

# **Workplace HIV and AIDS Policy for the Education Sector**

**November 2007** 

# **Foreword**

Namibia has a high HIV prevalence rate and as a result, the Education Sector is experiencing an increase in employee absenteeism; high attrition rate as well as low levels of productivity.

The Education Sector is the nation's largest single employer engaging approximately 38 000 employees. These amongst many, comprise of managers, professionals and support staff. Some of these employees are infected or affected by the HIV and AIDS pandemic.

This poses a great challenge on the financial and human resources of the Education Sector. The need to develop an HIV and AIDS Workplace Policy in this regard therefore, cannot be overemphasised. This policy aims to provide a regulatory framework in line with the Medium Term Plan III; the HIV and AIDS Policy for the Education Sector; the National HIV and AIDS Policy; the HIV and AIDS Charter of Rights, and the Education and Training Sector Improvement Programme (Component 2: Mainstreaming HIV and AIDS in the Education Sector).

Strong leadership, support and commitment within the sector are essential to deal with issues of this magnitude, for the successful implementation of the policy and other related programmes at all levels.

ETSIP is the Education Sector's main response to Vision 2030. It recognises the needs to mainstream HIV and AIDS into all levels and programmes in the sector. This policy is therefore in accordance with the four key components as detailed in the ETSIP HIV and AIDS Sub-programme. The policy has four major aims:

- To equip managers with necessary knowledge and skills to supervise, manage and coordinate the implementation of the policy in the workplace;
- To provide sufficient information regarding HIV and AIDS legal aspects, Treatment and Nutrition as well as MEDICAL AID;
- To create an understanding that a healthy and happy workforce is more productive than an unhealthy and unhappy one, and
- To create an enabling environment to enable managers to provide support to those infected or affected.

The Education Sector must continue to be more attentive in minimising the impact of HIV and AIDS, I therefore strongly urge you to commit yourselves in supporting, managing and implementing this Workplace Policy in our sector.

The Honourable Nangolo Mbumba

MINISTER OF EDUCATION

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# **Acronyms and Abbreviations**

AIDS Acquired immune deficiency syndrome

ARV Antiretroviral

CEDAW Convention on the Elimination of All Forms of Discrimination Against Women

EAP Employee Assistance Programme
ECD Early Childhood Development
EFA Education For All (Goals)

EMIS Education Management Information System

ETSIP Education and Training Sector Improvement Programme

GRN Government of the Republic of Namibia

HAART Highly active antiretroviral therapy/treatment

HAMU HIV and AIDS Management Unit
HIV Human immunodeficiency virus

HR Human resources

IEC Information, Education, Communication

ILO International Labour Organisation

M&E Monitoring and evaluation
MDG Millennium Development Goal

MoE Ministry of Education

MTP Medium Term Plan (National Strategic Plan on HIV and AIDS)

NABCOA Namibia Business Coalition on AIDS NANTU Namibia National Teacher's Union

NDP National Development Plan (NDP III 2007 – 2012)
NIED National Institute for Educational Development

NPC National Planning Commission
OPM Office of the Prime Minister
PEP Post - Exposure Prophylaxis

PLWHA Person/people living with HIV and AIDS
PSEMAS Public Service Medical Aid Scheme

RACE Regional AIDS Committees for Education

REB Representative Editorial Board

SADC Southern African Development Community

SGB School Governing Board
SMT School Management Team

TB Tubercolosis

UNAM University of Namibia

UNAIDS Joint United Nations Programme on HIV and AIDS

UNESCO United Nations Educational, Scientific and Cultural Organisation
UNGASS United Nations General Assembly Special Session on HIV and AIDS

USAID United States Agency for International Development

VCT Voluntary Counselling and Testing

VTC Vocational Training Centre

### 1. Introduction

HIV and AIDS is the single largest threat to the development of Namibia. Its impacts are felt at every level of our society, and affect all individuals, families and communities, who are the fundamental building blocks of our social and economic development. (National Policy on HIV and AIDS, 2007)

#### 1.1 The education sector as a workplace

The Education Sector is the nation's largest single employer, engaging approximately 38 000 employees that include:

- Large number of classroom teachers, College and University lecturers as well as VTC instructors, District Literacy Organisers and Literacy Promoters.
- Large number of professional and para-professional staff:
- Large number of managers at various levels
- Large number of lower level administrative support staff, and
- Last but not least vast number of students and learners.

The concern of the Ministry of Education extends to all of these. Very many may be living with HIV and AIDS or affected by the pandemic in one way or another. In short, the disease affects almost every one of them. Absenteeism and employee attrition impact on productivity, employee benefits, production costs and work morale.

The Ministry of Education as the lead agency of the Education Sector has a responsibility to ensure that its employees and students/learners have access to care and support and treatment

- on humanitarian ground
- on efficiency and effectiveness ground

The Ministry should give unmistaken evidence that it is a caring and concerned employer, to show its humanity and to promote good labour relations. The Ministry of Education recognizes that morbidity and mortality among teachers, managers and other sector personnel undermine its ability to attain its educational objectives, and hence that it would like to take steps to pre-empt this negative outcome.

#### 1.2 HIV and AIDS in Namibia

Sub-Saharan Africa continues to bear the largest burden of HIV infections in the world. This has significant

implications for countries – including Namibia – especially in terms of their ability to reach the Millennium Development Goals (MDGs) of reducing poverty and improving the overall health and well-being of their citizens. Also at stake in Namibia are the goals and targets of the National Development Plan (NDP) III (2007 – 2012) and Vision 2030. Namibia is ranked amongst the top ten countries in the world in terms of HIV and AIDS prevalence rate (UNAIDS, 2006).

# 1.3 AIDS and the impact on education sector workplaces

HIV and AIDS are development challenges affecting every sector in society. The impact of the epidemic is felt in the delivery of all Government services, including education. The HIV and AIDS epidemic is affecting the education sector in three important ways – changing the demand for education; the supply of education; and the quality of education. Of particular relevance to the sector, as the largest workforce in the country, is the fact that the epidemic is affecting the size, growth rate, age and skill composition of both current and future workforces. HIV and AIDS are therefore threatening the targets – in all spheres and at all levels of education – of the Education and Training Sector Improvement Programme (ETSIP).

#### 1.4 The consultative process to develop the Policy

A representative group of education sector stakeholders gathered in Walvis Bay in July 2007 to draft the Workplace HIV and AIDS Policy for the Education Sector (hereafter referred to as the Policy). At the end of the workshop, a Representative Editorial Board (REB) was formed and tasked to consolidate the inputs from the workshop and to oversee the consultative process on successive drafts. (Refer to Annextures Six and Seven)

#### 1.5 The context for the Policy

The Policy complements and expands on the National Policy on HIV and AIDS for the Education Sector (Section 13: HIV and AIDS as a workplace issue in the education sector). In addition, the Policy provides a framework for the implementation of (i) ETSIP (Component 2: Mainstreaming HIV and AIDS) and (ii) the Ministry of Education (MoE) Employee Wellness Programme: Strategic Plan 2007-2012.

It is important to note that, whereas the Policy addresses HIV and AIDS as a critical workplace issue, implementation will be carried out within the context of and commitment to a comprehensive *workplace wellness programme* that encompasses all health, social and lifestyle conditions.

### 2. Purpose

The purpose of this Policy is to create an enabling environment for the implementation of HIV and AIDS programmes in the workplace within the education sector. The Policy also aims to enhance commitment amongst educational institutions<sup>1</sup> and education sector employees<sup>2</sup> at all levels to respond effectively to HIV and AIDS in the education sector.

# 3. Scope

The Policy shall be applicable to all employees in the education sector – managers, professionals and support staff.

# 4. Application

The Policy shall be applicable to all educational institutions at all levels (from early childhood development (ECD) to tertiary education and including adult and Life Long Learning of the education system in Namibia.

#### 5. Goal

The goal of the Policy is to provide a supportive policy environment for the implementation of workplace programmes to address HIV and AIDS: programmes that reduce new infections; improve care, treatment and support; mitigate the impact of HIV and AIDS and reduce stigma and discrimination.

#### 6. Strategic Objectives

Within the education sector workplace in Namibia:

- To reduce the transmission of HIV; and
- To mitigate the associated social and economic impact on the education system.

# 7. Guiding Principles

The adoption of this Policy implies commitment to the following key principles:

# 7.1 Recognition of HIV and AIDS as a workplace issue affecting the education sector

HIV and AIDS are an issue for all educational institutions, not only because the virus affects employees, but also because educational institutions can play a vital role in reducing the spread of HIV and the effects of the epidemic.

#### 7.2 Broad leadership and commitment

Strong leadership and commitment at all levels are essential for a sustained and effective response to HIV and AIDS. This includes Government, the private sector, trade unions and other relevant stakeholders.

#### 7.3 Equitable employment practices

Employees who are HIV infected, are perceived to be, or who are affected by HIV and AIDS have the same opportunities and obligations in the workplace as all other employees. Every person whether infected or affected has the right to fair labour practices in terms of recruitment, appointment and continued enjoyment of employment, promotion, training and benefits. HIV testing as a requirement for any of these is prohibited. HIV infection is not a valid reason for the termination, suspension, involuntary transfer or denial of career advancement of any employee. Employees living with HIV related illnesses should be able to work or study for as long as medically fit to do so.

#### 7.4 Unfair discrimination and reduction of stigma

In the interests of an effective workplace environment and respect for human rights, there shall be no discrimination against an employee who is HIV infected, is perceived to be, or who is affected by HIV and AIDS. Unfair discrimination and stigmatisation inhibit efforts for prevention, care, treatment and support. Educational institutions shall adopt a proactive approach to avoiding and eliminating stigma and discrimination as part of this Policy.

#### 7.5 Confidentiality and disclosure

All personal medical information, whether oral, written, or in electronic format, obtained from an individual or third party will be treated as confidential. No employee is compelled to disclose his or her HIV status to authorities at any educational institution. Although disclosure shall always be voluntary, it is encouraged for purposes of support.

<sup>&</sup>lt;sup>1</sup> This term refers to any establishment that renders educational services

<sup>&</sup>lt;sup>2</sup> This term refers to administrators, teachers or non-teaching support staff members employed in educational institutions

#### 7.6 Gender equality

HIV and AIDS impact on men and women differently. Women are often more adversely affected by the epidemic, for biological, socio-cultural and economic reasons. Women may also be more vulnerable due to unequal gender relations. Sexual harassment in the educational setting must be addressed. Any discrimination and/or action that may put an employee of either sex at risk of HIV because of their sex strictly violates the basic principles of this Policy and shall be reported and dealt with in accordance with relevant disciplinary policies and procedures. Education programmes shall address the roles and responsibilities of men in promoting gender equality as well as protecting the rights of women. Application of this Policy is designed to take account of these unequal gender relations and enable all employees to successfully avoid risks related to the spread of HIV infection and to cope with the impact of HIV and AIDS.

#### 7.7 Caring and supportive environment

An employee who has contracted HIV needs empathy, care, treatment and support. Equal access to comprehensive care and affordable health services shall be guaranteed for all employees infected and affected by HIV and AIDS. Educational institutions shall establish or form partnerships with programmes of care and support that guarantee access to treatment and provide for reasonable accommodation, counselling services, healthy living information/education (on nutrition, positive living, and risk-reducing sexual behaviour), including life skills education where relevant, and that consider the extension of employee assistance programmes (EAP) where these are available.

#### 7.8 Healthy and safe work environment

The work environment shall be healthy and safe, so far as is practicable, for all concerned parties in order to reduce the risk of HIV infection and transmission. While there is no risk of HIV transmission through normal casual contact, universal precautions shall be applied to avoid transmission in the event of accidents in the education setting and the risks shall be reduced or eliminated.

#### 7.9 Social partnerships and networking

The success of a workplace HIV and AIDS policy and programme requires cooperation, trust and networking – between Government officials, the governing body of the educational institution, administrators, employees, education union representatives and other relevant stakeholders. The greater effective involvement of people living with HIV and AIDS (PLWHA) in workplace policy and programme design and implementation is crucial for an effective response to HIV and AIDS.

#### 7.10 Research

Any research shall be conducted in accordance with ethical standards and assuring feedback to groups and persons involved.

#### 7.11 Capacity building

The Policy shall be implemented in ways that invest in the capacity building of our human resources at both personal and professional levels.

#### 7.12 Responsiveness and flexibility

The HIV and AIDS epidemic requires a dynamic, responsive and flexible response and this Policy shall be applied accordingly and reviewed regularly.

#### 7.13 Rights and responsibilities

Education authorities, the governing body, administrators, teachers and other employees and their representatives are expected to respect and protect the rights and dignity of all learners, students and other education sector employees, regardless of their actual or perceived HIV status. Each employee has the right to relevant and factual HIV and AIDS information, knowledge and skills. Each employee has the right to access appropriate and affordable workplace wellness services. Every education sector employee has the responsibility to protect him or herself and others against HIV infection or re-infection, as the case may be.

# 8. Legal Framework

This Policy shall be interpreted and implemented in accordance with international, regional and national laws, policies, conventions and agreements. In particular those related to education, HIV and AIDS, the workplace, human rights and gender will apply.

Key legal and policy instruments are listed in Annexture Two.

### 9. Policy Components

In accordance with ETSIP, the Policy covers the following key components:

- Awareness raising and empowerment;
- Mainstreaming HIV and AIDS;
- Strengthening regulatory frameworks; and
- Managing the HIV and AIDS response.

#### 9.1 Awareness raising and empowerment

9.1.1 This component recognises that, even in situations where HIV prevalence is high, the majority of employees are still uninfected. Prevention in the workplace therefore remains a priority, in every sector, including the education sector, as part of a comprehensive continuum of prevention, care and support.

#### 9.1.2 Objectives:

To raise awareness about HIV and AIDS and related health conditions amongst all education sector employees.

To empower all education sector employees to make informed decisions and lifestyle choices by providing information, knowledge and skills on HIV and AIDS and other health conditions.

#### **9.1.3** Policy statements:

All education sector employees shall be given the opportunity to participate during working time in a planned HIV and AIDS workplace wellness programme that addresses their concerns concerning coping strategies with regard to risk, as well as care, treatment and support, and:

- (a) All education sector employees shall be informed and educated about the possible ways of contracting and transmitting HIV.
- (b) Education sector employees infected and/ or affected by HIV and AIDS may not be stigmatised and discriminated against.
- (c) Educational institutions shall have a health resource area or section with all relevant materials.
- (d) All educational institutions shall have male and female condom distribution mechanisms that are accessible to all employees.
- (e) Regular HIV and AIDS information campaigns or meetings shall be held by all educational institutions.
- (f) Capacity development and enhancement programmes on HIV and AIDS shall be designed and implemented.
- (g) Every educational institution shall have trained peer educators.
- (h) HIV and AIDS information must be sensitive to the age, gender, culture, tradition, faith and beliefs of education sector employees.
- (i) Basic hygiene, first aid procedures and universal precautions, as specified in the National Policy on HIV and AIDS for the Education Sector (2003) (Annexture A, p11), shall be followed

- in all cases of workplace injuries, exposure to blood and body fluids, the management of sharps/sharp instruments and the treatment of employees and/or learners with open wounds.
- (j) Education sector employees shall be empowered with the knowledge and understanding about their rights and obligations. These rights and obligations are enshrined in the guiding principles of this Policy.
- (k) Advocate for workplace support through media coverage the development and distribution of IEC materials.
- (l) All Education Sector employees shall have access to affordable short term antiretroviral prophylaxis, expecially for persons who have experienced accidental occupational exposure to HIV.

#### 9.2 Mainstreaming HIV and AIDS

9.2.1 Mainstreaming HIV and AIDS into an employee wellness programme is the optimal way to provide HIV- and AIDS-related treatment, care and support to employees who are infected or affected. An employee wellness programme aims to improve and maintain an employee's physical and psychosocial condition.

#### 9.2.2 Objectives:

To mainstream HIV and AIDS into all programmes and activities within the workplace.

To enable all education sector employees to access HIV- and AIDS-related services within an enabling workplace environment and as part of a comprehensive holistic workplace wellness programme.

### 9.2.3 Policy statements:

- (a) Educational institutions shall advocate for and facilitate access to medical services specifically for education sector employees who are not on a medical aid scheme.
- (b) Educational institutions shall facilitate access to and participation in healthy living programmes. Such programmes shall include voluntary counselling and testing (VCT) services, antiretroviral (ARV) and other treatments to relieve HIV-related symptoms and common opportunistic infections, nutritional advice and supplements and the facilitation of home-based care services.

- (c) Employees who wish to be tested as part of voluntary HIV testing or 'Know your status' programmes shall be provided with information on where to do so and on what the procedure entails. Such testing shall normally be carried out by community health services and not in the educational institution itself. If such programmes are organised by health services within the educational institution, testing shall only be carried out at the request of and with the written consent of the employee, be performed suitably qualified health personnel, adhere to strict confidentiality and disclosure requirements and be accompanied by gendersensitive pre- and post-test counselling on the nature and purpose of the test and on post-test options and services, whether the result is positive or negative.
- (d) Services shall also be available to education sector employees that provide psychosocial support, counselling, support groups, stress management and drug and alcohol use.
- (e) All services shall promote values such as respect, acceptance, love, recognition and a sense of caring.
- (f) As appropriate and where feasible, services shall be negotiated as part of collective bargaining to establish or extend employee services, in cooperation with public education authorities and/or community-based organisations. This may be considered within existing employee assistance programmes (EAP).
- (g) Educational institutions shall provide information on and facilitate access to death and funeral benefits and entitlements; social security and other forms of financial support, such as social welfare grants. Referrals for legal information and assistance and other services will also be facilitated.
- (h) Attention shall be paid to the needs of education sector employees who are caring for HIV positive family members, with special consideration for female employees, who assume a relatively larger burden of care.

#### 9.3 Strengthening regulatory frameworks

9.3.1 An optimal workplace HIV and AIDS programme requires a review and possible revision of existing regulatory provisions, as well as rigorous application of all provisions that collectively create and support an enabling workplace environment.

#### 9.3.2 Objectives:

To provide a safe and secure working environment for all employees through the development, implementation, and monitoring of good practice working conditions, procedures and regulatory mechanisms.

To strengthen an enabling working environment so that employees infected and affected with HIV enjoy equal rights in a culture of acceptance, openness, and compassion.

#### 9.3.3 Policy statements:

- (a) The conduct of education sector employees is central to the mission of the educational institution and shall be based on mutual respect and trust, and shall be subject to the Codes of Conduct for the public service and the teaching service.
- (b) There are risks in any personal relationship between persons in inherently unequal positions of authority, and in the case of a sexual relationship these risks could include vulnerability to HIV infection. No employee may sexually harass or in any way abuse any other person in the workplace.<sup>3</sup> (Refer to Annexture Four (a) 6a)
- (c) Further, education sector employee-learner/ student relationships shall be based on mutual respect and trust. No sexual or romantic relationship will therefore be permitted between employees and learners or students in the workplace.
- (d) The educational institution shall not engage in the mandatory testing for HIV of employees as a condition for employment, for continued employment, or for purposes of work assignments or benefits. Therefore, HIV infection shall not be taken into consideration as part of the employment procedure or decision for any individual applying to an educational institution for work. Further, routine fitness testing related to employment will not include HIV testing.
- (e) No education sector employee shall be compelled to disclose his or her HIV status to their employer or to other employees. Where an education sector employee chooses to voluntarily disclose his or her HIV status to an employer or another employee, such information shall not be disclosed to others without his or her written consent.

<sup>&</sup>lt;sup>3</sup> Refer to the relevant clauses in the Codes of Conduct (i) for the public service and (ii) for the teaching service

- (f) All health records, notes, and other documents that make reference to an education sector employee living with HIV shall be kept confidentially in a secure place accessible only in accordance with provisions on the protection of employees' personal data. Medical certificates shall not specify an education sector employee's HIV status, unless approved by the employee concerned. Any violation of medical privacy may result in disciplinary action being taken.( Refer to Annexture Four (d))
- (g) Employees living with HIV should not be discriminated against in decisions concerning their job security or tenure, renewal of fixed term contracts, opportunities for professional development or promotion. They may, however, be transferred from work positions that have been determined by their physician or an educational institution medical board to be too strenuous for their condition.
- (h) Measures shall be taken to reasonably accommodate employees with advanced HIV, including those experiencing severe ARV side-effects or AIDS-related illnesses, to enable them to continue working as long as possible. Needs shall be established by the administration of the educational institution, or the human resources department if more appropriate, on a case-by-case basis, in consultation with the physician of the employee concerned and with the employee's informed and written consent; balancing both the institution's and employee's needs. (Refer to Annexture Four (c))
- (i) The procedures for discipline and grievance resolution for education sector employees in relation to perceived or actual violations of this Policy shall be carried out in accordance with the relevant national legislation (criminal, discrimination and labour acts), institutional policy and regulations and negotiated or collective bargaining agreements. (Refer to Annexture Four (d))
- (j) Education management shall establish due process procedures for investigating and taking decisions regarding employee rights and responsibilities as part of employment relationships.
- (k) An education sector employee living with or affected by HIV and AIDS shall be subject to the same conditions relating to sick or compassionate leave as those applicable to any other employee in terms of the education sector conditions of service.

#### 9.4 Managing the HIV and AIDS response

9.4.1 HIV and AIDS are affecting every workplace, increasing absenteeism and morbidity and mortality amongst employees; increasing costs, of benefits, staff replacement and training; decreasing productivity and negatively affecting performance and worker morale as well as creating difficult working conditions. These and other issues represent challenges that require managing and monitoring.

#### 9.4.2 Objective:

To ensure that management structures, monitoring and financial systems for the education sector workplace HIV and AIDS response are in place in all educational institutions and for all education sector employees.

#### 9.4.3 Policy statements:

- (a) Workplace wellness management and coordination structures shall be in place within the existing HIV and AIDS governance framework.
- (b) Management shall ensure effective human resource (HR) strategies to deal with the impact of HIV and AIDS throughout the education system, including HIV and AIDS relevant information in the education management and information system (EMIS) for purposes of planning, recruitment, deployment and replacement of staff, with particular attention to prevalence and risk, geographical impact, subject shortages, vulnerability and the provision of qualified and skilled education sector employees. Application of an EMIS will need to be in the context of a commitment to maintaining confidentiality in the use of statistics for planning purposes.
- (c) Education sector employees' relief systems shall be in place to manage absenteeism, attrition and productivity.
- (d) Data collection and information systems shall be established on key indicators for the workplace programmes and the education sector employee relief system.
- (e) Capacity development and training of education sector employees shall be established and sustained to deal with workplace HIV and AIDS strategies.
- (f) Financial and budgetary provisions and resource mobilisation shall be set up and maintained.
- (g) Existing partnerships shall be strengthened and maintained in all educational institutions, in order

to coordinate efforts and activities for effective education sector workplace programmes.

# 10. Implementing the Policy

- 10.1 Every educational institution will appoint and provide training for a workplace wellness coordinator and where practicable an HIV and AIDS committee, as appropriate to its size and resources, in order to apply and monitor this Policy.
- 10.2 The HIV and AIDS Management Unit (HAMU) at national level and the Regional AIDS Committees for Education (RACE) at regional level shall guide and support the coordinators, committees.
- 10.3 A copy of this Policy is to be kept on display in all educational institutions and made available to all education sector employees for reading and implementation. All forms of communication normally used in the educational institutions e.g. posters, circulars to education sector employees, meetings, notices of governing bodies, institution assemblies and electronic mail shall be used to make the Policy known and help ensure its

- application. Appropriate forms of communication to ensure dissemination of information to illiterate or semi-literate education sector employees shall be used.
- 10.4 Provisions in the policy shall be discussed at suitable opportunities and translated into time-bound implementation plans, with clearly defined outputs and responsibilities.
- 10.5 Education authorities shall monitor and evaluate the implementation of the Policy in all educational institutions and assist educational institutions with capacity development and training to implement the Policy.

# 11. Review of the Policy

This Policy will be reviewed after every five years regularly to take account of new developments in medical information or experience in the management of HIV and AIDS in educational institutions. The results of such reviews and changes in the Policy shall be made known to all relevant stakeholders.

# **ANNEXTURE ONE: Glossary**

Access	Being able to use available medical resources and other facilities.	
Affected person	A person whose life is challenged in any way by HIV and AIDS due to the broader impact of this epidemic.	
AIDS	Acquired Immune Deficiency Syndrome is a range of medical conditions the occurs when a person's immune system is seriously weakened by infection with the Human Immunodeficiency Virus (HIV). HIV weakens cells in the immune system; this impairs the body's ability to respond to other infections. Peopliving with HIV are susceptible to a wide range of unusual and potential lithreatening diseases and infections. Though most of these can be treated, the is no successful treatment to date for the underlying immune deficiency caused by the virus. <sup>4</sup>	
Antiretroviral therapy	Treatment with two or more antiretroviral drugs, (ideally with 3 drugs to delay and prevent the onset of drug resistance), for people with advanced HIV disease and evidence of a compromised immune system.	
Behaviour Change Communication	Interventions and activities to promote and sustain risk-reducing behaviour change in individuals and groups by means of customised messages and using a variety of communication channels.	
Care, treatment and support	The care, treatment and support available to employees living with HIV, or affected by HIV and AIDS according to national legislation, education service regulations or institutional policy. <sup>5</sup>	
Confidentiality	The right of every person, employee or job applicant to have their medical information, including HIV status, kept private. All information about a person's health, including his/her HIV status is confidential information. This means that this information may not be shared by the health care worker or the counsellor with any other person without the informed consent of the person concerned.	
Counselling	A confidential dialogue between a client and a trained counsellor aimed at enabling the client to cope with stress and take personal decisions related to HIV and AIDS. Counselling may be provided by a professional or lay counsellor.	
Discrimination	Any distinction, exclusion or preference made on the basis of HIV status or perceived HIV status, including discrimination on the grounds of sexual orientation, which has the effect of nullifying or impairing equality of opportunity or treatment in employment or occupation, or training, in accordance with the definition and principles of the Discrimination (Employment and Occupation) Convention, 1958 (no. 111).	
Educational institution	Any establishment that renders educational services.	
Education sector	All Government and private educational institutions, including stakeholders, all programmes, activities and players in the field of education.	
Education sector employee  An administrator, teacher or non-teaching support staff member employee educational institution.		
Educator	Any person who imparts knowledge and skills within the education sector.	
Employee benefit	Any benefit granted to an employee or his/her family by an employer in respect of the period of employment of the employee, over and above the salary. The term is usually used in the sense of leave, retirement, life insurance and medical benefits.	

Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa
 Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa (amended)
 Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa
 Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa

Employer	A person or organisation employing workers in an education institution under a written or verbal contract of employment which establishes the rights and duties of both parties, in accordance with national or sectoral law and practice. <sup>8</sup>		
Epidemic	A disease, usually infectious, that spreads quickly through a population.		
Gender	Differences in social roles and relations between men and women.		
Governing body	An entity responsible for managing, coordinating and monitoring all HIV and AIDS related activities of a sector and or institution.		
HIV	Human Immunodeficiency Virus – a virus that weakens the body's immune system, ultimately causing AIDS.		
Impact mitigation	Refers to ways we can reduce the severity and alleviate the effects of HIV AIDS. <sup>9</sup>		
Infected person	A person who is infected with HIV, the virus that causes AIDS.		
Informed consent	Refers to the voluntary agreement of a person to undergo or be subjected a procedure based on full information, whether such permission is written expressed indirectly.		
Learner	A learner is a person receiving instruction and training from a learning institution or programme.		
Life skills	A group of psychosocial and interpersonal skills which assist a person to make informed decisions, to communicate effectively and to develop coping and self-management strategies to help them lead a healthy and productive life.		
Mainstreaming HIV and AIDS	Incorporating the implications of HIV and AIDS into normal everyday considerations and actions of an organisation is called mainstreaming. Mainstreaming of HIV and AIDS has two aspects to consider – how HIV and AIDS are affecting the core functions of an organisation and how HIV and AIDS are affecting the organisation itself. Every organisation needs to understand how, in its ordinary work, it can reduce the risk of infection and the impact of AIDS. It needs to incorporate its response into its core functions and internally through HRD and workplace programmes. <sup>10</sup>		
Occupational exposure	Exposure to blood or other body fluids, which may be HIV infected, during the course of carrying out working duties		
Opportunistic infection	Any infections arising from a compromised immune system, eg. TB, candidiasis, etc. <sup>11</sup>		
Partners	Refers to any private sector or non-governmental organisation or other civil society body working with Government in the multisectoral response to the HIV and AIDS epidemic. <sup>12</sup>		
Peer education	Refers to activities aimed at providing factual/vital information to people of a certain age, same sex, has the same interest, of the same organisation or social group, status or position on matters governing their existence.		
Peer educator	The trained employee who develops or implements a information, education and skills development programme to meet the personal, psychosocial, social and educational needs of employees in relation to HIV and AIDS. <sup>13</sup>		

 <sup>&</sup>lt;sup>8</sup> Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa
 <sup>9</sup> Source: Republic of Namibia: National policy on HIV and AIDS 2007
 <sup>10</sup> Source: Republic of Namibia: National policy on HIV and AIDS 2007
 <sup>11</sup> Source: Republic of Namibia: National policy on HIV and AIDS 2007
 <sup>12</sup> Source: Republic of Namibia: National policy on HIV and AIDS 2007
 <sup>13</sup> Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa (amended)

Post exposure prophylaxis	Measures to be instituted after possible accidental exposure to HIV infection, rape or exposure to blood or body fluids following an injury with a sharp instrument. <sup>14</sup>			
Psychosocial support	Physical, economic, moral or spiritual support provided to an individual under any form of stress			
Reasonable accommodation	Any modification or adjustment to a job or to the workplace that is reasonably practicable and will enable a person living with HIV or AIDS to have access to or participate or advance in employment. <sup>15</sup>			
Screening	Assessing the level of actual risk of exposure to HIV and/or providing access to HIV testing. HIV screening should be done within the framework of the Workplace HIV and AIDS Policy. <sup>16</sup>			
Sexual harassment	Sexual harassment means unwanted behaviour or advances of a sexual nature which may include physical acts of unsolicited and unwanted touching, verbal, non-verbal, written or electronic invitations, suggestive or obscene remarks or jokes. <sup>17</sup>			
Social partnerships and networking	Any form of information sharing, consultation or negotiation between educational authorities, public and private, and employees or their representatives. <sup>18</sup>			
Stakeholder	An individual, organisation or body with a direct and continuing interest in an educational institution. <sup>19</sup>			
Stigma	A process of devaluation of people either living with or associated with HIV and AIDS. This stigma often stems from the underlying stigmatisation of sex and intravenous drug use, sexual orientation and sexual preference. <sup>20</sup>			
Teacher	A staff member who is professionally qualified to teach others in formal education and whose occupation is teaching; also including a professionally unqualified person whose occupation is teaching. <sup>21</sup>			
Unfair labour practice	Unfair conduct of an employer relating to the employment terms and conditions, including probation or promotion, training, provision of benefits or disciplinary action of an employee as defined in national law or practice. <sup>22</sup>			
Universal (infection control) precautions	Infection control practices to be used to minimize the risk of exposure to blood-borne pathogens. <sup>23</sup> (Annexture Three)			
Voluntary counselling and testing	A confidential dialogue between a client and a care provider aimed at enabling the client to cope with stress and take personal decisions related to HIV and AIDS, including blood testing for HIV.			
Wellness programme	A programme designed to promote the physical and mental health and wellbeing of employees, including components such as counselling, support groups, nutritional supplements, provision of treatment for opportunistic infections, provision of antiretroviral therapy, etc.			
Work environment	All conditions related to the workplace.			
Workplace	Any occupational setting, station or place where workers spend time for gainful employment.			

<sup>&</sup>lt;sup>14</sup> Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa (amended)

Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa (amended)
 Source: ILO Code of Practice on HIV/AIDS in the workplace
 Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa
 Source: MoE: Code of conduct for the teaching service
 Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa (amended)

<sup>&</sup>lt;sup>19</sup> Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa

Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa
 Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa
 Source: GRN; Education Act (Act 16 of 2001)
 Source: ILO & UNESCO: An HIV and AIDS workplace policy for the education sector in Southern Africa
 Source: ILO Code of Practice on HIV/AIDS in the workplace

# **ANNEXTURE TWO: Legal and Policy Instruments**

The following are key legal and policy instruments that define the context within which the Policy was developed and will be implemented.

#### **International instruments**

- Millennium Development Goals (MDGs) (2000)
- Education For All (EFA) (2000)
- UNGASS; Declaration of commitment on HIV and AIDS (2001)
- Convention on the elimination of all forms of discrimination against women (CEDAW) (1979)
- ILO; Code of practice on HIV and AIDS and the world of work (2001)

#### **Regional and continental instruments**

- Abuja Declaration (2001) and subsequent summit on AIDS, TB and other infectious diseases (2006)
- Maseru Declaration (2003)
- Brazzaville Commitment (on scaling up towards universal access) (2005)
- Code of conduct of HIV and AIDS and employment in the Southern African Development Community (SADC) (1997)
- ILO; An HIV and AIDS workplace policy for the education sector in Southern Africa (2006)

#### **National instruments**

- GRN; The Constitution of the Republic of Namibia
- GRN; Labour Act, 1992 (Act 6 of 1992)
- GRN; Labour Bill of 2006
- GRN; **Public Services Act,** 1995 (Act 13 of 1995)
- GRN; Regulations under the Public Service Act, 1995 (Act 13 of 1995)
- GRN; Education Act, 2001 (Act 16 of 2001)
- GRN: Employees Compensation Act. 1941 (Act 30 of 1941)
- GRN; Social Security Act, 1994 (Act 34 of 1994) and Regulations under the Social Security Act, 1994 (1995)
- MBESC & MHETEC; National Policy on HIV and AIDS for the education sector (2003)
- GRN; National Policy on HIV and AIDS (2006)
- Public Service Staff Rules: Amendment Notice No.4 of 1997
- Public Service Staff Rules: Public Service Code of Conduct (2000)
- MoE; Code of Conduct for teaching service (2004)
- Namibian HIV and AIDS Charter of Rights
- GRN; National code on HIV and AIDS in employment, (1998)
- GRN; **MTP III** (2004-2009)
- GRN; **ETSIP** (2006-2015)
- GRN; Vision 2030

#### **ANNEXTURE THREE: Universal Precautions**

- 1. Blood or bloodstains, must be handled with extreme caution. Skin accidentally exposed to blood should be washed immediately with soap and running water. All bleeding wounds, sores, breaks in the skin, grazes and open skin lesions should ideally be cleaned immediately with running water and/or other antiseptics. If there is a biting or scratching incident where the skin is broken, the wound should be washed and cleaned under running water, dried, treated with antiseptic and covered with a waterproof dressing. Blood splashes to the face (mucous membranes of the eyes, nose or mouth) should be flushed with running water for at least three minutes.
- 2. Disposable bags or incinerators must be made available to dispose sanitary wear.
- 3. All open wounds, sores, breaks in the skin, grazes and open skin lesions should be covered completely and securely at all times with a non-porous or waterproof dressing or plaster so that there is no risk of exposure to blood.
- 4. Cleaning and washing should always be done with running water and not in containers of water. Where running tap water is not available, containers should be used to pour water over the area to be cleaned. Educational institutions without running water should keep a supply on hand specifically for use in emergencies (for instance, in a 25-litre drum). This water can be kept fresh for a long period of time by adding a disinfectant, such as Milton, to it.
- 5. All persons should wear protective latex gloves or plastic bags over their hands when attending to blood spills, open wounds, sores, and breaks in the skin, grazes, open skin lesions, body fluids and excretions. Doing this will effectively eliminate the risk of HIV transmission. Bleeding can be managed by compression with material that will absorb the blood (for instance, a towel).
- 6. If a surface has been contaminated with body fluids and excretions which could include some blood (for instance tears, saliva, mucus, phlegm, urine, vomit, faeces and pus), that surface should be cleaned with running water and household bleach (1:10 solution) using paper or disposal cloths. The person doing the cleaning must wear protective gloves or plastic bags over their hands.
- Blood-contaminated material should be sealed in a plastic bag and incinerated or sent to an appropriate disposal firm. Tissues and toilet paper can be flushed down a toilet.
- 8. If instruments (for instance scissors) become contaminated with blood or other body fluids, they should be washed and placed in a household bleach

- solution for at least one hour before drying and reusing.
- 9. Needles and syringes should be safely disposed of and not re-used.

#### **First Aids Kits:**

- Store First Aid Kits in selected rooms in the Education Institutions
- Ensure that the first aid kits contain the following:
  - ® Four disposal latex gloves, gauze, scissors and materials to help heal the wound
  - ® two large and two medium pairs of household rubber gloves (for handling blood-soaked material in specific instances such as when broken glass makes the use of latex gloves inappropriate)
  - ® absorbent material
  - ® waterproof plasters
  - ® disinfectant (such as hypo chloride)
  - ® cotton wool
  - ® tissues
  - ® water containers
  - ® resuscitation mouthpiece or similar device with which mouth-to-mouth resuscitation can be applied without any contact being made with blood or other body fluids
  - ® protective eye wear
  - ® protective facemask to cover nose and mouth

#### **Alternatives**

The universal precautions help prevent contact with blood and other body fluids. Less sophisticated items than those described above can also be used, such as:

- unbroken plastic bags on hands where latex or rubber gloves are not available
- common household bleach for use as disinfectant (diluted one part bleach to ten parts water [1:10 solution])
- spectacles instead of protective eye wear
- a scarf instead of a protective face mask.

Used items should be dealt with as indicated in paragraphs 7 to 9 above.

#### Post Exposure Prophylaxis (PEP)

Give PEP for exposure posing risk of infection transmission:

- HIV: Initiate PEP as soon as possible, preferably within 48 hours of exposure
- Evaluate exposed persons taking PEP within 72 hours after exposure and monitor for drug toxicity for at least 2 weeks
- Offer pregnancy testing to all women of childbearing age not known to be pregnant:
  - ® Seek expert consultation if viral resistance is suspected:
  - ® Administer PEP for 4 weeks if tolerated

#### **ANNEXTURE FOUR:**

# Extra information on sexual harassment and abuse

- Sexual harassment constitutes unwanted behaviour or advances of a sexual nature, which may include physical acts of unsolicited and unwanted touching, verbal, non-verbal, written, or electronic invitations, suggestive and obscene remarks or jokes among education sector employees.
- Sexual abuse constitutes behaviours that is likely to harm other employees and deprive him or her of a sense of physical or psychological safety, that includes:
  - (1) unwanted touching, fondling, or stroking;
  - (2) non-contact through gestures, sexually explicit pictures;
  - (3) unwanted verbal or non-verbal (e.g., sexual comments or jokes), violent or non-violent, coerced and seduced sexual activities; and
  - (4) exploitative acts (e.g., use of unwelcome gifts) between employees.

Employees may not sexually abuse each other or any other person in the workplace.

- Relationships between administrators, teachers and other employees in all institutions and relationships between employees and students in post-secondary institutions will be subject to the institutional code of conduct.
- To apply the above policies, as appropriate, employees are expected to ensure a learning environment, which supports clear boundaries concerning respectful student/staff interaction and relationships, including respect for the following guidelines:
  - ® Employees should avoid being alone with a learner or student of either sex:
  - When meeting individually with a learner or student, staff should ensure that this meeting is in the sight or earshot of other adults;
  - ® Staff should avoid meeting learners or students outside the educational institution unless this is part of an approved learning activity or excursion. The permission of both the administrator and parent/ guardian should be received in such circumstances.
- Public education authorities and administrators of education institutions should strictly enforce legislation,

regulation or institutional rules on sexual misconduct and staff/student relationships, as appropriate to national laws and custom.

#### B. Extra information on confidentiality

- Confidentiality should also be assured by providing a private environment for personal discussions (for example, any conversation related to HIV status), and by working out arrangements for care and support with the person concerned, including wellness programmes.
- Although disclosure should always be voluntary, it should be encouraged for purposes of support.
- Employees who acquire personal information about the real or perceived HIV status of other employees must not disclose such information unless the person concerned has given her/his informed written consent.
- Procedures should be established to ensure confidentiality
  of HIV status in the institution, based on the social
  partnerships and networking processes in accordance
  with national laws and education sector regulations.

# C. Extra information on benefits and reasonable accommodation

- Employees living with HIV, including those with AIDS should enjoy the same social protection benefits under national law, education service regulations or institution provisions as employees with other chronic or serious illnesses. In accordance with national education service regulations, the institution or the human resources department of the education service, if more appropriate, should also examine the sustainability of new benefits packages addressing the specific nature of HIV infection and AIDS as part of its human resource strategy.
- Transfers for reasonable accommodation should occur in consultation with the employee living with HIV, in accordance with the principles of social dialogue of this policy, be voluntary as far as possible, and where involuntary, may be subject to the grievance procedure provisions of the Policy.
- Reasonable accommodation may include: rearrangement
  of working hours; modified tasks or jobs; adapted work
  equipment; provision of rest periods; part-time, job
  sharing, substitute, or other flexible work arrangements;
  reassignment to other institutions (closer to appropriate
  medical facilities); and appropriate leave provisions.

# D. Extra information on disciplinary grievance procedures

• The procedures should be the result of consultations with employees' organizations, include proper guarantees of confidentiality, rights to information access, representation, written notification of decisions and appeal in accordance with international standards, and should be made known to all staff. Complainants may have recourse to normal appeal procedures related to unfair labour practices (including dismissal, denial or unjustified restriction of employment or work related rights and benefits), and may refer in this regard to the provisions and related jurisprudence of the ILO Discrimination (Employment and Occupation) Convention, 1958 (No. 111). Relevant part of Namibian acts and laws.

The following are grounds for disciplinary action (but not exhaustive):

- Stigma, discrimination, or refusal to work with an individual living with HIV or AIDS: There is no justification for stigmatization, including refusing to work, study or be present in the education institution with HIV positive individuals, since HIV cannot be transmitted through casual contact within the workplace. Employees who are not prepared to work or engage in learning activities with an HIV positive individual will be offered education and counselling by the institution or from the community or education service.
- If after counselling, the individual refuses to carry out contractual duties or to participate in the learning programmes of the education institution with HIV positive employees, the education institution's disciplinary procedures concerning refusal to work or study should be followed.
- Where discrimination occurs in the form of physical or verbal abuse, the employee who has experienced any form of discrimination will have recourse to existing mechanisms for redress, including regulations governing physical attacks and bullying. The appropriate representative of the Committee or Coordinator should also be informed to ensure that proper measures are taken.
- Violation of medical confidentiality.
- Sexual relationships with learners or students. (see above section)
- Sexual harassment. (see above section)
- Sexual abuse. (see above section)

### **ANNEXTURE FIVE**

Checklist for implementation of an HIV and AIDS policy for Educational Institutions

#### A) At national level

Ministry of Education establishes a review committee composed of representatives of government, education sector unions and private sector representatives and private school employers/managers, and other stakeholders as agreed among the partners, to consider application of the policy's provisions at institutional level in accordance with existing national laws and the education sector strategic framework, regulations, policies and collective bargaining agreements, as well as human resources (HR) policies.

Education sector partner organizations and education sector unions review the policy framework in order to ensure reflection of its principles and guidelines in collective agreements.

Review committee revises the policy as needed and organizes distribution of the agreed policy to all educational institutions.

Review committee establishes implementation support mechanisms to assist educational institutions to apply the policy.

#### The sectoral governing body

The HIV and AIDS Management Unit (HAMU) shall guide and support the coordinators, committees at national level. The governing body of the educational institution where applicable should ensure that the institution implements (develops or adopts a) the workplace policy on HIV and AIDS - based on the principles set out in section 6, that the process includes consultation between the representatives of employers and employees, and that appropriate measures are taken for its implementation, including making it known to all Education Sector employees and the development of a continuous training programme for management and ES employees. The governing body is expected to promote an educational climate that protects the rights of every employee living with HIV and/or affected by HIV and AIDS.

#### B) At Regional and education institution level

In consultation with other major stakeholders, the governing body of the educational institution appoints an HIV and AIDS coordinator/committee - depending on the size and resources of the institution - to coordinate the implementation of the policy and design a monitoring mechanism. The HIV and AIDS program implementer in consultation with the HR department of the educational

institution, the governing body or education sector employees or their representatives shall:

- identify specific institutional needs by reviewing the policy framework adopted at national level and considering how to adapt it to the specific workplace setting;
- b) identify the needs of education sector employees prior to planning the institutional programme.

The HIV and AIDS workplace wellness manager/coordinator assesses what health, social and support services, information services and other resources are already available in the educational institution or in the surrounding community.

On the basis of the needs assessments and mapping of available services, the coordinator/committee drafts possible revisions of the policy framework and a work plan in consultation with teachers' and other education sector workers' representatives. The work plan should include: time frame and lines of responsibility.

The draft policy and plan are circulated for comments to the governing body and the Principal.

When the workplace policy and work plan are finalised, the coordinator/committee draws up a list of resources – human, financial and technical that are necessary for implementation, in consultation with the governing body and principal.

The implementation of the workplace policy should happen through the established planning and budgeting cycles of the institution.

The Coordinator/committee organizes the dissemination of the policy and work plan through the governing body, teachers' assemblies and education sector union meetings, students' assemblies, induction courses and training sessions.

The Coordinator/committee, in consultation with representatives of teachers and other education sector workers and students, designs a monitoring mechanism to ensure the implementation of the work plan and review the impact of the policy as needed.

#### **Programme implementers**<sup>24</sup>

The Programme implementers shall comprise of Directorates at National -, Regional -, Circuit -, Cluster levels and all Educational institutions.

The Programme implementer shall:

- Advise the governing body of the implications of HIV and AIDS for the educational institutions, to enable governing body members to develop successful strategies to reduce stigmatization and eliminate discrimination against those living with and/or affected by HIV and AIDS, and prevent the spread and mitigate the effects of HIV in the educational institutions and create a supportive and caring environment for education sector employees;
- Take the necessary steps to develop or adopt, through social dialogue, a policy on HIV and AIDS, a plan for its implementation and a programme for prevention, care and support;
- Agree on the appointment of an HIV focal point or committee (in larger institutions), in consultation with the representatives of the education sector employees, in accordance with this Policy;
- Ensure a safe and healthy work and study environment, including the application of universal precautions as part of first aid provisions.

#### Workplace wellness coordinator

The workplace wellness coordinator and/or committee will:

- be responsible for promoting the workplace HIV and AIDS Policy in the institution
- support the implementation of the education programme
- access and mobilize resources and partnerships for assistance and support
- disseminate information about HIV and AIDS and address HIV and AIDS related stigma and discrimination
- adhere strictly to the confidentiality issues of this Policy
- Help evaluate the objectives, processes and outcomes of the workplace HIV and AIDS programme.

### **Employee representatives**

Representatives of education sector employees shall have the responsibility to protect those they represent from any form of discrimination related to HIV status and to help implement the workplace HIV and AIDS Policy and programme by monitoring and promoting the information, education, health and safety and other practices and provisions set out in the Policy.

<sup>&</sup>lt;sup>24</sup> It is a generic term coined to assist the education sector and is subject to review

# **ANNEXTURE SIX: Members of the Representative Editorial Board**

#### Name

1. Mr. C. Clayton 2. Ms. F.K. Haingura

3. Mr. M. Matsuib

4. Mr. C. Shanyengange

5. Ms. D. Muruko

6. Ms. A. Beytell

7. Mr. D. Sampson

8. Ms. P. Pieterse

9. Mr. S. Mabhele

#### Organization

Namibia Business Coalition on AIDS

Ministry of Education

Namibia National Teachers Union

Ministry of Education

Legal Assistance Center

Lironga Eparu

Ministry of Education

Ministry of Education

International Labour Organization

# ANNEXTURE SEVEN: Participants who attended the Stake holders Conference for the Workplace Programme, 10-13 July 2007, Pelican Bay Hotel Walvis Bay

No	Name	Title	Organisation	Physical Address	E-mail address
			Region		
1.	Nangolo Mbumba	Minister of Education	MOE HQ	MOE GOP	
2.	Alfred Ilukena	Under- Secretary Formal Education	MOE HQ	MOE GOP	
3.	T. Seefeldt	Deputy Director	Khomas Region	Frans Indongo Building	Seeco@mail.na
4.	B. Boys	Director	MOE Hardap Region	P/B 2122 Mariental	
5.	J. Awaseb	Director	MOE Erongo Region	P/B 5024 Swakopmund	
6.	F.K. Haingura	SEO	Ministry of Education	GOP	fhaingura@mec.gov.na
7.	D. Sampson	Education Officer	NIED	P/B 2034 Okahandja	dsampson@nied.edu.na
8.	N.B. Salom	RACE Coordinator	MOE	Oshana	nnsalom@yahoo.com
9.	V.V. Mattheus	HR Practitioner	МОЕ	Oshana	vmattheus@hotmail.com
10.	U.U. Kavari	Principal	MOE Omaheke	P/B 1004, Otjinene	
11.	C. L. Kawana	HR Practitioner	MOE Caprivi	P/B 5006 Katima Mulilo	
12.	A. Muremi	RACE Coordinator	MOE Kavango	P/B 2134, Rundu	Adolf98@yahoo.com
13.	F. Silas	HR Practitioner	MOE Kunene Region	P/B 2007 Khorixas	
14.	L. Shatiwa	REO	MOE Omusati Region	P/B 2020, Ondangwa	shatiwa@yahoo.com
15.	R. Goeieman	HR Practitioner	MOE Karas Region Office		
16.	C. Shanjengange	Principal	Diaz Primary School		diazps@iway.na
17.	J. Yisa	Regional School Counselor	MOE Otjozundjupa Region	MOE Otjiwarongo	
18.	E. Witbooi	Regional Literacy Officer	MOE Kunene Region	P/B 2007 Khomas	
19.	H. Tibinyane	Assistant School Counselor	MOE Omaheke Region	MOE Omaheke	hildegardtib@namibnet.com
20.	E. Aipanda	REO	MOE Oshana Region	P/B 5518 Oshakati	

21.	J.K. Kasembi	HR Practitioner	MOE	P/B2618	kjkasembi@yahoo
			Otjozondupa Region	Otjiwarongo	
22.	C. Poulton	RACE Coordinator	MOE Hardap Region	P/B 2122 Mariental	Corinnep@mweb.com.na
23.	I. Ebba	RACE Coordinator	MOE Omusati Region	P/B 3301 Ongwediva	
24.	E.B. Volkwyn	HR Practitioner	MOE Hardap Region	P/B 2122	
25.	E. Shindove	HR Practitioner	MOE Omusati Region	P/B 529 Outapi	emeliashindove@yahoo
26.	H.N. Shemuketa	RACE Coordinator	MOE Oshikoto Region	P/B 2028	oshikoto@hamu.nam.net
27.	G.K. Kabuku	RACE Co-ordinator	MOE Caprivi Region	P/B 5006 Katima	caprivi@iway.na
28.	M.N. Sibeya	Lecturer	MOE Caprivi College	P/B 1096 Katima	msibeya@yahoo.com
29.	J.M. Mbangu	RACE Co	MOE Erongo Region	P/B 5024 Swakop	erongo@hamu.nam.net
30.	A. C. Shikulo	RACE member	MOE	P/B 2618	Areas-
			Otjodjonzupa Region	Otjowarongo	shikulo@yahoo.com
31.	A.V. Cloete	Cluster Centre Principal	MOE Karas Region	Karasburg	
32.	A.N. Shitenga	HR Practitioner	MOE HQ	MOE GOP	ashitenga@mec.gov.na
33	H.T. Shingenge	HR Practitioner	MOE HQ	MOE GOP	hshingenge@mec.gov.na
34.	P.E. Topnaar	Circuit Inspector	MOE Hardap Region	P/B 2122 Mariental	topnaar@hotmail.com
35.	L.A. Katzao	HR Practioner	MOE Khomas Region	Eiekstr. 10 Suiderhof Windhoek	
36.	P.B. Pieterse	RACE Coordinator	MOE Khomas Region	Frans Indongo	
37.	J. Kapenda		MOE	Ondangwa	jonashals@yahoo.com
38.	R.J. Hasheela		MOE	Ondangwa	rjshash@yahoo.com
39.	J.E. Katjiteo		MOE Omaheke	P/B 2130	
			Region	Gobabis	
40.	R. Tjizu	RACE Coordinator	MOE Kunene Region	P/B 3034	
41	D. W.		MOE E D :	Opuwo	
41.	B. Kooper		MOE Erongo Region	P/B 5024 Swakopmund	
42.	C. Clayton	Project Manager WWP	NABCOA	Windhoek	clayton@nabcoa.org
43.	S.N. Indongo	Senior Culture Officer	MYNSSC	P/B 13391 Windhoek	snindongo@hotmail.com
44.	G. Eiseb	Lecturer	UNAM	UNAM	geiseb@unam.na
45.	S.N. Iipinge Dr.	Head HIV and AIDS Unit	UNAM	Dorado Park Windhoek	siipinge@unam.na

46.	C.K. Haihambo	Faculty officer	UNAM	Box 20795	chaihambo@unam.na
				Windhoek	
47.	J. Diedericks	Education Officer	UNICEF		jdiedericks@unicef.org
48.	L. Marcil	Peace Corps Volunteer	CCA	Box 7930	caama@mweb.com.na
49.	W. Heard	EDU-Sector	AIDS Response Trust		heard@mweb.co.za
50	M. Simphiwe	Focal Person	ILO	Hatfield, Pretoria	mabhele@ilo.org
51	R. Shikulo	Councelor	Lironga Eparu	P/B 62774	Reainehildeshikulu@yahoo
				Windhoek	
52.	M. Matsuib	NTC	NANTU	P/B 50674	Matsuib7@yahoo.com
53.	M. Nasheya	EFAIDS	NANTU	P/B 61007	nantuaids@nantu.org.na
54.	M. Meyer	Reporter	Republikein		swanews@republikein.com
55.	H. Shilongo	ССР	Omusati	P/B 175	
				Oshakati	
56.	P.H. Sheya	Health Educator	Walvis Bay	P O 2444	caawa@mweb.com.na
				Walvis Bay	
57.	D. Mulonga	YEP Coordinator	CAA Erongo	Box 965 Walvis	caawa@mweb.com.na
				Bay	
58.	M. Muuondjo		Parliament		mmuuonjo@parliament.gov
59.	D. Van der Westhuizen	Project Manager	USAID	P/B 12028	mvanderwesthuizen@usaid.gov
				Windhoek	
60.	T. Malone	Deputy Chief of Party	BES 3/AED	MOE GOP	
61.	T. Kopenhaver	M & E Practitioner	USAID	P/B 12028	
				Windhoek	
62.	C. Mushaukwa	Program officer	UNESCO	Box 70640	cpmushauwa@unesco.org
				Windhoek	

**NOTES** 

The views expressed in this policy is that of the Ministry of Education and should not be interpreted as official USAID, Global Fund, ILO or UNESCO Policy.