidance and discussions in relation to methods.

Four pages are devoted to the subject of evaluation, which is not much in a 48 page handbook of the above mentioned title. It is much too short to be practically useful. We could engage ourselves in a very lengthy discussion on this subject, but the following are some of the main observations:

- There is no mention of gender and equity issues and how these would be affected by a cultural approach to the evaluation task. Given the prominence of the issue, its determining effect for project success, the need to have gender based data, etc. this is a surprising shortcoming.
- The section of cultural cost/benefit analysis presents a vision of a modified traditional cost/benefit analysis. However, we would question that approach as it is probably easier and more relevant to do a traditional sociological and anthropological analysis of benefits. Borrowing terminology and methods from economics does not make the subject easier or the analysis better.
- The only evaluation tool (page 40) mentioned is an “interest analysis method”. This is hardly a method, but something to be done, and which could be done with a range of different methods (interviews, observation, surveys …).

In one section on page 41, the authors note that “in the cultural approach, the major points to be verified for successful prevention and care are:

- Correspondence between objectives and problems (felt needs);
- Relevance of means to the problems and local situations;
- The results and effects expected from the project (by institutions/by populations).”

This does not make a big difference from a non-cultural approach. We would imagine that these are always key questions, in evaluation of HIV/AIDS activities, as well as evaluation of any program or project that delivers some form of service to a population and that is intended to solve a problem. There must be more to the cultural approach than
that, and we have no doubt that there is more to it – but it is not expressed in the handbook.

Is the handbook a useful tool and does it hold a high quality? At first, it must be reinforced that the subject is highly relevant and there is demand for culturally sensitive approaches to design, implementation and evaluation. The handbook and the other publications of UNESCO, do meet a demand. There are aspects of the handbook that are good; it is well written, it has an attractive design, and it is easy to locate subjects in it and to get an overview of its structure. It has references to other publications that could be useful, and it is available on the net. But there are much of introductory texts that are not quite relevant and that should be removed or made shorter. There are too few practical examples, and the actual content of the cultural approach needs to be better substantiated and made more practically relevant.

Case 2. Country Report Vietnam

The case study of the cultural approach to HIV/AIDS prevention and care in Vietnam sought to interpret the relationship between Vietnamese culture and measures to limit HIV transmission and infection, as well as the provision of support and care of people with HIV/AIDS. The overall aim was to suggest more effective interventions for such activities. The study was based on 152 respondents in two districts of Ho Chi Minh City.

In the summary of the report, the results are presented as follows: “the two main types of behaviour likely to lead to transmission of HIV are needle sharing among drug users and having unprotected penetrative sex with multiple partners. A salient cultural aspect of many people’s risky behaviour was subjectivity (a lack of concern about their health, and over confidence in their ability to avoid infection).” This is an interesting observation, but it is not new and does not appear to be specific to Vietnam or to Vietnamese culture.

The researchers found that prejudice and discrimination were common. This behaviour was attributed to many cultural factors, such as a lack of adequate, accurate knowledge about HIV transmission, demoralised PWHAs who had sipped into an indulgent and irresponsible lifestyle, male promiscuity and infidelity, gender, inequity, people regarding sexuality as a sensitive, taboo subject. Again, these observations and findings do seem likely and pertinent. They are also global, the same observations could have come out of a study of South Africa, Brazil, Papua New Guinea, or anywhere else. These are not specifically Vietnamese cultural features. The report mentions “the particularly Vietnamese traits of curiosity and gossiping about others” and how that has contributed to PWHAs disguising their illness. The report does not contain any references to how and why curiosity and gossiping can be considered particularly Vietnamese phenomena, and as a piece of qualitative research, for global dissemination, that should have been better researched and developed into more scientific concepts. (In a similar manner, the report

---

35 Vietnamese cultural approach to HIV/AIDS prevention, support and care. UNESCO/UNAIDS research project. www.unesco.org/culture/aids

36 Another case study was carried out in Quang Ninh Province providing more in-depth information.
Quality and Content

The case study of Vietnam illustrates the difficulty of finding out what is specific with a cultural approach. It is essential to have a distinct definition of what is meant by culture, and what is specifically Vietnamese. Otherwise, the approach does not bring any value added in relation to previous knowledge. It is also essential to explore concepts in depth. The study refers to the notion of “social evils” but does not explain what a social evil is, how it affects prevention and care, or whether it is an obstacle or a help in addressing the problems related to HIV/AIDS. It is mentioned in subtitles and in summaries, but never explained. The concept of social evils is not used outside Vietnam, and it seems to be the one item mentioned in the study that is particularly Vietnamese, but whether that relates to culture or something else is an issue that could be worth exploring.

Case 3. Country Report Mozambique

The publication on Mozambique has three main components: an institutional assessment, a review of the available socio-cultural literature in the country and the field research. The institutional assessment is very brief and occupies no more than two out of a total of 90 pages. It briefly lists organisations with responsibilities in respect of HIV/AIDS, but there is no analysis of them, or their strengths and weaknesses. It is a redundant part of the report.

The review of socio-cultural factors and HIV/AIDS transmission is kept to eight pages, and opens the report. In spite of the short text, it is all quite essential background and very good reading. A text like this communicates clearly the importance of a cultural approach. It also shows that a piece of applied research such as this does not need to invent all concepts on its own, there is sociological and ethnographic research available. It is an excellent summary, and sets a useful base for the field research, which follows on the remaining 60 pages.

The study ranges from aspects of traditional African culture such as initiation rites, traditional marriages, death rites, witchcraft, to the aspects of modern life and the dynamic change of cultural patterns, such as migration, commercial sex, and sex with teachers. There is an interesting combination in the report; it never becomes theoretical, but it treats the different aspects of culture clearly. It is relevant and to the point. The study is based on field work in two locations, and there are significant differences in perceptions and behaviour between the two groups. Finding and reporting this enables the report to avoid any generalisations about specifically national cultural patterns, and instead treat the phenomena for what they are.

37 HIV/AIDS prevention and care in Mozambique; a socio-cultural approach. UNESCO/UNAIDS research project. www.unesco.org/culture/aids
Theoretical Perspectives
UNESCO has initiated the cultural approach to HIV/AIDS prevention and care, in line with its general mandate among international organisations. It is a subject that has much in common with the notion of social capital, which has been elaborated by the World Bank and UNICEF, in manuals, analytical tools, and methodological guidelines. “Cultural approach” has many advantages as a concept; it is more easily understood than social capital, and it opens up for more novel approaches in project design. Nevertheless, UNESCO’s activities in the cultural approach may benefit from some of the work done by the World Bank, UNICEF and others under the title of research on social capital and HIV/AIDS.

So far, the activities developed under the cultural approach have been called research. They can thus be related to the role that UNESCO has in being “a laboratory of ideas”. New knowledge and new insights are developed. It is an applied research and it can set the patterns for new and more effective projects when it is of a high quality – as in the case on the country study on Mozambique.

The role of a laboratory of ideas suggests that UNESCO’s work should be in the frontline of research. The field of cultural studies is moving fast and spreads to many related fields. Can UNESCO keep up to date with the subject, and would it be relevant to do so? We find that there are several new developments in cross-cultural studies that could yield new insights to UNESCO’s work in the field.

First, the country studies and methodological guidelines that we perused focus on culture in the form of values and attitudes characteristic of a group of people, normally a nation. The components are often traditional aspects of culture, relating to social practice; marriage, sex and family life in particular. However, cultural patterns are often set by organisations in today’s world. People belong to organisational communities, not only to the national, regional, or other social groups. Organisational culture could be introduced, and should certainly be surveyed, as one of the potential variables in the cultural approach to HIV/AIDS. The dimensions of organisational culture are not the same as the dimensions of national, gender, age or other cultures.38

Second, the field of post-colonial anthropological research has devoted much attention to the concept of culture and has deconstructed its use in research and practice. There is a lively and critical debate on who uses the concept and why, and how it fits into patterns of global domination and the exercise of power. At times, some of the work coming out of UNESCO would benefit from the critical approaches in this school of thought39.

Third, it is important that culture is understood as a dynamic concept and that it is a useful concept – in quite unexpected ways. In organisational literature, some researchers have explored how groups of people deal with vagueness, cope with abundance and

39 Philosophers and sociologists such as Gayatri Chakravorty Spivak, Saac Julien, Kobena Mercer and Okwui Enwezor have published extensively on the topic throughout the 1990s and to date.
organise collaboration with the help of linguistic resources. Cultural differences and cultural stereotypes cease being a source of misunderstanding and conflict. Instead they become linguistic resources to cope with uncertainty, risk, and conflict – and effective instruments. However, this is an entirely different use of the word culture, where it is transformed from being an attribute of groups and individuals, and instead becomes a tool for communication, conflict resolution, and coping with uncertainty.

The point with these three observations is that there are perspectives on culture that are not reflected in UNESCO’s work on the subject. Are the expectations too high? As UNESCO is the specialised agency in the field, and as a specialised agency can be expected to be at the forefront of research, it should be realistic to expect that developments in the scientific community finds its way into its work in the field, particularly when that work has an innovative character.

We recognise that UNESCO’s resources are limited, and in fact we are impressed by the sheer magnitude of reports that have been forthcoming from the group that manages UNESCO’s cultural approach. The production process has been effective, and there are a number of good studies and, sometimes, useful handbooks. It is even more amazing that such a small group of people have, in a short period of time, built a worldwide recognition that UNESCO has made a contribution in this field, and has the capacity to do so in the future. It is a fortuitous combination of some few dedicated persons, having an organisational platform, a meagre budget, and a network of professional contacts, that has made a difference. To make the point clear, we are talking of two to three persons, and in that perspective the impact and the output is exceptional.

The critical observations above should be seen in the light of overall managerial responsibilities, where the higher management levels of UNESCO ought to make sure that the staff actually implementing UNESCO’s work in this field are provided with adequate resources for quality control, professional development, human resource development, and time for critical reflection – all of which they lack. But their work certainly deserves wider recognition and support to realise its full potential, and to meet the expectations that it has raised.

6.4. Concluding Remarks

The main problem relating to quality is the weak attention to gender and equity issues in many of the publications, seminars, strategy documents and reports. Gender sensitive information and communication is the most important determining factor of quality – and is strongly related to the success of any activity.

This section looked at six different activities, three in the field of preventive education and three in the field of culture. Three of the activities were found to be of a high quality; they did the right things and the main messages were clearly and well articulated. A few things could have been done better, particularly to make the activities more cost effective.

40 See for example Ester Barinaga; Levelling vagueness; a study of cultural diversity in an international project group. EFI, Stockholm.
But by and large they were of a high quality. One of the activities would need to be reconsidered and developed with a clearly defined audience in mind and in so doing, some of the content would be redundant and other parts would need to be developed further. Two of the activities were of questionable quality. There are both practical and theoretical objections to the content of these activities.

The managerial consequences of this analysis is that UNESCO needs to pay more attention to “micro-management” to make sure that the products delivered and published hold a high quality, that they are continuously developed, and that there are proper screening processes before things are published. At present there is much attention to performance based management, and in particular to results. We fully agree that results are important, but results are never created by work which does not hold high standards of excellence. It is important that managers and different levels do not forget to look at the quality of seminars, workshops, publications, etc. in their eagerness to monitor results. The latter is far more difficult, and if the products are not good enough, there won’t be any results to measure anyway. In brief, it could be more important to invest resources in improving quality than in trying to measure results.
7. CONCLUSIONS AND RECOMMENDATIONS

7.1. Conclusions

This chapter outlines the main conclusions in terms of results achieved, why and how results were created, and why the impact has not been greater. It does not cover all findings that emerged during the evaluation. After presenting twenty-five conclusions, we propose a number of options that could be considered in order to strengthen UNESCO’s response to the HIV/AIDS epidemic. The box below summarizes the findings.

Text box 7.1. Summary of conclusions

<table>
<thead>
<tr>
<th>RESULTS</th>
<th>INTENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Increasing awareness and visibility</td>
<td>8. Problems using strategic planning as a management tool</td>
</tr>
<tr>
<td>2. A varied response across sectors and countries</td>
<td>9. Lack of effective management tools to translate intents into activities</td>
</tr>
<tr>
<td>3. A flexible but opportunity-driven response</td>
<td>10. Contested strategy on preventive education</td>
</tr>
<tr>
<td>4. Some results are measurable and significant</td>
<td>11. General but too complex content in strategy documents</td>
</tr>
<tr>
<td>5. Many results can be described and analysed</td>
<td>12. Gap between global challenges and resources</td>
</tr>
<tr>
<td>6. Other activities did not produce any results</td>
<td>13. Low level of financial commitments</td>
</tr>
<tr>
<td>7. Gender and equity concerns have not been prominent</td>
<td>14. Low expectations from Member States</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PARTNERSHIP</th>
<th>IMPLEMENTATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. UN coordination weak at global level, but stronger at country level</td>
<td>18. Human resources not sufficient to engage in partnerships and manage an effective response</td>
</tr>
<tr>
<td>16. Close cooperation with civil society produces good results</td>
<td>19. Human resources development not linked to strategic planning and roles of the Organisation</td>
</tr>
<tr>
<td>17. Privileged access to ministries of education, but the potential is not realised</td>
<td>20. UNESCO has been unclear about its role as a specialised agency</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IMPLEMENTATION</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Human resources not sufficient to engage in partnerships and manage an effective response</td>
<td>21. Unconventional but effective design of internal coordination</td>
</tr>
<tr>
<td>19. Human resources development not linked to strategic planning and roles of the Organisation</td>
<td>22. Weak integration of HIV/AIDS in work of sectors, and of sector inputs to HIV/AIDS activities</td>
</tr>
<tr>
<td>20. UNESCO has been unclear about its role as a specialised agency</td>
<td>23. Quality of work is high, but can be improved</td>
</tr>
<tr>
<td>21. Unconventional but effective design of internal coordination</td>
<td>24. A result based management system is not quite appropriate to capture impact</td>
</tr>
</tbody>
</table>
First: Conclusions on Results

1. Increasing awareness and visibility
Despite a few activities during the 1990s, UNESCO became involved in the fight against HIV/AIDS more systematically and at a larger scale as late as 2001- fifteen years after the epidemic started to affect Member States in Africa, Asia and the Latin America and the Caribbean. But then, in a short period of time, UNESCO formulated a global HIV/AIDS strategy on preventive education, established a HIV/AIDS Coordination Unit and scaled up a number of activities with support from UNAIDS at global level and in some countries.

Even if UNESCO supported important HIV/AIDS activities during the 1990s, these were few and not part of an organisational response. UNESCO was perceived neither among UN partners nor among other stakeholders as a player in the fight against HIV/AIDS – not even in education. HIV/AIDS is an emerging priority for UNESCO, but not yet an overall organisational priority, as for instance, in UNICEF and WHO. The response to HIV/AIDS has become more visible and better reflected in global policy documents, but the epidemic’s inter-sectoral nature is not yet adequately addressed and the financial commitment remains limited. The human resources as well as the financial commitment to fight HIV/AIDS are still inadequate.

2. A varied response across sectors and countries
Nobody would expect UNESCO’s HIV/AIDS activities to be similar in all countries; nevertheless, the response at country level shows a surprising variety – and a variety that cannot be accounted for only by differences in the external environment and the way HIV/AIDS has affected countries. There is a great difference in resources available for HIV/AIDS activities: UNESCO Brasilia is one extreme with an annual budget of around US$ 130 million, but many Field Offices have HIV/AIDS budgets below US$ 10,000. In some countries and regions activities are integrated into a programmatic framework, whereas in others they are scattered and not much related to each other. There are examples of how global strategies were translated into regional and national strategies, and there are also examples of less coherent approaches.

The Education Sector holds the lead and dominates in most countries, but there are also examples where most HIV/AIDS activities are in the Culture Sector. The Social and Human Sciences and Communication and Information Sectors’ activities are prominent in some countries, absent in many others, and of marginal significance in others. In some places there are inter-sectoral activities. UNESCO’s roles vary between that of being an implementing agency, engaged in capacity building, laboratory of ideas, clearing house for information, standard setter, and advocate. In some countries all roles are played, in others there is a focus on one, or on a more narrow range of roles.

3. A flexible but opportunity-driven response
The variety of responses shows that UNESCO can be flexible and has the capacity to adapt to very different conditions. There are examples of how the HIV/AIDS activities have developed from nothing to very significant and effective programmes in a few years
only. There are examples of how significant capacities to manage large-scale projects were built up quickly, in response to local demand. That is the positive side of the variety of responses.

The more negative aspect is that the local responses cannot be seen as part of an organisational thrust to combat HIV/AIDS. Global strategies have seldom contributed much to shape a local response – though they have not been obstacles either. When effective local activities were developed, this was the result of fortunate combinations of UNESCO Representatives and Programme Specialists efforts to make HIV/AIDS a real priority. Even the most effective programmes appear to be quite vulnerable to staff turnover, vagaries of budget allocations, as well as the dedication of a small number of persons.

4. Some results are measurable and significant

It is usually possible to measure the immediate results of UNESCO’s activities; the cultural approach to HIV/AIDS, for example, developed 21 publications (country studies, methodological papers, manuals) over a three year period. This is an impressive output, and indicates a high productivity on behalf of a few staff members. One of these activities developed scripts for theatre production in Senegal, leading to four plays produced for an audience of some 3,000. One of the plays was broadcast and its HIV/AIDS messages reached large numbers of listeners. Behavioural surveys show that safer sex practice and condom use is increasing, and the HIV/AIDS epidemic remains under control in Senegal. This can of course not be attributed only to the theatre performances that UNESCO were engaged in, but the plays are part of a popular culture that contributes to the social capital that holds the epidemic back.

The most significant impact relating to UNESCO’s HIV/AIDS activities was in Brazil, where the spread of HIV has decreased by 50%, and death rates have been significantly reduced. This cannot be attributed to UNESCO alone, but as UNESCO together with UNODC has been the implementing agency of the federal government’s, some state governments’ and municipal governments’ programmes to combat HIV/AIDS, UNESCO must also be credited for its part in the success. This is measurable in terms of numbers infected with HIV, numbers falling ill and dying in AIDS, as well in terms of the costs to the health system, and the opportunity cost that can be calculated as the infection rates by 2003 are half of those predicted in the mid-90s.

5. Many results can be described and analysed

UNESCO has been engaged in advocacy in several ways. The informal consultations between senior scientists of the World Foundation for AIDS Research have contributed to a more scientifically based understanding of HIV/AIDS among Heads of government and Cabinet members, particularly in Sub-Saharan Africa. The Havana Declaration, signed by Ministers of Education in the Caribbean in the course of a UNESCO instigated conference, commits all governments in the region to introduce the subject of HIV/AIDS in the school system, with information on how it spreads, what protective measures exist, and how to handle the impact of the disease. The introduction of the advocacy tool kit in the Asia-Pacific region is another example.
Capacity development is not among the more prominent activities, but in some cases there are clear results. The Ministry of Education in Jamaica has responded to the epidemic by creating and funding a coordinator, setting a structure in place for work, and by developing its organisational capacities concerning HIV/AIDS. UNESCO has been a partner in providing information and discussing activities along the way, for example together with UNICEF and the University of the West Indies. UNESCO has also brought in international experts for seminars that have encouraged the response. Changes such as these can be described and analysed, and the impact is significant – though not measurable.

6. Other activities did not produce any results

The evaluation also found activities without results. Some of these had been implemented as long as ten years ago, others more recently. They had been forgotten and there was no evidence of any impact in the environment where they took place. There are several reasons why they had no impact: (1) some were isolated events that had not been followed up, by UNESCO or others; (2) many were very small and did not generate any commitment; (3) generally, they appeared not to have been sufficiently grounded in a clearly articulated demand; (4) the purpose was vaguely articulated and did not relate clearly to any of UNESCO’s roles; (5) there were problems with timing, at times the response was too early and at other times too late to connect to the work of other organisations; and (6) more attention could have been paid to the quality of work produced – be it capacity building projects, seminars, or publications.

7. Gender and equity concerns have not been prominent

It is widely recognised that HIV/AIDS primarily strikes at women, the poor and the young; and at young women in particular. In coping with the impact, it would thus seem obvious that effective programmes have to be gender sensitive. A lesson from the past decade’s preventive education work is that it is particularly important to empower women and to equip young women with knowledge and information to protect themselves. The evaluation did not find many examples of UNESCO activities that had gender-specific approaches to preventive education. From the overriding strategic documents and down to the smallest of field level activities, and indeed to monitoring and evaluation instruments, there was a surprising lack of gender sensitive approaches. In Field Offices, the HIV/AIDS focal points and gender focal points are often different persons and the contacts between them few – even if there are exceptions as, for instance, in Bangkok.

Second: Conclusions on Intents

8. Problems using strategic planning as a management tool

The strategy on preventive education was formulated in 2001. It was a useful initiative. However, the purpose of the strategy is not clear and most see it as a communication tool – more like a pamphlet to inform others of what UNESCO does than to mobilise and direct action internally. Seen as a communication tool, it has several flaws: too many and too complex design elements; no objectives; and too much general information on the epidemic. It did not communicate effectively, and was actually not much known or read by those whom it was intended for. A new strategy has been developed and was made
public in February 2004. It is a clearer and more concise document, but still aimed at an external audience. It is still not a management tool providing strategic direction and focusing the use of resources. The process aspects of strategy development were neglected.

9. Lack of effective management tools to translate intents into activities
UNESCO has several tools for planning at a high and abstract level; the Medium Term Strategy (C/4) and Programme and Budget (C/5), and the global preventive education strategy to name the most prominent. There are also regional strategies, and at times, country strategies. It is a top heavy planning process, but there is also a gap between the general directions provided in these documents and the activities at country level. There is no level of resource allocation according to priority targets in between activities and the biennial planning mechanisms. There is a need for a longer framework of thinking to guide the design of coherent consecutive activities. In particular, the evaluation noted the absence of a programme level to integrate activities at regional and country levels. In spite of lacking central guidance, it was noted that UNESCO in the Caribbean has a long-term framework that integrates activities well and provides an overall direction. The main projects in Brazil have the character of programmes rather than projects. These two cases show that it is possible to move from scattered activities to coherent programme within the present management systems.

10. Contested strategy on preventive education
UNESCO’s HIV/AIDS strategy is focusing on preventive education. This focus has been contested by some UNESCO Field Offices (e.g. Bangkok and Beirut). The strategy is seen to constrain UNESCO’s response to the epidemic by focusing on preventive education, while it should include and mobilize all sectors – Culture, Human and Social Sciences, Communication and Information in their own right. There is a dilemma: on the one hand, to articulate a strong and focused vision for HIV/AIDS in UNESCO to be recognized by partners, simple enough to be remembered and understood in a media world and well-grounded in UNESCO’s mandate; and on the other hand to mobilize and create a broad inter-sectoral response from the Organisation. The current strategy was developed in a short time and with limited involvement from Field Offices and Sectors – which has created weak ownership of the document.

11. General but too complex content in strategy documents
The content of the preventive education strategy documents was general and did not set any real priorities in the Organisation. Everything could be accommodated. The strategy built on a number of concepts that are referred to as core activities, guiding principles and roles. None of these constitutes a logical and coherent framework of thinking. The naming of core activities brings together under one core activity such diverse activities as advocacy, capacity building, and normative tasks. At the same time the strategy defines roles that are overlapping, and it is not clear how the design elements of the strategy relate to each other. It is thus not surprising that the strategy did not communicate well to an external audience, and also that it did not guide UNESCO’s own work.
12. Gap between global challenges and resources
The HIV/AIDS epidemic is one of the gravest challenges facing mankind at the beginning of the third millennium and it has tremendous consequences for the lives and well-being of all. It is a challenge that cannot be met without significant redirection of efforts, as well as mobilization of new resources. UNESCO is a small organisation of some 880 professional staff funded from the regular budget and a total regular programme budget for activities of 148.2 million for 2004-2005. Out of these resources, around 4% of the regular programme budget were allocated for HIV/AIDS activities, managed and coordinated by a network of around 50 persons from Field Offices and Headquarters, many of whom were working part time on HIV/AIDS. In light of these scant resources, the results have been remarkable. It shows that the Organisation can make a difference if it wants to, but the resources are quite inadequate in light of the challenges posed by the epidemic.

13. Low level of financial commitments
During most of the 1990s, the financial allocations for HIV/AIDS were around 1% of the regular programme budget and there were not many other contributions from UBW or funds in trust from bilateral donors. The turning point came in 2001 when allocations increased and Field Offices were more successful in mobilising external funds. But even if there was an increase, it is still a small share of total resources in the Organisation, and it can be questioned if an activity which has less than 5% of resources can really be called a priority in practice. Brazil is of course always the outstanding exception, which started with a very large programme at the end of the 1990s and which alone counts for around 95% of UNESCO’s HIV/AIDS activities globally – in financial terms. This says something about Brazil, but also about how small UNESCO’s contribution is in other countries. The results in Brazil are outstanding, which shows that there is a strong correlation between impact and resources spent.

14. Low expectations from Member States
One of the reasons UNESCO has not responded to the HIV/AIDS epidemic earlier or in strength, is that the Member States have not made it a high priority. UNESCO does indeed have a mandate to act, and the General Conference as well as the Executive Board supports the strategy. But Member States set many other priorities for the Organisation, and thus it is not clear exactly how high a priority HIV/AIDS actually is. The evaluation’s interviews with a small sample of Member States’ delegations indicate that some are quite sceptical, or even downright negative to UNESCO’s engagement in HIV/AIDS activities. There are Member States who, in cooperation with their agencies for development cooperation, have formulated strategies for their partnership with UNESCO in various fields. These do not set priorities in HIV/AIDS related work. The Member States do not appear to follow-up their general expression of a priority with real, articulate and unanimous demand for action, nor do they proactively follow up on results.
Third, Conclusions on Partnerships

15. UN coordination weak at global level, but stronger at country level
UNESCO is one of the Co-sponsors of UNAIDS and chairs the CCO at the time of this evaluation. Other UN organisations assess UNESCO’s role in the struggle against HIV/AIDS critically; whilst recognising the importance of preventive education and the value of a cultural approach, they find the actual contribution too small. Interviews in Geneva, New York and Washington, D.C. indicate that other UN partners are still waiting for UNESCO to mobilise and to start playing a major role in the struggle against HIV/AIDS. There are no major partnership activities at the global level, but a difference is found at country level. In several countries that were visited during the evaluation, UNESCO was recognised by UN partners to be a significant actor, with important contributions. Personnel in other UN agencies, funds and programmes, as well as in multilateral banks, were much more appreciative of UNESCO in the field than they were at Headquarters. There is a pattern of collaboration. In most countries visited, UNESCO worked in partnership with one or two other UN organisations (e.g. UNODC, UNICEF, IDB), implementing projects together, having joint publications, seminars, etc. As for the others, there was mostly a coordination built on division of labour, and the organisations did not work closely together, nor did they need to (e.g. WHO, ILO, WB). There were at times one or two agencies where there was some sense of rivalry - activities overlapped or there were contested claims to leadership among the UN agencies.

16. Close cooperation with civil society produces good results
In many of the countries visited in the course of this evaluation, UNESCO had surprisingly strong and extensive networks with civil society organisations. These networks range from academic organisations, schools and school-related organisations (such as UNESCO Clubs), to business organisations, theatre groups and the like. In the field of HIV/AIDS, there were of course also organisations for people living with AIDS, volunteers working with information campaigns, care and support to families, etc. It is not often that an international bureaucracy forges such extensive and cordial relationships with such organisations, and the evaluations interviews suggest that UNESCO is held in good esteem. Most important, however, is that there is a very strong correlation between results obtained and partnership; it is very often together with civil society organisations that UNESCO has accomplished the results demonstrated in this evaluation – not alone, and not as much with other partners.

17. Privileged access to ministries of education – but the potential is not realised
It is often said that UNESCO has a privileged access to Ministries of Education. This is confirmed in interviews, but in the field of HIV/AIDS activities, the relationship is constrained as personnel and management in Ministries of Education – particularly in Sub-Saharan Africa - have more experience of practical HIV/AIDS work than the UNESCO staff they meet. They see UNESCO as a late-comer in the field of HIV/AIDS. Much as it is welcome, they are also concerned that UNESCO should be able to make a useful contribution. The lack of resources frustrates partners in government, as does the lack of clarity about roles and comparative advantage. The advantages of a privileged access to Ministries of Education remain to be seen in practical work.
Fourth: Conclusions on Implementation

18. Human resources are often not sufficient to engage in partnerships and manage an effective response
There are Field Offices where the Representative takes a keen interest in HIV/AIDS activities, where Programme Specialist allocate substantial blocks of time for the purpose, and where consultants are brought in to support the efforts, but these are exceptions. In most places, the HIV/AIDS activities are in the hands of junior personnel, national consultants on short-term contracts, or associate experts that are on temporary assignments. UNESCO has been fortunate in finding people at these levels that do have appropriate qualifications. But these programme officers are constrained by being on short-terms employment contracts – they cannot interact effectively with senior personnel from other UN organisations who have substantial backing from their agencies, and they may not be as vocal, accomplished and assured in negotiations. They lack the clout to act persuasively with government officers at senior levels who have more experience, safe employment conditions, and the authority that comes from being confident in one’s role.

19. Human resources development has not been linked to strategic planning, intents, and roles of the Organisation
Competence on the job is made up of theoretical knowledge, ability to do things, and attitudes. It takes a different set of competencies to engage successfully in the role of advocacy compared to those it takes to be a good project implementer. The skills applicable to capacity building differ from those applicable to a laboratory of ideas. To engage in the role of being a clearing house for information would require skills in information management, systems architecture, as well as demand analysis. The evaluation has not come across any evidence that UNESCO assesses the competences needed to play different roles, nor that any such sense of competence would be matched to human resource development. Irrespective of which roles UNESCO chooses to play, it has to do so with staff members that possess the required competencies. In order to have an impact, it is essential to secure expertise – and much of the expertise needs to be in the Organisation. It is true that an organisation can and must supplement its own capacity with external competence, but unless one possesses a high degree of internal core capacity, it is difficult to access the best networks, to reach the most relevant expertise, and to be perceived as an attractive and interesting partner. UNESCO could not manage a global response to one of the worst challenges to humankind with amateurs and generalists (nor does it, but the evaluation encountered a debate in human resource management that suggested it could be done).

20. UNESCO has been unclear about its role as a specialised agency
UNESCO, like other specialised agencies, has a mandate - it does not have roles. When the mandate is interpreted in terms of roles to play, it is essential to have a comprehensive set of roles and to use distinct definitions. Unlike many other specialised agencies, UNESCO appears to have focused on its normative mission - meaning engaging in exchanges of ideas, being a platform of international cooperation within its Sectors, developing norms and standards in research education, protection of the cultural heritage, etc. Technical cooperation and technology transfer to developing countries have not come
to play a large a role in its affairs. Much as UNESCO has kept to these traditional roles in its five Sectors, it has not found an appropriate response to the HIV/AIDS epidemic in terms of these roles. When HIV/AIDS activities are now expanding, there is an increasing call for capacity building. Increased levels of extrabudgetary funding support mainly operational activities. This can be combined with the normative work, but it is vital to see that it is also different, and that there is a need to pay attention to needs assessment, conditions of ownership, management and evaluation, that differ from the normative roles.

21. Unconventional but effective design of internal coordination
UNESCO chose to make the IIEP the coordination unit for the response to HIV/AIDS; that is, to locate the leadership for multi-sectoral work in an Institute rather than in one of the five Sectors. Through most of the 1990s the coordination function was hosted in the Natural Science Sector. It was moved for personal as well as functional reasons. It is an organisational solution that is unusual, but has been proved to work well. In spite of the weaknesses that are noted in this report, the response has increased rapidly and there is commitment, some resources, and results in a number of countries that would not have been there unless there had been organisational changes. It shows that in order to increase efforts, to break some of rivalries between Sectors, and to develop partnerships flexibly, it can be useful to locate the internal coordination function outside the main line of command – at least for some time. The appointment of focal points, the regular meetings of these at Headquarters and occasionally at field levels, have also facilitated coordination.

22. Weak integration of HIV/AIDS in work of Sectors, and of Sector inputs to HIV/AIDS activities
Most of the HIV/AIDS activities are in the Education Sector, but there are also activities in all the other Sectors. But the activities are separate, they live their own life in the Organisation and are weakly integrated into other work done by the Sectors. It works in two ways: first HIV/AIDS issues are not elaborated or developed within the rest of the work in a sector, and when the HIV/AIDS activities are designed, they are in the hands of professionals who devote themselves to HIV/AIDS, but do not necessarily relate much to the competence and experiences of others in their sector. Finally, we have not come across any projects that link inputs from more than one Sector, and we have not come across activities that fuse inputs from several Sectors into a coherent whole a distinction between multi-sectoral and inter-sectoral work, but we have not seen any examples of either.

23. Quality of work is high, but can be improved
It is important to consider professional standards and quality of work done; that is, to scrutinise the books published, reports and working papers, content of seminars, data banks, manuals and other normative publications. The evaluation selected activities in the Sectors of Education and Culture for this purpose. UNESCO’s HIV/AIDS activities are not at the front end of research, and quality varies. Sometimes quality is very high, most of the time it is high. Publications in various forms are well-written, of relevance within their topics, take account of the “state of the art”, have succinct overviews of their fields,
do not duplicate the work of others, and reach their targets. Some activities are innovative and found to be interesting by the audiences they address. The evaluation did come across examples of mediocre professional achievements, where targets could have been reached more effectively and at lower cost and where other organisations had produced similar reports earlier.

24. **A result based management system is not quite appropriate to capture impact**

UNESCO is developing a result based management system. It is still being introduced through workshops and seminars throughout the Organisation. The evaluation did not look at this system as a whole, and in application to the full range of UNESCO activities. It is quite clear that it is necessary to focus on results; to set priorities in terms of results to be achieved, and to know whether results are achieved. It is equally clear that many result based management systems have a poor track record; they can be expensive, time consuming, irrelevant, and based on a linear understanding of how change takes place in social systems.

So far, few such management systems are sophisticated enough to assess multiple causal linkages, complex systems change, or intricate political realities. The results based management systems are often designed for relatively easy project management and accountability purposes. They were not developed for activities in roles such as laboratory of ideas, clearing house for information, standards setting, or advocacy. It is necessary to manage for results here too and it can be done through careful and regular qualitative analysis. The literature on evaluation and performance management does not present any evidence that a results based management system would be of much help.

25. **Critical reflection and learning are discouraged by organisational structures and processes**

A focus on results must be combined with critical reflection and organisational learning. The network of HIV/AIDS focal points and similar formal and informal groups is a step in the right direction, but the learning potential of the network has not been fully realised. The major lines of communication and decision-making are still vertical, and thus most of the efforts to plan, implement and report goes into these lines of command. The communication relating to professional development of HIV/AIDS activities ought to be more horizontal, but it remains vertical.

The most significant organisational learning occurs on the job, but for that to happen, staff members must have substantive tasks and relevant roles to play. The evaluation saw several examples where Programme Specialists spent their time in secretarial or administrative functions that they were overqualified for. On top of that, the high work pressure in Field Offices did not allow time to reflect on tasks and to distil experiences. This evaluation is not an analysis of organisational learning, but it does appear as though there are many aspects of structure, process and culture that are not conducive to a learning organisation. As UNESCO is a knowledge-based organisation, progress in knowledge management would seem essential for its future competitive strength.
7.2. Recommendations
UNESCO can make a positive contribution to the struggle against HIV/AIDS, so it is logical to argue for a stronger, more consistent and more comprehensive response.

**Number one:** UNESCO must increase its resources to contribute to the struggle against HIV/AIDS. The strength of the response can be measured in terms of the resources devoted to HIV/AIDS activities and there should be targets for how much should be allocated and mobilised. The targets should be realistic, but also challenging and they should express an increasing ambition over time. The evaluation recommends the following targets for budget allocations (the point is not the figures as such, as there is obviously no objective basis for them, but rather that the Organisation should set quantified targets for budget allocations and disbursement; targets that demonstrate real priorities):

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Regular budget</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- allocation in US$</td>
<td>5 million</td>
<td>14 million</td>
<td>25 million</td>
</tr>
<tr>
<td>- share of total</td>
<td>3%</td>
<td>10%</td>
<td>15%</td>
</tr>
<tr>
<td><strong>Extra budgetary funds</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- allocation in US$</td>
<td>18 million</td>
<td>30 million</td>
<td>40 million</td>
</tr>
<tr>
<td><strong>UBW</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- allocation in US$</td>
<td>7.2 million</td>
<td>15 million</td>
<td>20 million</td>
</tr>
</tbody>
</table>

**Number 2:** UNESCO must establish a critical mass of HIV/AIDS expertise and experience in the Organisation. It would be useful to have specific, measurable and time-bound targets for human resource development as well. The following targets are suggested:

- Every Cluster Office should have one full-time programme specialist post on HIV/AIDS established and recruited during 2005.

- Every Regional Bureau should have a full-time sector programme specialist on HIV/AIDS established and recruited during 2006.

- Ten priority National Offices should be identified, and programme specialist posts created during 2005 and recruitments should be completed during 2006.

- An inventory of Headquarters’ and Institutes’ needs for HIV/AIDS competence should be conducted during 2004 with the aim reinforcing a multi-sectoral response to HIV/AIDS. Each Sector should have core competencies, job descriptions at several levels, and a plan for recruitment established.

**Number three:** there is a need to design and launch a capacity building programme on HIV/AIDS related work at all levels in the Organisation. It is suggested that three competence building modules are designed:
- A four-hour module directed at UNESCO Representatives, senior management at Headquarters, possibly UNESCO Delegations, and Directors of Institutes. The contents would be to disseminate UNESCO’s preventive education strategy, present and discuss the evaluation, and to motivate all high-level managers to activities in this field.

- A full-day workshop for all staff members to introduce the strategy and motivate/mobilise their participation. This module would need to have more basic information about HIV/AIDS and spend more time on delineating UNESCO’s activities.

- A three-day seminar on activities in HIV/AIDS, presenting the research frontier, reviewing other agencies, specifying what UNESCO can do in different roles, and building the capacity for fund-raising. This would be directed at present and future HIV/AIDS focal points, and could also include gender focal points in Field Offices.

When the training modules are developed, there should also be a plan on when and how to implement them, and a funding scheme. The target should be to reach all staff members.

**Number four:** HIV/AIDS should become more visible in the strategic planning framework. One possibility would be that HIV/AIDS is established as a cross-cutting theme in the Organisation. That would make it one of three such themes and it would contribute strongly to increased visibility and a sense of real priority to the issue. Whether there can be three cross-cutting themes, or possibly only two, and hence a need to assess the priority of the two other cross-cutting themes, does not really follow from the evaluation. There may be other solutions, but our evaluation has not addressed the management system as a whole, and thus our plea is essentially for a way to make the HIV/AIDS activities more visible at the level of strategic decisions and overall organisational priorities.

**Number five:** To recruit a Coordinator and establish a strong HIV/AIDS Coordination Unit. UNESCO should early 2005 start recruiting a new HIV/AIDS Coordinator with the suggested qualifications and decide on the location of the HIV/AIDS Coordination Unit – preferably in the Education Sector or directly under the Director General. It would be useful to set deadlines, such as shortlist of candidates – May 2005, selection – June 2005, negotiations of terms – August 2005, post filled – November 2005. Feasibility study of coordination unit – May 2005, consultations – June 2005, decision on coordinating structure – August 2005.

**Number six:** Any work UNESCO does in the area of HIV/AIDS must include a gender perspective. The lack of a gender sensitive approach undermines the effectiveness of all HIV/AIDS efforts. Given UNESCO’s limited resources, it becomes even more important that it take advantage of partnerships with other specialist UN agencies (e.g. UNFPA, WHO), academic and applied research institutions, and NGO networks (particularly regional ones that represent people living with HIV/AIDS). Global efforts (the Global Fund, WHO’s 3 x 5 Initiative) in the field of HIV/AIDS are quickly pushing the focus to treatment and care. If UNESCO is going to play a part in the response, it needs to go beyond preventive education for behaviour change and gender equality in formal schooling. A clear focus on the burden of care along with stigma, discrimination, and access to care is essential. Gender issues should be integral in all these areas.
In making suggestions on how to further a gender perspective, we draw upon two of the conclusions of this evaluation. One is that the output of the Culture Sector has been impressive. If the Culture Sector has the capacity and competence to rapidly update its theoretical perspectives on culture so that they better reflect current thinking in the field, this might be the place where UNESCO could begin to develop organisational competence in gender issues.

The second finding of this evaluation that is relevant to progressing gender in UNESCO’s HIV/AIDS response is that ‘In many of the countries visited ....UNESCO had a surprisingly strong and extensive networks with civil society organisations.’ Treatment, care, the burden of care, and fighting stigma and discrimination are central to the HIV/AIDS response in the immediate future. Networks in place offer opportunities to be built upon, and it is essential that the networks include organisations of PLWHA.

**Number seven:** The current HIV/AIDS strategy serves the purpose of a communication tool to inform others of UNESCO’s intentions and reasons for being involved in the fight against HIV/AIDS. There is also a need for a much more strategic planning and management tool to translate intents into activities – to set clearer priorities for UNESCO’s response.

**Number eight:** Clarify the programmatic profile of the HIV/AIDS strategy. The global strategy has been focusing on the preventive power of education while the document also includes elements of care and impact mitigation. The education sector has played the prominent role while the other sectors have been more marginally involved. UNESCO’s response to HIV/AIDS should be defined as multi-sectoral which does not necessarily exclude a particular focus on the preventive power of education. The work of the Communication and Information Sector should be examined to see how it can best be part of an overall programmatic approach.

**Number nine:** Shift attention from policy to programme planning. UNESCO has several tools for planning at a high and abstract level. Considerable time has also been spent on preparing global and regional HIV/AIDS strategies which are similar in approach and content and not found very useful as management tools. On the other hand, there are a large number of activities and projects at global and country level making up UNESCO’s HIV/AIDS response. More coherent global and country programmes – and programme documents are missing between the often fragmented activities and the general policies. UNESCO should shift its attention from the general policy planning to programme development at country, regional and global level. Such a move will also contribute to more concentration and focus of resources and support a multi-sectoral response.

**Number ten:** It will be helpful to clarify the roles of UNESCO as a specialised agency. The evaluation found that UNESCO has been uncertain about what roles to play, which together with weak capacity has impacted negatively on performance. UNESCO has been hesitating between the normative and operational roles – ending up with too many tasks and dealing with too many issues rather than concentrating on roles and issues in which it has a comparative advantage and a realistic chance to make a difference. One possible
way of developing the analysis could be to assess the core tasks of the strategy in the light of the roles used in this evaluation\textsuperscript{41}. The matrix below could be useful; if the cells can be filled out, then there is a concrete map of what to do in relation both to the core tasks and in the different roles (we do not use the role of the implementing agency in this analysis). Apart from clarifying the roles, this could also be used to develop the programmatic profile mentioned in the recommendation above.

<table>
<thead>
<tr>
<th>Advocacy, expansion of knowledge and enhancement of capacity</th>
<th>Laboratory of ideas</th>
<th>Clearing house for information</th>
<th>Setting norms and standards</th>
<th>Advocacy</th>
<th>Capacity building</th>
</tr>
</thead>
<tbody>
<tr>
<td>Customizing the message and finding the right messenger</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reducing risk and vulnerability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ensuring rights and care for the infected and affected</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coping with the institutional impact</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

An analytical tool such as this has the advantage of indicating whether there is a logical relationship between the concepts, or whether there is a need to revisit some of them. Furthermore, if there are activities that do not fit any of the roles, or any of the core tasks, these might not be priority areas. It should also be possible to see where there are gaps, overlapping activities, or duplication of efforts.

\textbf{Number eleven:} Define thematic and geographic priorities. The global strategy presents a broad mandate and guidelines for UNESCO’s HIV/AIDS work. Instead of concentrating resources on a few thematic and geographic areas, the organisation has spread its resources over many areas and countries. UNESCO should maintain a broad vision and mandate in its overall policy – to demonstrate intentions and opportunities. With limited human and financial resources, there is a need to concentrate efforts in order to make an impact. All UNESCO staff met during this evaluation supported such an approach, but it appears inherently difficult for the Organisation to define and stick to more strict operational priorities – which also means to exclude certain priorities.

We are not in a position to define those operational priorities on behalf of UNESCO, but there are at least three key thematic areas in which UNESCO has been and should be involved: preventive education, the impact of HIV/AIDS on education systems and the cultural aspects of HIV/AIDS.

\textsuperscript{41} These concepts have the advantage of being well known, stem from the mandate of UNESCO, and have been used in research on the UN system concerning UNESCO as well as other agencies, funds and programmes. The roles use words in ways that should be understood throughout the international community. They were not invented in the course of this evaluation.
UNESCO plays a relatively low key role in high prevalence countries in Southern and Eastern Africa and only scaled up its response when several other agencies had already been involved for several years. After global activities most of the extrabudgetary and UBW resources are channelled towards Africa while regular resources are more equally spread across regions and countries. UNESCO will not be in a position to establish strong country level programmes in all regions in the short-term. UNESCO should consider focusing more of its resources in fewer countries where there is a need and scope for UNESCO’s involvement in advocacy, information-sharing and capacity building. That might not be in high-prevalence countries in Africa where so many other agencies are involved, but in countries in Asia and the Americas where the epidemic and the awareness about the epidemic are still limited, but where prevalence rates might rapidly increase and explode. In such countries UNESCO might have a stronger role to play.

**Number twelve:** The policies and procedures for quality management need to be revised. The evaluation found that some of the outputs were of mediocre quality. It is essential to develop the quality of activities. More substantive control will help achieve a higher impact, and will contribute to the formation of partnerships with civil society organisations, research organisations, and other UN agencies. UNESCO needs to develop an approach that allows a qualitative analysis of how the organisation contributes to the struggle against HIV/AIDS. Quality management is important, and it is essential that resources are devoted to this issue. It is always possible to monitor and evaluate with external resources, and to connect such findings to management. The processes of quality management cannot be externalised, but must be developed and sustained in the Organisation and with the capacities in house. To critically and continuously reflect on quality and impact is part and parcel of organisational learning; it is through these mental processes that learning occurs. Systems for quality control, monitoring and evaluation should be seen as tools for knowledge management, and be designed to assist the organisation learn and improve its performance. We have not come across any studies of UNESCO as a learning organisation, but it might be useful to undertake a more comprehensive analysis of how learning occurs and what the obstacles to organisational learning are.
Annex 1: Terms of Reference

1. Introduction

1.1 Background and context

UNESCO has been dealing with the issue of HIV/AIDS since the mid 1980s, its efforts evolving over time. Responding to the appeal of the 40th session of the International Conference on Education in 1987, UNESCO drafted a Plan of Action in Education for the Prevention and Control of AIDS as part of the Global Strategy for the Prevention and Control of AIDS. The General Conference approved the Plan of Action in its 24th session, authorized the Director-General to undertake activities under the regular programme, requested the Director-General to accord particular attention when these activities are being implemented to strengthen the coordination with other organizations of the United Nations system, urged Member States to participate actively, through educational programmes and through activities for young people in the prevention of the disease, and invited the Member States to make generous financial contributions to educational activities for the prevention and control of AIDS (Records of the Twenty-fourth Session Paris, 20 October to 20 November 1987, Resolutions).

On 1 January 1996, pursuant to the Memorandum of Understanding signed between six (seven since 1999) United Nations agencies, a Joint United Nations Programme on HIV/AIDS (UNAIDS) was established to coordinate and promote joint and concerted United Nations action to combat AIDS. UNESCO is one of the seven co-sponsors. In 1998 the Executive Board invited the Director-General to continue UNESCO’s support to the UNAIDS and strengthening UNESCO’s programmes of actions that contribute to combating the epidemic, in particular by taking steps to ensure that population groups particularly affected by HIV/AIDS can benefit from the research efforts and means of prevention (Hundred and fifty-fourth Session, 154 EX/Decisions). In April 2000 the Executive Board stressed that UNESCO, in a trans-disciplinary perspective, can make a unique contribution, both specific and global, to the fight against AIDS by ensuring that its activities in the fields of education, science, culture and communication are complementary (Hundred and fifty-ninth Session, 159 EX/28). Being a UNAIDS cosponsor commits UNESCO to support an expanded response to the epidemic. In June 2003 UNESCO takes over the Chair of the UNAIDS CCO.

During the Dakar World Education Forum (2000) the global education community recognized the need to combat the HIV/AIDS epidemic as a matter of urgency, recognizing that HIV/AIDS is an immense challenge to the education sector; one that would undermine progress towards the goals of education for all by the new goal of year 2015. This priority was reinforced by the Director-General in 2001, assigning increasing importance to UNESCO’s contribution to the fight against HIV/AIDS, especially in the field of preventive education, and stating that preventive education must be an integral part of Education for All (DG/Note/01/28). The Director-General emphasized that fighting HIV/AIDS through preventive education requires that UNESCO act on several fronts, with the active involvement of all its programme sectors. UNESCO’s strategy for HIV/AIDS preventive education, developed by IIEP in April 2001 outlines the five core tasks of the Organization in this area: (1) Advocacy at all levels; (2) Customizing the message; (3) Changing risk behaviour and vulnerability; (4) Caring for the infected and affected; and (5) Coping with the impact. The UNESCO’s strategy for HIV/AIDS preventive education designates as the highest priority the age group between 10 and 25, and states that this age group can to a large extent be reached most effectively through schools. According to Medium Term Strategy 2002 – 2007, 31 C/4, UNESCO’s strategy on HIV/AIDS will focus on addressing the needs of
those who are most vulnerable to HIV/AIDS, including the poor, young girls and women, and out-of-school children and youth (See Annex A for the full text on HIV/AIDS in the 31 C/4).

The 31 C/4 further gives reference to United Nations Millennium Development Goals (MDGs). The United Nations Millennium Assembly set as an explicit goal the reduction of HIV infection rates in persons 15 to 24 years of age by 25 per cent within the most affected countries before the year 2005 and by 25 per cent globally before 2010. The UNGASS Declaration of Commitment on HIV/AIDS adopted by the General Assembly Special Session June 2001 set common targets for reducing the spread of HIV/AIDS and alleviating its impact. UNESCO couples its activities within the UNAIDS Unified Budget and Workplan (UBW) framework to the contribution to the attainment of specific UNGASS.

Even though the international commitments and the Medium Term Strategy 31 C/4, 2002-2007 were elaborated after many of the UNESCO activities within the scope of the evaluation were initiated, they should serve as a context for the evaluation in order for UNESCO to assess the progress it is making towards these goals, and be informed to make the necessary adjustments. The evaluations should serve as a stepping stone in the overall reporting of UNESCO’s contributions the attainment of these goals.

While UNESCO has been dealing with the issue of HIV/AIDS since the mid 1980s, its efforts have evolved over time. During the first period, the Education Sector, Section for Preventive Education initiated UNESCO’s activities in the area of HIV/AIDS and education. In addition to the Education Sector, the Natural Sciences Sector was involved in HIV/AIDS activities the first decade especially in collaboration with the World Foundation for AIDS Research and Prevention. With the launching of UNAIDS in 1996, UNESCO’s action became broader in scope through the involvement of all its programme sectors. From 2000 the Youth Coordination Unit in Bureau of Strategic Planning has also implemented activities. UNESCO Field Offices have been involved in the execution of several Headquarters projects, as well as initiating and executing projects on their own responding to the demands on increased programme delivery under the decentralization structure. Most notably, the UNESCO office in Brazil has been selected by the Brazilian government to execute a US$50 million World Bank Loan covering HIV/AIDS activities for the period 1998 – 2002. Also, UNESCO Institutes have been initiating and implementing activities. UNESCO executing partners include UNESCO Centres; National Commissions for UNESCO; NGOs; IGOs; academic institutions; research specialists; specialized networks; regional, national and global associations of professionals and students; and EFA Coordinators and other representatives of Ministries of Education. No list of activities was available to be presented in the Terms of Reference. A Research Assistant contracted by the Internal Oversight Service is developing a list of HIV/AIDS activities from 1996-2002 for the purpose of the evaluation.

In the first decade of UNESCO HIV/AIDS activities there were no formal coordination mechanisms. In 1997, the ADG in Natural Sciences Sector was named responsible for coordination, and a UNESCO Focal Point for UNAIDS was appointed in the same sector. In DG/Note/01/28 of October 2001 the Director-General formally appointed the Director of IIEP as UNESCO Coordinator for the Organization’s HIV/AIDS programmes and projects funded both from regular budget and from extra budgetary sources. A Focal Point for UNAIDS was also appointed in IIEP under the supervision of the Coordinator. A Consultative Group was also established under the chairmanship of the Coordinator to advise the Director-General on all

42 The most relevant goals in addition to Goal 6 (Combat HIV/AIDS, malaria and other diseases), are: Goal 1 (Eradicate extreme poverty and hunger), Goal 2 (Achieve Universal primary education) and Goal 3 (Promote gender equality and empower women).
matters concerning HIV/AIDS. A regional HIV/AIDS Coordinator based in UNESCO Bangkok Office has been appointed for the Asia and the Pacific region. A Focal Point for HIV/AIDS has been appointed for each region. In Asia and the Pacific a Focal Point has been appointed for each Office.

Resources both from the regular programme budget and especially from extra budgetary sources have been mobilised for the implementation of HIV/AIDS activities in UNESCO. Extra budgetary sources include: funds from UNAIDS to UNESCO Headquarters as part of the Unified Budget and Work Plan (UBW), sources generated at Headquarters excluding UNAIDS (e.g. Funds in Trust), and funds generated at the regional and country levels, including UNAIDS Programme Accelerated Fund (PAF). Total funds paid by UNAIDS in the period 2000-2001 was US$ 2,217,655 (IIEP Records). No grand total for the Unified Budget and Workplan (UBW) framework for the same period is available at present. The grand total for the UBW framework for 2002-2003 is US$ 11,170,322 (IIEP Records). UNESCO’s Brasilia Office had a total budget of US$ 53 million for their AIDS programme covering the period 1998 – 2002. However, a total overview of funds generated in the field is not available.

1.2 Purpose and objective of the evaluation

Rapid expansion of HIV/AIDS activities in UNESCO was not accompanied by a parallel evaluation process. Thus, a thematic evaluation of UNESCO’s action to fight HIV/AIDS was included in the evaluation plan in the UNESCO Approved Programme and Budget 31 C/5, Annex IX. The objective of the evaluation is to examine the mandate, strategies, objectives, relevance, effectiveness, results, impact, sustainability and added value of UNESCO’s action. The 31 C/5 Approved Programme and Budget, Annex IX specifies that the evaluation will address:

- Mandate, strategies and objectives of UNESCO’s action and their relevance to local needs;
- Main results, their impact, sustainability and added value to the principal beneficiaries and users;
- Effectiveness of external and internal coordination and partnerships; functional decentralization;
- Risk assessment.

The overall purpose of the evaluation is to learn lessons from the UNESCO’s action to fight HIV/AIDS that can be useful for the organization in its future response to the HIV/AIDS epidemic. The evaluation aims to contribute to a culture of learning in UNESCO and to improved performance by providing knowledge to assist decision-making. Evaluation also provides a means by which the Secretariat can demonstrate that it has complied with the decisions and instructions of the governing bodies of UNESCO, and accommodate the growing concern of the governing bodies and donors alike for greater effectiveness in coordination and implementation, and for accountability for results.

According to the 31 C/5 Approved Programme and Budget Annex IX, the proposed evaluation aims to launch a process of systematic evaluations that will extend over several successive biennia. Thus, the evaluation will act as a catalyst for identifying programming measures and consequently streamlining evaluation needs to ensure that necessary adjustments are made and lessons learned.
1.3 Scope of the evaluation

As outlined in the Approved Programme and Budget 31 C/5 the evaluation will address the whole period 1987 till 2002. In the sampling of activities (See 3.4 below) an emphasis should be put on the period after the launch of UNAIDS, namely from 1996 till 2002. Activities in all programme sectors of UNESCO should be covered, namely Education, Natural Sciences, Social and Human Sciences, Culture and Communication and Information. However, it is suggested that two themes should be particularly addressed: preventive education and the integration of HIV/AIDS issues in Education for All, and especially the two flagships Impact of HIV/AIDS on Education and the FRESH initiative. The rationale for paying particular attention to these issues is the Director-General’s emphasis on preventive education and the integration of HIV/AIDS into Education for All (DG/Note/01/28) and UNESCO’s Strategy of HIV/AIDS preventive education (2001). The evaluation will include activities financed from regular programme and extra budgetary sources and address UNESCO action at national, regional and global levels. The evaluation should put emphasis on the mainstreaming areas, gender, Africa, youth and the least developed countries. Also, the countries where the epidemic is emerging should be a particular focus. The evaluators should make sure that group characteristics such as sex, race, socio-economic status and age are properly addressed by the evaluation.

2. Setting the evaluation into operation

The evaluation commitment in the Approved Programme and Budget 31 C/5 specifies that the evaluation will deal with the mandate, strategies, objectives, relevance, effectiveness, results, impact, sustainability and added value of UNESCO’s action. Also, the external, institutional and administrative risks that may threaten the achievement of results should be addressed, as well as what is being done and/or should be done to manage those risks. Several key questions pertaining to these evaluation issues are listed below under (1) Objective and strategies, (2) Results and Impact, and (3) Practices and Processes. When prioritising, an emphasis should be put on questions related to (2) Results and Impact.

2.1 Objectives and strategies

Addressing the mandate, strategies, objectives and relevance of UNESCO’s action requires attention to several important issues of which some are listed below. Note that the questions are intended to be illustrative not exhaustive.

**Mandate, objectives and strategies**
- How has the mandate for UNESCO’s activities to fight HIV/AIDS evolved over time, and how has this impacted the focus of UNESCO’s activities?
- Are UNESCO’s steering documents facilitating the execution of HIV/AIDS activities? To what extent does UNESCO’s Strategy for HIV/AIDS preventive education (2001) provide an appropriately focused framework? Does the strategy provide a sufficiently interdisciplinary approach capitalizing on UNESCO’s areas of competence?
- What are the expected results of UNESCO’s action? Where are expected results articulated? Are the expected results clearly articulated and understood, and if not, has there been some progress made towards stating clear and measurable expected results?

**Comparative advantage**
- What is UNESCO’s comparative advantage in the field of HIV/AIDS, and is UNESCO’s comparative advantage the most relevant to fight HIV/AIDS?
- Are the core objectives of UNESCO’s action in the area HIV/AIDS relevant vis-a-vis other agencies, in particular other UNAIDS co-sponsors, given UNESCO’s mandate, structure and resources? Are the stated target groups of UNESCO the optimum target groups for the Organization?
- How are the activities designed to serve and make use of the comparative advantages of UNESCO? Does UNESCO capitalize on its privileged access to Ministries of Education?

Relevance
- Are choices of actions/strategies based on evidence? What needs assessments are conducted in the design stage of projects and programmes?
- Are the delivery mechanisms used valid and relevant to the beneficiaries, including the poor, young girls and women, out-of-school children and youth?
- Are UNESCO’s HIV/AIDS activities responsive to different regional and national contexts?
- How were activities selected at Headquarters and at the field level, and how does the selection process take account of the relevance of the activities to local needs?

2.2 Results and Impact
Assessing progress towards results, their impact, sustainability and added value to the principal beneficiaries and users requires attention to several important issues. The questions should reflect the broad contextual concerns of HIV/AIDS especially gender discrimination and equity, social and economic status and poverty reduction. UNESCO’s action to respond to HIV/AIDS will be assessed against the expected results criteria set out for a specific activity evaluated, the expected results and outcomes set out in UNESCO’s steering documents, and it’s international commitments. In assessing progress towards results, the evaluation should address what works, what does not work and why. Assessing the progress towards results also includes examining the implementation rate of activities, and when applicable, examine the reasons for low implementation rate. The assessment of progress towards results, impact, sustainability and added value will primarily be conducted through case studies of sampled activities (see 3.4 Case studies). An overall assessment should be made as to the contribution of UNESCO’s activities in response to HIV/AIDS to the MDGs, the UNGASS targets and the Dakar follow-up. Note that the questions listed below are intended to be illustrative not exhaustive.

- Have the results been achieved, and if not, has there been some progress made towards their achievement?
- Is there evidence of which delivery mechanisms have worked in which context? Can a systematic knowledge base be built on what works and why?
- Is there evidence that the messages/efforts are reaching the targeted groups of high risk including those of low power and high vulnerability – the poor, young girls and women, and out-of-school children and youth, and if so with what impact? Are there particular group characteristics where UNESCO has done particularly well or badly?
- To what extent have UNESCO’s action to respond to HIV/AIDS contributed to the three main thrusts under the Organization’s mission and the strategic objectives of the Medium Term Strategy 31 C/4, including those for the cross-cutting themes?
- What are the (potential) long-term impacts of UNESCO’s action?
- If an activity has produced positive changes, can they be expected to last after the activity has been terminated? What are the project/programme provisions to increase the likelihood of the activities being sustainable in the long run?
2.3 Practices and processes
Addressing the efficiency and effectiveness of external and internal coordination and partnerships, as well as functional decentralization, requires attention to several important issues. Addressing effectiveness would also involve examining planning and implementation systems. Practices and Processes should not be evaluated for their own sake. Rather, they are relevant in terms of explaining the achievement of results or lack of achievement of results. Note that the questions below are intended to be illustrative not exhaustive.

Overall effectiveness and efficiency
- What is the relationship between the resources (human, financial, technical) allocated to UNESCO’s action to respond to HIV/AIDS and the outcome secured? Were the outcomes secured in the most cost effective way?

Organizational arrangements and internal coordination
- What organizational structures, managerial support and administrative arrangements exist to facilitate the activities? To what extent are they facilitative? Constraining? What are the strategic planning, programming and implementation frameworks set up in the area of HIV/AIDS?
- Were the coordination mechanisms correctly designed to ensure that UNESCO’s strategy is implemented, to facilitate effective internal coordination and communication, and to ensure that the activities are coherent and effective? How are field activities coordinated to ensure coherency and information sharing? What mechanisms are in place to ensure consistency of extra budgetary projects with the overall strategy of UNESCO in HIV/AIDS? Have regular programme resources and extra budgetary funding been well balanced?
- How are UNESCO programme sectors working together in order to ensure that the activities capitalize on the Organizations interdisciplinary experiences? How is the coordination function facilitating inter-sectoriality in UNESCO in this area?
- How is effective networking among UNESCO staff working on HIV/AIDS facilitated?

Partnerships and external coordination
- How have strategic partners for UNESCO in the field of HIV/AIDS been selected? How have the partnerships evolved, and what is their added value for UNESCO and for the attainment of results?
- How are National Commissions facilitating the implementation HIV/AIDS activities? What are the benefits and constraints of the UNAIDS partnership for UNESCO?
- Have the interagency coordination mechanisms at the national, regional and global levels, including UNAIDS been efficiently utilised?

Decentralized units
- When Field Offices execute Headquarters initiated activities, is there clear documentation of what Headquarters and the field offices agree upon? If not, how does the lack of formal agreement affect implementation and the progress towards expected results?
- What are the modes of extra budgetary funding generated at the field level? How do the various funding mechanisms impact the selection and implementation of the HIV/AIDS activities at the field level?
- How are UNESCO Institutes and Field Offices, especially Cluster Offices, tackling HIV/AIDS and integrating it into their policies?
Knowledge management, monitoring and evaluation

- How effective are lessons learned from UNESCO’s action, including field activities, disseminated within and outside UNESCO? What knowledge management mechanisms are put in place to ensure that knowledge acquired by individual staff members can be kept in the organization?
- What are the monitoring and evaluation frameworks, including those related to the Unified Budget and Workplan (UBW), to assess progress towards the expected results and goals of UNESCO HIV/AIDS interventions, and is this framework sufficient? What common performance indicators exist and are they likely to yield the returns UNESCO wants?

The evaluators should provide practical and implementable recommendations on the evaluation issues above in order for UNESCO to redirect its action as necessary.

3. Methodology

Evaluating UNESCO’s activities to fight HIV/AIDS – strategies, objectives, results, impact, sustainability and effectiveness – is a challenging task. First, the scope of the evaluation covers a relatively long period, 1987 till 2002. The activities are diverse, and have not necessarily been guided by a programme framework or strategy. Activities have been executed by different programme sectors and bureaus at Headquarters, by UNESCO Institutes, Field Offices and implementing partners. There have been changes in the focus of activities, as well as changes of staff and reorganization within the programme sectors. Project files have not always been complete and well organized. Information in Headquarters about the activities initiated and executed by Field Offices is limited. Further, the coordination function for UNESCO HIV/AIDS activities moved from the Natural Sciences Sector to IIEP in 2001. All these factors pose real challenges to this evaluation, and its success will depend on the full and active participation of past and present staff members involved with HIV/AIDS activities at UNESCO.

The process will require a combination of multiple and complimentary evaluative strategies. The evaluators should develop an approach that collects both quantitative and qualitative data and seeks to make the evaluation itself a learning process for all parties involved. Building on these Terms of Reference, the evaluators should elaborate their overall approach and methodology. It is anticipated that the evaluation will be organized into successive and partially overlapping phases: (1) Document review and analysis, (2) Survey of activities, (3) Interviews with key players, and (4) Case studies.

3.1 Document review and analysis

Phase I will focus on document review and analysis and will lay the foundation for the work to follow. The core set of documents to be reviewed – including UNESCO’s Strategy for HIV/AIDS preventive education (2001), UBW planning sheets, reporting to UNAIDS, the Medium Term Strategy C/4, the Approved Programme and Budget C/5, the Report of the Director-General C/3, Executive Board Decisions and electronic data input (SISTER) – will be provided to the evaluators by the Taskforce for the Evaluation and IOS. In order to conduct an historical review of the HIV/AIDS activities in UNESCO, the evaluators should identify and collect additional documents. It is anticipated that the collection of relevant documents will continue throughout the course of the evaluation. The evaluation should also draw on evaluations already undertaken of
UNESCO activities to fight HIV/AIDS. An historical review and analysis of the period 1987 till 2002 should include the mandate, strategies and objectives of UNESCO action.

A Research Assistant is contracted and financed by the Internal Oversight Service from February till April 2003 to identify and collect documents for the external evaluation team. The identification of relevant documents will include a preliminary survey of activities executed by UNESCO Field Offices and a preparation of a list of activities from 1996-2002.

3.2 Interviews with key players
Individual interviews and discussions should include the HIV Coordination Unit, the present and former UNAIDS Focal Points, present and former Focal Points in the programme sectors, Programme Specialists, Central Services involved in HIV/AIDS (Bureau of Strategic Planning, Bureau of Field Coordination), Field Offices, UNAIDS and implementing partners and beneficiaries. Findings from Phase I of the study will be informative for deciding on who should be interviewed.

3.3 Case studies
Given the volume of UNESCO’s HIV/AIDS activities, a case study approach should be adopted to allow for in depth examination of selected activities. UNESCO recommends a maximum number of three (3) case studies. The methodology will include desk review and interviews, field visits when applicable, as well as other methodological approaches as appropriate. The evaluators will assume the overall responsibility for designing and implementing the case study approach, including the specific Terms of Reference for those case studies. The overall objectives of the evaluation should be the starting point for the sampling of activities to be studied in detail. The following guidelines should inform the sampling framework for activities:

The sampled activities should aim at covering:
- UNESCO’s five action areas: Education, Natural Sciences, Social and Human Sciences, Culture and Communication and Information;
- Different programme delivery mechanisms;
- Different types of executing entities for UNESCO activities, including different types of Field Offices;
- Action at both the global, regional and national level, as well represent a geographical distribution;
- Activities funded from both the regular budget, UNAIDS and other extra budgetary funds;
- Activities with both a relatively high and low budget should be included;
- Activities with different external partners.

In terms of focusing resources, a special emphasis should be put on:
- The time period 1996 till 2002;
- Activities in the area of preventive education and integration of HIV/AIDS into EFA;
- Activities aimed at reaching the target groups for UNESCO’s action to fight HIV/AIDS as stated in its steering documents;
- The most affected countries, especially Africa south of Sahara;
- Countries where the epidemic is emerging;

These include the Evaluation of HIV/AIDS activities implemented by UNESCO Office Brasilia and Evaluation of HIV/AIDS Preventive Education Among Ethnic Minority in Yunnan Province China.
- UNESCO’s mainstreaming areas; gender\textsuperscript{44}, Africa, youth and the least developed countries.

A complete sampling universe (list of activities) is being identified by the IOS contracted Research Assistant.

4. Evaluation process and implementation arrangements

4.1. Stakeholder participation

A participatory evaluation approach should be adopted that ensures the full involvement of all stakeholders; the UNESCO Consultative Group on HIV/AIDS, programme sectors, Field Offices, Institutes, Central Services involved, the HIV/AIDS Coordination Unit, UNAIDS, and implementing partners. The evaluators should seek to make the evaluation itself a learning experience, both for UNESCO’s Secretariat, partners and beneficiaries. To encourage broad participation and consultation, it may be useful that evaluators organize evaluation workshops or seminars for different UNESCO entities executing HIV/AIDS activities during the course of the evaluation. The draft evaluation report should be widely circulated to ensure stakeholder inputs. The UNESCO Consultative Group on HIV/AIDS should be closely involved in reviewing the draft evaluation report with results and recommendations.

4.2 Evaluation Task Force and Management

IOS, appointed as responsible unit for the evaluation in the Approved Programme and Budget 31 C/5, has the overall responsibility for managing the evaluation. A Taskforce has been established to work with Internal Oversight Service to plan the evaluation, prepare a detailed Terms of Reference for the evaluation, and after a competitive process select the external experts who will carry out the evaluation. The Taskforce is composed of one representative from each of the UNESCO programme sectors, and one representative from the HIV/AIDS Coordination Unit (based in IIEP), the Bureau of Field Coordination and the Bureau of Strategic Planning respectively. The Taskforce will convene at critical junctures of the evaluation for review and discussion.

4.3 Evaluation team

According to the 31 C/5 Approved Programme and Budget Annex IX the evaluation is to be carried out by an independent team of external experts. The team should be selected after a competitive process. The team should include members with professional background and/or extensive experience in (a) evaluation of activities to respond to HIV/AIDS, (b) preventive education for HIV/AIDS, (c) the impact of HIV/AIDS on education systems, (d) gender analysis, (e) some knowledge of UNESCO’s mandate, structure and processes; (f) experience in developing countries, and (f) alternative evaluation methodologies, both qualitative and quantitative. The team must have the linguistic competencies necessary for fieldwork. At least one of the team members should be a woman. Ideally the team should be multicultural. Clear and specific reference should be made as to how developing country institutions and/or personnel will contribute to the evaluation.

\textsuperscript{44} The UNESCO Checklist for integration of gender concerns in programme evaluation should be used.
4.4 **Evaluation Budget**

The estimated resources available to carry out the evaluation correspond to approximately 180 – 250 person days of professional time (amount to be determined by the tender process).

The evaluation team will have to be self sufficient as regards logistics (office space, administrative and secretarial support, telecommunication, printing of documentation etc.) although office space will be provided for time spent in UNESCO Headquarters and Field Offices.

4.5 **Timeframe**

According to the original plan the evaluation should have been completed by October 2002. The evaluation is therefore behind schedule and will only be completed in 2004. The following timeframe is suggested for the evaluation process:

(a) Pre-evaluation by Research Assistant (contracted and financed by IOS). February – April 2003
(b) Circulation of Terms of Reference to potential evaluators April 2003
(c) Submission deadline for evaluation proposals 28 May 2003
(d) Task Force Meeting & selection of evaluation team June 2003
(e) UNESCO HIV/AIDS Consultative Group Meeting June 2003
(g) Submission of Document Review, Evaluation Plan and draft Terms of Reference for the Case Studies July /August 2003
(h) Task Force Meeting August 2003
(i) Execution of the evaluation August – November 2003
(j) Submission of draft final report December 2003
(k) Review of draft final report by stakeholders January 2004
(l) Task Force Meeting February 2004
(m) Submission of final report March 2004

4.6 **Deliverables of the evaluation**

(a) Report of document review
(b) Evaluation Plan
(c) Draft Terms of Reference for the Case Studies
(d) Presentations and workshops as appropriate
(e) A draft final report with findings, lessons learned and recommendations
(f) A final report with findings, lessons learned and recommendations
(g) Standardized database of documents reviewed
Annex 2: People Met

UNESCO Paris
Akio Arata, Chief of Section, Chief of Section, External Relations and Cooperation Sector
Alexandra Draxler, UNAIDS Focal Point, IIEP
Anna-Maria Hoffman, Programme Specialist, Education Sector
Aylin Taftali, Consultant, Social and Human Sciences Sector
Bernard Combes, Assistant Programme Specialist, Education Sector
Boyan Radoykov, Programme Specialist, Communication and Information Sector
Bruno Lefevre, Programme Specialist, Bureau of Strategic Planning
Carolyn Medel-Añonueva, Senior Research Specialist, UNESCO Institute of Education (UIE), Hamburg
Cecilia Braslavsky, Director, International Bureau of Education (IBE)
Christine Panchaud, Coordinator for Cross-cutting HIV/AIDS Programme, International Bureau of Education (IBE)
David Clarke, Programme Specialist, IIEP
Dulce Borges, Senior Programme Specialist, Education Sector
Dyane Dufresne-Klaus, Director, Bureau of Human Resource Management
Edle Tenden, Internal Oversight Service
Eric Allemany, Research Manager, IIEP
Florence Migeon, Assistant Programme Specialist, Education Sector
Francoise Riviere, Assistant Director General, Office of the Director General
Genc Seti, Executive Officer, Office of the Director General
Genevieve Rouchet, Bureau of Human Resources Management
Geoffrey Geurts, Internal Oversight Service
Gudmund Hernes, Director, IIEP
Hans D’Orville, Director, Bureau of Strategic Planning
Helena Drobna, Assistant Programme Specialist, Culture Sector
Hocine-Hamid Oussedik, Chief of Section, Education Sector
Ilona Jurgens-Genevois, Assistant Programme Specialist, HIV/AIDS Coordination Unit, IIEP
Jean-Yves Le Saux, Senior Programme Planning Officer, Bureau of Strategic Planning
John Daniel, Assistant Director General, Education Sector
Katérina Stenou, Director, Culture Sector
John Parsons, Director, Internal Oversight Service
Koichiro Matsuura, Director General
Kwame Boafo, Chief of Executive Office, Communication and Information Sector
Lamia Salman-El Madini, Director, Bureau of Field Coordination.
Livia Saldari, Programme Specialist, Education Sector
Luc Montaigner, President, World Foundation
Lucy Teasdale, Research Manager, IIEP
Lydia Ruprecht, Programme Specialist, Bureau of Strategic Planning, Section for Women and Gender Equality
Maciej Nalecz, Director, Natural Sciences Sector
Malika Ladjali, Senior Programme Specialist, Education Sector
Maria Helena Henriques Mueller, Chief of Section, Bureau of Strategic Planning (Section for Youth)
Mark Richmond, Senior Executive Officer, Office of the Director General
Mary Joy Pigozzi, Director, Education Sector
Namtip Aksornkool, Programme Specialist, Education Sector
Noureini Tidjani-Serpos, Assistant Director General, Africa Department
Oliver Nay, IIEP
Paola Leoncini-Bartoli, Chief Executive Office a.i., Culture Sector
Paul Falzon, Chief of Section, External Relations and Cooperation Sector
Philippe Ratte, Senior Programme Specialist, Bureau of Strategic Planning
Pierluigi Vagliani, Consultant, World Foundation
Rene Olivier, Consultant, World Foundation
Rene Zapata, Deputy-Director, Bureau of Strategic Planning
Rosella Salvia, Bureau of Human Resource Management
Shankar Chowdury, Programme Specialist, Education Sector
Sonia Bahri, Chief of Section, Education Sector
Susana Sam-Vargas, Programme Specialist, Bureau of Field Coordination
Vincent Defourny, Chief of Section, Bureau of Public Information

**Permanent Delegations**
Mr. Brian Aggeler, Chargé d’affairs, US Permanent Delegate
H.E. Mame Birame Diouf, Ambassador and Senegalese Permanent Delegate
H.E. Wilfried Inotira Emvula, Ambassador Extraordinaire and Plenipotentaire, Namibian Permanent Delegate
Herald Voorneveld, Deputy Permanent Delegate of the Netherlands to UNESCO
Marjan Romain, Attaché, Permanent Delegation of the Netherlands to UNESCO

**Other UN organisations**
Amaya Gillespie, UNICEF, Member Education IATT
Brad Strickland, USAID, Member Education IATT
Chika Saito, UNDP, Member Education IATT
Delia Barcelone, UNFPA, Member Education IATT
Don Bundy, World Bank, Member Education IATT
Lynn Collins, UNFPA, co-chair, Gender IATT
Stephanie Urdang, UNIFEM, Co-chair, Gender IATT

**UNAIDS**
Michel Carael, Chief Evaluation
Gillian Holmes, Senior Adviser, Strategy and Programme Development
Werasit Sittitrai, Director Programme Development and Coordination
Marina Bezruchenko, Programme Development

**Angola**
Francisco Domingos, Adviser, EFA coordinator, MINED
Rikke Viholm, Director, ADPP
Anneli Barregren, Education, ADPP
Helga Reis, Health, ADPP
Antonio Lufutu Kiala, President, FONGA (Forum das ONGs Angolanas)
Landu Paulo, Dept of institutional support, FONGA
Issabel Manuel Diogo, AFAMODSA, Rede Mulher
Julião Jeronimo, Secretary General, APA (Association of Angolan Teachers)
Vitor Barbosa, President, Angolan Association for Adult Education (AAEA)
Arlete Lucas, AAEA

Brazil
Cristina Raposo, UNESCO Focal Point for HIV/AIDS
Favio Eon, Assistant to the Director, UNESCO
Renato Mariani, Assistant to the Director
Ilana Szabo, Assistant to the Director
Marlova Noleto, Senior Programme Coordinator
Paulo Lustosa, UNESCO Head of Evaluation Unit
Edna Roland, UNESCO Gender Issues Focal Point
Giovanni Quaglia, UNODC Representative
Cintia Freitas, UNODC Program Coordinator
Naiara Garcia da Costa, UNAIDS Brazil, Programme Assistant
“Arco Iris” staff, a local NGO working with HIV/AIDS
Jose Ricardo Marin, Deputy Director, Ministry of Health
Moises Taglietta, Department of Planning and Evaluation, Ministry of Health
Maria Angela Simaoi, Head of Department of Cooperation, Ministry of Health
Sergio d’Avilla, Department of Prevention, Ministry of Health
Natasha Nunes da Cunha; Department of Cooperation, Ministry of Health
Paulo Meirelles, Department of Cooperation, Ministry of Health
Michael Burkly, USAID

Jamaica

UNESCO field office
Helene Gosselin, Director
Sabine Detzel, Programme Specialist, Education
Michael Morrissey, Consultant, Education
Alwin Bully, Senior Programme Specialist, Culture
Alton Grizzle, National Programme Officer, Communication and Information

Sylvia Thomas, Secretary General, National Commission for UNESCO

Government of Jamaica
Donald Rhodd, MP, Minister for Youth in Ministry for Education, Youth and Culture
Adele Brown, Head of Department, Ministry of Education, Youth and Culture
Dolores Brisssit, Head of Department, Ministry of Education, Youth and Culture
Mavis Fuller, Coordinator HIV Education, Ministry of Education, Youth and Culture
Wesley Barrett, Chief Education Officer, Ministry of Education, Youth and Culture
Syney Bartley, Director, Ministry of Education, Youth and Culture
Layne Robertson, National Centre for Youth Development

*Civil society, business and research organisations*
Raymond Price, Chairman, Caribbean HIV/AIDS Youth Network
Ian Randle, Chairman, managing director, Capnet
Nancy George, HIV/AIDS Coordinator, University of Technology
Lorna Parkins, UNICA
Brendan Bain, Professor, University of West Indies
Marjan de Bruin, Director, CARIMAC
10 medical students of UWI Medical Students Association

*UN organisations*
Sarah Howden, Social Sector Specialist, IDB
Bertrand Bainvel, Representative, UNICEF
Penny Campbell, Programme Officer, UNICEF
Stephen Rodrigues, Programme Specialist, UNDP
Gerardo de Cosio, Advisor, PAHO
Derven Patrick, Programme Officer, UNFPA
Yvonne Roberts White, Advocacy Adviser, UNFPA
James St. Catherine, HIV/AIDS Adviser, UNFPA
Nobuhiro Kumagai, Resident Representative, JICA

*Kenya*

*UNESCO Nairobi*
Aznar, Alonso, Communication Adviser for Eastern Africa, UNESCO
Nkinyangi, Susan, Sr. Education Adviser, UNESCO
Ochanda, Alice, Program Officer, UNESCO
Vitta, Paul, Regional Director, UNESCO

*Kenyan Authorities*
Ayiro, Laban, Asst. Dir. Of Education, MOEST
Gitau, Boniface, Sr. Director of Education, KNATCOM
Iru ngu, Sara, Teachers Service Commission
Kachumbo, Samuel, Commission on Higher Education
Kaloki, Elizabeth, Program Coordinator, TSC
Kamau, Robert Raymond, Programme Coordinator, Kenya Institute of Education
Kibebe, Mr., Dep. Secretary General, KNATCOM
Kutoi, Lawrence, Program Coordinator, TSC
Muguongo, Sebastian, Program Coordinator, TSC
Muthi, Teresa, ACU, Commission on Higher Education
Mwadime, Sister Monica, Sr. Program Coordinator, TSC
Mwakima, V.M., Sr. Asst. Dir. Of Education, ACU, MOEST
Natecho, Alice, Programme Office, IEC, NACC
Njorege, Mary, Field Service Director, MOEST
Spira, Luka, Dep. Secretary, TSC
Thuita, Isaac, Assistant Director, AIDS Control Unit, MOEST
Wanyama, Boniface, Head of Science Sector, KNATCOM
Waweru, Alice, Program Coordinator, TSC

UN Organisations and Bilateral Donors
Byomuhangi, Fabian, Deputy Representative, UNFPA
Gumbonzvanda, Nyaradzai, Regional Director, UNIFEM
Ikua, Wacuka, Operations Officer, World Bank
Mannathoko, Changu, Regional Education Adviser, UNICEF
Mayieka, Esther, Programme Officer, HIV/AIDS, UNDP
Obisa, John Kennedy, Programme Communication Officer, UNICEF
Ouma, Christopher, Project Officer, PMTC/PLWA, UNICEF
Schoultz, Kristan, Country Coordinator, UNAIDS
Sonnichsen, Cheryl, Sr. Advisor for HIV and AIDS, USAID
Torori, Cleophas, Programme Analyst & Head, Office of the UN Resident Coordinator, UNDP
Voetberg, Albertus, World Bank

Ghana
B. Camara, Programme Specialist Education
Elizabeth Moundo, Head of Office

Ghana National Commission for UNESCO
Dorcas Kooson, Programme Officer Social Science
J. W. Essiah, Programme Officer Natural Science
Mrs. Charly Amamoo, Deputy Secretary General

Namibia
Trudie Amulungu, National Commission
Stanley Simataa, Deputy PS, Chair of National Forum EFA
Charles Kabayani, National EFA coordinator
Walter Nel, HIV/AIDS management unit, MBESC
Tamba M. Baldeh, Deputy Resident Representative, UNDP
Gloria Billy, UNAIDS Secretariat
Carmen Honey, Namibian Youth Paper
Claudie likela, General manager, NBC
Umbi Kauaihe-Upi, Marketing, business development, NBC
Rose C. De Buyscher, Director, Family Health International (FHI)
Taimi Amaambo, Youth Net Program Coordinator, FHI
Rianne Selle, Ministry of Information and Broadcasting
Spendu Onesmus, National ECD Coordinator, Ministry of Women Affairs
Rosina Mabakeng, Deputy Director, Gender mainstreaming, MWACW
Kingo Mchombu, Dept. of Information and Communication Studies, University of Namibia
Jimmy Amupala, Chairperson Take Control campaign
David Sampson, Education Officer, NIED
Aune Naanda, Programme Specialist, education, UNESCO Windhoek
Ben Boys, Human rights and democracy project coordinator, UNESCO Windhoek
Claudia Harvey, Director and Representative, UNESCO Windhoek

Mozambique
Aida Girma, UNAIDS coordinator, country program adviser
Helena Xerinda, UNFPA, programme officer
Paula Monjane, Programme officer, FDC
Eduarda Cipriano, Project coordinator, FDC
Augusto Nunes, National Commission
Paulino Ricardo, National coordinator of UNESCO’s clubs, National Commission
Marie-Pierre Poirier, Representative, UNICEF
Juliet Born, Coordinator for HIV/AIDS, USAID
Salomão Muchanga, Vice president, CNJ (National Youth Council)
Marta Bazima, National programme officer, HIV/AIDS, UNFPA
Patrick Devos, HIV/AIDS communication adviser, ADPESE, Danish Support to Education Programme
Paul Wafer, Project officer, education and HIV/AIDS, UNICEF
Laura Gomes, INDE, MINED
Birgitte Jallov, Chief technical adviser, Media Development project
Elias Cossa, Programme specialist, Media Development project
Cornelio Balane, Coordinator for planning and multisectoral relations, CNCS (National Council Against HIV/AIDS)
Palmira Velasco, Journal DEMOS
Sr Mucavele, INDE Director, MINED
Ana Passos, Department of teacher training, INDE-MINED
Zulmira Rodrigues, Programme specialist, youth and NFE, UNESCO Office
Esther Miedema, HIV/AIDS focal point, UNESCO National Office
L. Mbuyamba, Director and Representative, UNESCO National Office
Noel Chicuecue, Education programme officer, UNESCO National Office
Viviano Santos, Administrative officer, UNESCO National Office

Senegal

UNESCO:
Armoogum Parsuramen, Representative, Director of BREDA
Bachir Sarr, HIV/AIDS focal point
Mayé Diouf, Programme assistant HIV/AIDS
Thierry K. Kpehor, Conservateur documentaliste

Persons interviewed in the course of the regional seminar on HIV/AIDS training material:
Lidia Evora, Directorate of Basic and Secondary Education, Cape Verde
Christina Maio, Directorate of Basic and Secondary Education, Cape Verde
Yusupha Faye, Gambia Department of State for Education – Gambia College
Isatou Ndow, Gambia Department of State for Education – Gambia College
Djennabou Balde, Prof. Institut Superieur de l’education. Guinée
Thierno Algassimou Balde, Prof. Institut Superieur de l’education. Guinée
Malick Sembene, Division Controle Medical Scolaire/Ministere de l’education, Senegal
Soukeyna Dial, Direction formation professionelle/ Ministere de l’education, Senegal
El Hadji Seck, Ministere Enseignmenet technique, Formation Professionelle, Senegal
Boubacar Diallo, Ministere de l’education, Senegal
Amy Sy Diouf, Direction enseignement elementaire/ Ministere de l’education, Senegal
Khady Diallo, Division Controle Medical Scolaire/Ministere de l’education, Senegal
Papa Sene, Ministere de l’education, Senegal
Balla Diagne, Cabinet Ministre Delegue aupres du Ministre de l’education
Ababacar Gaye Fall, Ministere de l’education, Senegal
Saidou Ibrahima Sy, Ministere de l’education, Senegal

Other interviews
Cheikh Toure, UNICEF
Mouhamadou Diol, Troupe Kaadu Yarrax
Ousmane Tounkara, Ass Sé n. d’Aide et de Soutien aux Séropositifs et à leurs familles
Sangoné Mboup, Consultant, Life Skills VIH/SIDA
Khadidiatou Tall Thiam, Groupe Health International (FHI)
Keba Ndiaye, Ministère de la culture
Gabriel N’diaga Diouf, GTZ
Babacar Fall, Groupe pour l’Etude de l’Enseignement de la Population, Coordinateur : GEEP

Thailand
Adriana Gomes, UNAIDS Inter Country Team
Alice Smidt, Programme Officer HIV/AIDS, UNESCO HIV/AIDS coordination Unit
Anne Lene Ror, Focal point for children and AIDS, UNESCO/ED (APPEAL)
Arun Mallik, HIV/AIDS Preventive Education and School Health Officer, UNESCO
Carmelita Villanueva, Chief IPS, UNESCO/IPS
Carol Livingston, UNAIDS Inter Country Team, focal point for UNESCO
Jan W. de Lind van Wijngaarden, Chief, HIV/AIDS Coordination Unit, UNESCO
Kiiuchi Oyasu, UNESCO/ED (APPEAL)
Lapapan Choovong, UNESCO staff focal point for HIV/AIDS, CI
Naren Prasad, Assistant Programme Specialist, UNESCO/SHS
Prudence Borthwick, UNICEF EAPRO
San Yenwah, Chief Health and Development Section, ESCAP
Sheldon Shaeffer, Regional Director, UNESCO
Yindee Lertcharoenchok, Consultant UNESCO/CLT

Vietnam
Shiu-Kee Chu, Head and Representative, UNESCO
Doris Buddenberg, Representative UNODC (Office on Drugs and Crime)
Khuat Thu Hong, Director, Center for Social Development Studies
Le Thi Bach Yen, Consultant, Former National HIV/AIDS Project Officer UNESCO
Mai Huy Bong, HIV Focal Point, Ministry of Education and Training
Max Holm, Communication Officer, UNESCO
Nancy Fee, Country Coordinator, UNAIDS
Nguyen Huy Dzung, Director Cultural and Social Department – Voice of Viet Nam
Nguyen Thi Kim Anh, Senior Officer, Viet Nam Youth Federation
Nguyen Trung Hau, Ho Chi Minh Communist Youth Union, Quang Ninh Province
Pham Thi Thu Ba, Ministry of Education and Training
Song Phuong, Journalist, Voice of Viet Nam
Tran Minh Gioi, Programme Officer HIV/AIDS and School Health, UNESCO
Vu Thanh Trung, Ho Chi Minh Communist Youth Union, Quang Ninh Province
Yayoi Segi-Vltchek, Programme Specialist, UNESCO
Annex 3: References

UNESCO Documents
159 EX/17 (2000), “Proposal on the Evaluation Criteria by which Field Offices will be Assessed”.
160 EX/21 (2000), “Report by the DG on how the current decentralisation bodies and units of UNESCO satisfy the basic criteria for the rational implementation of decentralisation”.
165 EX/36 (2002), “Report by the DG on specific mechanisms through which interested National Commissions can effectively participate in programme execution at the level of UNESCO Field Offices”.
Approved Programme and Budget 2002-2003 31 C/5.
Director-General’s note on UNESCO’s contribution to the fight against HIV/AIDS October 2001.
Draft Programme and Budget 2004-2005 32 C/5.
Financial Report for the 2002-2003 UBW Allotment”.
HIV/AIDS & Education: A Strategic Approach, IATT.
Project Proposal, “Family First Africa”.
UNESCO 2003 Audit, “The Education Institutes: Managing and Governing for Results”.

Global and regional strategies
Latin America Regional Strategy on HIV/AIDS Prevention.
UNESCO’s Strategy for HIV/AIDS Preventive Education.

Others
Bertrand, Doris (2003), “Achieving the Universal Primary Education Goal of the Millennium Declaration”, Joint Inspection Unit.
Elliot Stern, Evaluation of AIDS II: Inception Report
Ester Barinaga; Levelling vagueness; a study of cultural diversity in an international project group. EFI, Stockholm.
Strategi for norsk UNESCO arbeid.
UNAIDS, “HIV/AIDS and Human Rights”.
Woodhall, Maureen et.al. (2003), ”UNESCO International Institute for Educational Planning, External Evaluation Report”.

Annex 4: Acronyms

ADG – Assistant Director General  
BFC – Bureau of Field Coordination  
BSP – Bureau of Strategic Planning  
CCO – Committee of Cosponsoring Organisations (UNAIDS)  
CI – Communication and Information Sector  
CLT – Culture Sector  
DG – Director General  
EBF – Extra Budgetary Funds  
ED – Education Sector  
GMIF – Gender Mainstreaming Implementation Framework  
IATT – Inter Agency Task Team  
IBE – International Bureau of Education  
ICT – Inter Country team  
IIEP – International Institute for Educational Planning  
IOS – Internal Oversight Service  
MLA – Main Line of Action  
OVC – Orphans and Other Vulnerable Children  
PAF – Programme Acceleration Fund  
PCB – Programme Coordination Board (UNAIDS)  
PWHA/PLWHA – Persons (Living) with HIV/AIDS  
RB – Regular Budget  
RBM – Results Based Management  
SC – Natural Sciences Sector  
SHS – Social and Human Sciences Sector  
UBW – Unified Budget and Workplan  
UIE – UNESCO Institute of Education  
WID – Women in Development