

Teacher peer counseling on HIV/AIDS

Successes and lessons learned from Mangochi District, Malawi, September 2008

BACKGROUND

More than forty percent of teacher deaths in Malawi are related to HIV/AIDS, making AIDS-related death the most common cause of teacher attrition.¹ In Malawi's Mangochi District, an average of three teachers die every month due to illness related to HIV/AIDS, with 52 teachers—4.3 percent of the teaching corps—dying between June 2006 and August 2008.² To respond to this crisis, Save the Children initiated an HIV/AIDS peer counseling program for teachers. A needs assessment showed that teachers, like others, rarely go for testing and generally lack access to anti-retroviral medications. With improved access to HIV/AIDS information and treatment, teachers can more easily provide long-term quality instruction and support their own families and children.

APPROACH

To select peer counselors, Primary Education Advisors used guidelines adapted from a national training manual that defined the qualities of a good counselor, among them patience, trustworthiness, transparency, and the ability to maintain confidentiality. The Primary Education Advisors involved all teachers in the selection process and chose only counselors with the necessary qualities, making peer counselors more likely to be accepted and trusted by

their fellow teachers. Advisors selected five teachers per education zone, training a total of 75 peer counselors in Mangochi and 24 in Balaka district since 2005.

Selected teachers received 20 days of training, facilitated by nationally-recognized trainers from the Malawi AIDS Counseling and Resource Organization. Training included counseling principles, HIV/AIDS treatment approaches, methods of care and support, discussion of stigma and discrimination, and training on monitoring and reporting.

Once trained, teacher peer counselors conducted joint sessions to sensitize other teachers, communities, and students. They provided counseling and support to fellow teachers and to students and other community members who requested their support. Some HIV-positive teachers who underwent counseling and testing received assistance in accessing care, treatment, and support services through the District Education Office.

COVERAGE

The program targeted all the teachers in Mangochi District, where schools employ approximately 1,058 teachers. Since 2005, a total of 1444 people (70 teachers, 1025 students, and 349 community members) have sought HIV counseling services from trained Teacher Peer Counselors. Fifty-one teachers are now using antiretroviral drugs for treatment of HIV.

SUCCESSES

Because testing is anonymous, Save the Children does not know how many teachers, students, and community members have undergone HIV testing as a result of peer counseling. However, discussions with teachers, students,



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and community members suggest that peer counseling at the community level can have significant public health benefits. Teacher Peer Counselors provided teachers and other community members with vital knowledge and skills for HIV/AIDS self-protection, creating demand for voluntary counseling and testing (VCT) for these different groups at community level.

CHALLENGES AND LESSONS LEARNED

- Many teachers found VCT inaccessible due to long distances and requested that testing be done by the counselors themselves. Peer counselors' unique understanding of teachers' perspectives would be a valuable asset if counselors could perform tests.
- Teacher Peer Counselors received training only in counseling and not in testing, requiring a strong system of referral to health centers and a close partnership between the education and health systems. In Save the Children's experience, this can be difficult. Some health center staff don't recognize the qualifications of Teacher Peer Counselors because the government recommends counselors have testing experience. However, many teachers told Save the Children they preferred being counseled by Teacher Peer Counselors because they don't trust health centers to keep their visits confidential.
- Long distances within the counselors' catchment areas make travel to all assigned schools difficult, compromising their ability to provide counseling throughout their education zones. Only five counselors are assigned to each education zone and each zone is divided into clusters, which are allocated to the counselors. At program start, the District Education Office agreed to provide bicycles to counselors who had to travel long distances, but the government was unable fulfill commitment. If the District Education Office is able to provide this sort of support in the

future, it would greatly help the program.

- Most teachers reported an interest VCT but said they are waiting for the Ministry of Education to issue a clear policy on support of teachers who test positive.
- More than three-quarters of those who used the counseling service were pupils and community members, suggesting that demand for these services is high across the entire community.

NEXT STEPS

To address these lessons learned, Save the Children made the following recommendations to the government:

- a) Consider offering peer counseling and testing services to students and other community members;
- b) Ensure the District Health and Education Offices work together to support the Teacher Peer Counselors by developing a strong referral system to health services, training sufficient counselors, and providing counselors with bicycles.

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