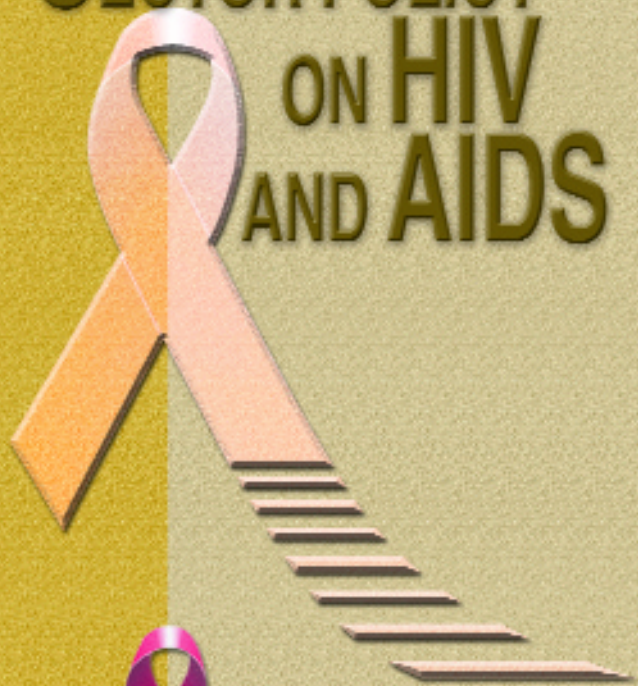




EDUCATION SECTOR POLICY ON HIV AND AIDS



Republic of Kenya

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FOREWORD

The launch of this Education Sector Policy on HIV and AIDS is a reflection of the Ministry of Education, Science and Technology's commitment to fighting the HIV/AIDS scourge in the education sector.

In developing the education sector policy, the ministry intends to facilitate broader understanding and strengthen partnerships between education service providers. In our view, the fight against HIV and AIDS must be won, otherwise, educational attainment will inevitably be slowed down by the impact of the pandemic. Currently, the scourge is placing increased pressures on learners and educators by taking the lives of key actors. As such, the ministry acknowledges the potential threat from HIV and AIDS and will do everything possible to minimise its effects on both the education sector and society.

The Education Sector Policy on HIV and AIDS acts as a guideline for effective prevention, care and support within the public sector where HIV/AIDS programmes are being implemented. We wish to call upon all education service providers to join in this fight against HIV and AIDS.

On behalf of the Ministry of Education, Science and Technology, I wish to express gratitude to all the stakeholders who have participated in this endeavor for their contribution. I also wish to extend sincere appreciation to the United States Agency for International Development (USAID) and its Mobile Task Team and to the United Nations Educational, Scientific and Cultural Organisation (UNESCO) for supporting the consultative process that has led to the preparation of this education sector policy.



PROF. KAREGA MUTAHI
PERMANENT SECRETARY

2. PREAMBLE

Education has a key role to play both in preventing HIV and AIDS and in mitigating its effects on individuals, families, communities and society. Children and young people have been disproportionately affected by the epidemic. Levels of infection peak in the 15 – 24 age group, and the impact on families, households and communities is often even harder on young people within them.

The Dakar Framework for Action for “Education for All” (EFA), adopted by the international education community during the World Education Forum (Dakar, Senegal – April 2000), draws attention to the urgent

EFA goals and the MDG for education cannot be achieved without urgent attention to HIV and AIDS.

need to combat HIV and AIDS if EFA goals are to be achieved. Gains made by governments in

terms of access, quality and retention are seriously threatened by the HIV/AIDS epidemic and its impact on the demand for, and supply of, education. EFA goals and the Millennium Development Goal (MDG) for education cannot be achieved without urgent attention to HIV and AIDS.

The United Nations General Assembly Special Session on HIV/AIDS (UNGASS) Declaration of Commitment on HIV/AIDS (July 2002) sets the target of reducing HIV infection among 15 to 24 year-olds by 25 per cent by 2010 globally and calls upon

governments to develop by 2003, and implement by 2005 national strategies to provide a supportive environment for orphans and children affected and infected by HIV/AIDS. The UNGASS Declaration calls for vastly expanded access to information and education, especially youth-specific HIV/AIDS education, necessary to develop the life skills required to reduce risk and vulnerability to HIV infection.

In Kenya, the HIV and AIDS pandemic is a major national challenge and in 1999 it was declared a national disaster. The pandemic impacts adversely on the education sector as a whole and it affects quality, access, equity, supply and demand for education services.

At present there is no cure or vaccine for HIV and AIDS and the only way to stop its spread is through attitudinal and behavioural changes as well as management that can be secured effectively through education.

For the education sector to respond effectively to the challenges of this pandemic there is need to develop a policy for addressing HIV and AIDS issues as they affect the entire education and training system.

The **Education Sector Policy on HIV and AIDS** formalises the rights and responsibilities of every person involved, directly or indirectly, in the education sector with regard to HIV and AIDS: the learners,

their parents and care givers, educators, managers, administrators, support staff and the whole of civil society. (See Annexure A).

3. DEFINITION OF TERMS

ACU

Refers to AIDS Control Units.

Affected

Refers to a person who experiences the impact of HIV/AIDS through loss or sickness of family members, friends or colleagues.

AIDS

Acquired Immune Deficiency Syndrome (AIDS) is the final phase of HIV infection and is a condition characterised by a combination of signs and symptoms caused by HIV which attacks and weakens the body's immune system making the affected person susceptible to other life-threatening diseases.

Education sector

Refers to all the programmes, activities and players in the field of education.

Educator

Means any person who imparts knowledge and skills within the education sector.

Employee

Any person engaged in the education sector to perform a certain task for the purpose of earning a wage or salary.

Employer

A person who engages others to perform certain tasks for payment of a wage or salary.

HIV

Means the 'Human Immunodeficiency Virus' - the virus that causes AIDS.

Holistic care, treatment and support

Means that address physical ,psychological, emotional and other needs of affected and infected individuals.

Infected

Refers to a person who is living with the human immunodeficiency virus that causes AIDS.

Learner

A learner is a person receiving education and training from a learning institution or programme.

Learning institution

A place where formal or informal instruction is carried out following a prescribed programme.

Learners with special needs

Any learner within the education sector who is challenged by virtue of a diversity.

Minor

A person under the age of 18 years.

Orphan

An orphan is a person under the age of 18 years who has lost one or both parents.

OVC

Refers to orphans and vulnerable children

PLWA

Refers to People Living With AIDS.

Post exposure prophylaxis

Refers to measures and treatment given to a person who has recently been exposed to disease causing organisms, to prevent them from developing the disease.

Sero-status

The presence (HIV positive) or absence (HIV negative) of HIV in the body.

Teacher

A person who is registered to teach under the terms of the Teachers Service Commission Act.

VCT

Voluntary Counselling and Testing is voluntary HIV testing that involves a process of pre- and post-test counselling, that helps people to know their sero-status and make informed decisions.

Vulnerable learner

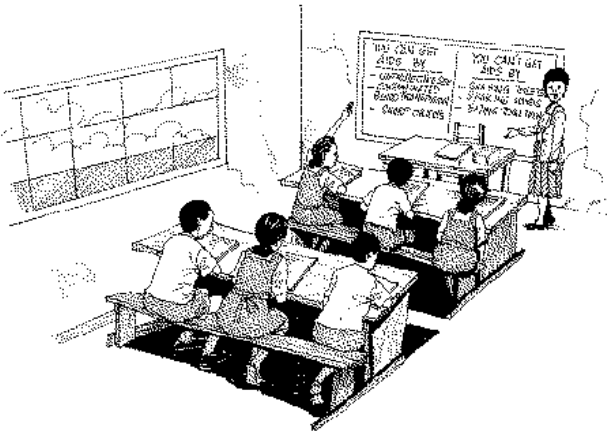
Any person receiving education and training from a learning institution who is susceptible to circumstances that infringe upon the fulfilment of their fundamental human rights.

Workplace

Refers to occupational settings, stations and places where workers spend time for gainful employment.

4. SCOPE OF APPLICATION

The Education Sector Policy on HIV and AIDS applies to learners, employees, managers, employers, and other providers of education and training in all public and private, formal and non-formal learning institutions at all levels of the education system in the Republic of Kenya.



5. PRINCIPLES

The principles that guide this policy are in accordance with international conventions, national laws, policies,

The principles take into consideration gender issues, learners with special needs and recognise the universality of human rights.

guidelines and regulations (listed in Annexure B). In particular, the principles take into

consideration gender issues, learners with special needs and recognise the universality of human rights.

These principles are:

Access to education

Every person has the right to education. No learner will be denied access to education on the basis of his or her actual or perceived HIV status. In particular access to education shall be facilitated for orphans and vulnerable learners.

Access to information

Every person has the right to relevant and factual HIV and AIDS information, knowledge and skills that are appropriate to their age, gender, culture, language and context.

Equality

Every person has the same rights, opportunities and responsibilities and shall be protected from all forms of discrimination, including discrimination based on actual, known or perceived HIV status.

Privacy and confidentiality

Every person has the right to privacy and confidentiality regarding their health, including information related to their HIV status.

No institution or workplace is permitted to require a learner or employee to undergo an HIV test.

Every person has a moral responsibility to protect themselves and others from HIV infection.

No person may disclose information relating to the HIV status of another person, without his or her

consent. In the case of a minor the best interest of the child shall guide decisions concerning disclosure.

Every person has a moral responsibility to protect themselves and others from HIV infection.

Every person has the right to know their HIV status and openness and disclosure are encouraged within a safe, supportive and accepting environment.

Access to care, treatment and support

All infected and affected learners, educators and other personnel in the education sector have the right to access holistic care, treatment and support in line with available resources. The education sector will work in partnership with agencies offering support and care including institutions, communities and private and public health care systems.

Safety in workplace and learning institutions

All workplace and learning institutions have a responsibility to minimise the risk of HIV transmission by taking the appropriate first aid and universal infection control precautions.

Safe workplace and learning institutions

There will be zero tolerance for sexual harassment, abuse and exploitation.

Fair labour practices

Every person, whether infected or affected, has the right to fair labour practices in terms of recruitment, appointment and continued enjoyment of employ-

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.

ment, promotion, training and benefits.

HIV testing as a requirement for any of the above is prohibited.

Gender responsiveness

HIV and AIDS affect and impact on women and men differently due to their biological, socio-cultural and economic circumstances. Application of all aspects of this policy should be responsive to the different needs of men and women, boys and girls.

Involvement of People Living with AIDS (PLWA)

The involvement of PLWA to educate and inform shall be promoted at all levels of the education sector.

Partnerships

While the education sector will be responsible and accountable for implementation of this policy it will at all times seek to develop effective partnerships to enhance the success of its implementation.

6. GOALS

Prevention

An environment in which all learners and education sector personnel are free from HIV infection.

Care and support

An education sector in which care and support is available for all, particularly, orphans, vulnerable children and those with special needs.

HIV and AIDS and the workplace

Non-discriminatory labour practices, terms and conditions of service frameworks are in place that are sensitive and responsive to the impact of HIV and AIDS.

Management of response

Management structures and programmes are in place at all levels of the education sector to ensure and sustain quality education in the context of HIV and AIDS.

7. PREVENTION



7.1. Education on HIV and AIDS

7.1.1. All learning institutions have a responsibility to address HIV and AIDS through education by developing skills and values, and changing attitudes to promote positive behaviours that combat HIV and AIDS.

7.1.2. Curriculum that is sensitive to cultural and religious beliefs and is appropriate to age, gender, language, special needs and context on HIV and AIDS shall form part of the education for all learners at all levels. The content guidelines of this curriculum for primary, secondary and tertiary education are set out in the AIDS education syllabus for schools and colleges. Higher education institutions are encouraged to work towards a common framework.

7.1.3. Life Skills and HIV education shall be mainstreamed into the existing curriculum and co-curricular activities at all levels.

7.1.4. Local communities, religious groups and leaders, parents, caregivers and guardians shall be mobilised to support and ensure success of the HIV and AIDS prevention and control programme within learning institutions and in the home.

7.1.5. Teacher education curriculum (pre-service and in-service) must prepare educators to respond to HIV and AIDS within their own lives and as professionals

Curriculum should be sensitive to cultural and religious beliefs and appropriate to age, gender, language, special needs and context.

to build positive attitudes and skills for HIV and AIDS prevention and control among all their learners.

7.1.6. Relevant and suitable teaching and learning materials for HIV prevention shall be developed for use by all institutions and workplaces.

7.1.7. Learning institutions will create rape and sexual harassment awareness through sensitisation among girls, boys, men and women to enhance safety, protection and prompt action on post-exposure prophylaxis where available.

7.1.8. Co-curricular activities such as clubs, drama groups and sports events are important opportunities for HIV and AIDS education and should be encouraged in learning institutions and education workplaces.

7.2. Access to information on HIV and AIDS

7.2.1. Information provided on HIV and AIDS must be current, accurate, factual and comprehensive and presented in a manner, language and terms that are understandable, acceptable and contribute to positive behaviour change.

7.2.2. Appropriate Information, Education and Communication (IEC) materials and programmes on HIV and AIDS shall be made available to all concerned in the education sector.



7.3. Peer education

7.3.1. All institutions will encourage, support and recognise the role and importance of peer education in the education sector.

7.3.2. All educators and learners must be given the opportunity and be encouraged to develop peer education skills and have access to relevant and appropriate training and materials to support their commitment to peer education at every level.

7.3.3. Linkages shall be created with other governmental institutions, sectors and agencies to promote peer education and the provision of preventive services.

7.4. Duties and responsibilities

7.4.1. All education institutions shall ensure effective mainstreaming of teaching and learning about HIV and AIDS.

All educators and learners must be given the opportunity and be encouraged to develop peer education skills.

7.4.2. Heads of institutions will enforce existing codes and/or rules of conduct, institutional

rules, professional ethics, regulations and disciplinary measures, with respect to protecting learners and staff from HIV infection and ensuring the rights of infected and affected persons.

7.4.3. Educators, sector managers, employers, employees, learners and parents have a responsibility to ensure that sexual abuse, violence, harassment, discrimination and stigmatisation are not tolerated.

7.4.4. The ultimate responsibility for the behaviour of minor learners rests with their parents, guardians or care-givers in partnership with the education sector.

7.4.5. Educators, sector managers, employers, employees, learners and parents should take an active role in acquiring up-to-date, accurate knowledge and skills on HIV and AIDS.

7.4.6. All heads of education institutions will ensure that appropriate supervisory systems and measures are in place to ensure a safe teaching and learning environment, with particular attention to hostels and other accommodation.

7.4.7. The heads of higher education institutions and sector managers should encourage and promote the use of Voluntary Counselling and Testing (VCT) and other HIV and AIDS services.

8. CARE AND SUPPORT

8.1. Scope

8.1.1. Care and support in the educational setting will involve establishing mechanisms to address the psycho-social, physical, emotional, educational and spiritual needs of affected and infected individuals, especially orphans, vulnerable children (OVC) and learners with special needs.

8.1.2. Educators, managers, employers, employees, learners, parents and stakeholders have a particular duty to ensure that the rights and dignity of all affected or infected persons are respected.



8.2. Access to health services

8.2.1. The education sector will establish partnerships with other line ministries and service organisations in order to facilitate access to treatment and related services for employees and learners. Where health

Institutions will seek to mobilise additional resources in support of these services from the relevant line ministries.

services are available within the learning institution, services will be provided to all learners

and employees. Institutions will seek to mobilise additional resources in support of these services from the relevant line ministries.

8.2.2. All learning institutions and workplaces shall facilitate access to information on health, as well as when and where employees and learners should seek treatment promptly for sexually-transmitted infections, tuberculosis and other opportunistic infections.

8.2.3. All learning and training institutions and workplaces shall promote the role of nutrition and food

security for positive living. When the need arises they shall facilitate access to nutrition and feeding programmes, and promote feeding programmes, at the learning place, workplace and in the home.

8.2.4. All educational institutions must have adequate first aid kits available. Educators, other institutional employees and learners shall be trained to safely manage bleeding or injuries and apply the universal precautions (as set out in Annexure C).

8.3. Psycho-social support

8.3.1. Learning institutions and workplaces shall create an enabling environment free of stigma and discrimination. Where possible, the learning institution and workplace shall put in place an on-going professional counselling process for the infected and affected or referral to a professional service.

8.3.2. Heads of educational institutions and managers shall facilitate access to support and counselling services. Where possible, the learning institution and workplace are encouraged to establish effective support and counselling services.

8.4. Community mobilisation

8.4.1. Educational institutions are encouraged to mobilise communities for material and moral support, and to seek funds and technical support from development partners, civil society and private sector for the management of HIV and AIDS for the infected and affected.

8.4.2. Educational institutions are encouraged to create a regular forum with management bodies of institutions to mobilise resources, monitor, evaluate the impacts of interventions and address the challenges, in collaboration with the ministry of education.

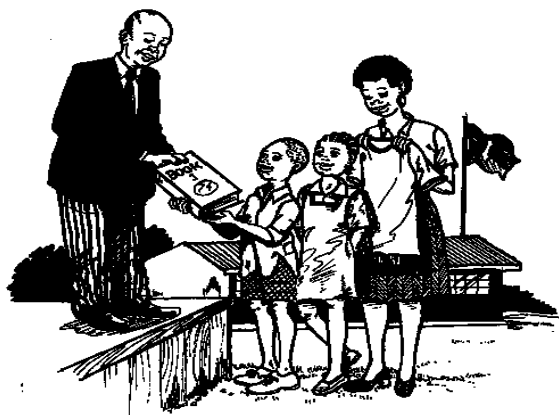
8.5. Orphans and Vulnerable Children (OVC)

8.5.1. The sector and its institutions are expected, as much as possible, to assist learners who are ill,

Where possible, institutions and centres, workplaces are encouraged to establish effective support and counselling services.

OVC or learners with special needs so that they are able to continue with their education.

8.5.2. All learning institutions have the responsibility to identify and assess learners with special needs and to identify resources that can support them and develop mechanisms to address those needs.



8.5.3. Learning institutions should be flexible in their programmes, wherever possible to accommodate the needs of children who are infected, affected, vulnerable or with special needs.

8.5.4. It is important that learning institutions take the lead in creating an enabling and gender-responsive environment that caters for the physical and emotional needs of OVC so that they can perform and achieve to the best of their abilities.

8.5.5. Early childhood care and education should reach out to young OVC and those with special needs in the community and make special efforts to compensate for any

It is important that learning institutions take the lead in creating an enabling and gender responsive environment.

lack of care and support they may experience in their home environment. Sensitisation and capacity building of communities should help to contribute to collective community support for the provision of early childhood care and education to OVC and those with special needs.

8.5.6. Primary schools shall give special attention to factors that affect the performance of OVC and learners with special needs, and find ways to assist them. They will also provide a means to track the transition of successful OVC primary school leavers to an appropriate next level of education or training. Heads

of institutions and managers are to ensure that girls are particularly encouraged to complete their education.

8.5.7. Non-formal programmes including those for out-of-school youth should address the educational needs of OVC and learners with special needs, including life skills and HIV and AIDS education.

8.6. Financial support

8.6.1. Bursary schemes must incorporate provision to adequately cover the educational needs of deserving affected, infected and other vulnerable learners and those with special needs.

8.6.2. In collaboration with institutions, the Higher Education Loans Board (HELB) will put in place mechanisms to identify vulnerable students for prioritised financial support in the higher education sector. The ministry of education will consider similar needs related to post secondary and teacher training institutions.

8.6.3. All learning institutions are encouraged to mobilise resources from other sectors, civil society and the private sector to support bursaries for deserving learners.

Compulsory HIV testing for any bursary applicants in the education sector is prohibited.

8.6.4. Compulsory HIV testing for any bursary applicants in the education sector is prohibited.



9. HIV AND AIDS AND THE WORKPLACE

9.1. Non-discrimination

9.1.1. All education sector educators, managers, administrators, support staff and other employees living with HIV and AIDS have the same rights and obligations as all other non-infected education sector employees.

9.1.2. All education sector educators, managers, administrators, support staff, employees and job applicants living with HIV and AIDS shall not be discriminated against in access to or continued employment, training, promotion or employee benefits on the basis of their HIV status. They shall be protected against discrimination as well as stigmatisation by their employer, fellow employees, learners, parents, managers and communities.

9.2. HIV testing and confidentiality

9.2.1. There shall be no compulsory HIV testing in the workplace as a requirement for appointment or continued service. Voluntary testing for HIV at the request of an employee should be done:

- by a suitably qualified person in a suitable facility;
- with the employee's informed consent;
- in accordance with normal medical ethical rules including confidentiality; and
- with pre- and post-test counselling.

9.2.2. Employees living with HIV and AIDS have the right to confidentiality about their HIV status in any aspect of their employment. Disclosure of an employee's HIV status without his/her informed consent shall constitute misconduct. Disciplinary steps, consistent with relevant legislation and regulations, will be taken

An employee is under no obligation to disclose his/her HIV status to their employer.

against any education employee who discloses a fellow employee's

status without consent. An employee is under no obligation to disclose his/her HIV status to the employer.

9.2.3. Voluntary disclosure by education sector educators, managers, administrators, support staff and other employees of their HIV status will be encouraged, within a supportive environment in which the confidentiality of this information is protected and

in which unfair discrimination on the basis of HIV and AIDS is not tolerated.

9.2.4. Education institutions shall encourage formation of PLWA clubs and post-test clubs as support groups for the affected and infected.

9.3. HIV/AIDS information, prevention and support programmes for employees

9.3.1. Heads of all education sector workplaces shall ensure that the contents of this policy are communicated to all employees and that they have access to copies of the policy.

9.3.2. Heads of all education sector workplaces shall ensure that all categories of employees are provided with appropriate HIV and AIDS education and prevention programmes without delay. These programmes shall be designed and implemented in consultation with all levels and categories of employees. Programmes should include:



- Basic information about HIV and AIDS, how it is spread and how it can be prevented.

- Promotion of positive living by people with HIV and AIDS.
- Promotion of non-discriminatory, supportive and sensitive attitudes towards people living with HIV and AIDS.

Information on sexuality and safer sexual practices

- Information on sexuality and safer sexual practices.

- Information on rights

and services available in the workplace to employees living with HIV and AIDS, including employee benefits, counselling and any other support.

- Adequate information and contacts with HIV and AIDS services and organisations that can provide further support to employees that are infected or affected.
- Information on universal precautions to prevent accidental HIV infection (see Annexure C) as well as provision of materials to implement these precautions.

9.3.3. Heads of all education institutions will establish and maintain communication channels to enable employees to raise concerns and grievances and access support concerning HIV and AIDS.

9.4. Refusal to study or work with, teach or be taught by persons living with HIV and AIDS, or other discriminatory and disruptive practices

9.4.1. Learners will not refuse to study with fellow

learners or to be taught by an education sector employee on the grounds that they are living with, or perceived to be living with HIV or AIDS. Similarly, educators, managers, administrators, support staff or other employees shall not refuse to teach or interact with learners or colleagues on the grounds that they are living with, or perceived to be living, with HIV or AIDS.

9.4.2. Accurate, relevant and understandable information on HIV and AIDS should be provided to all learners, parents, care-givers and employees to create positive attitudes towards persons living with HIV and AIDS, and to avoid problems of refusal.

9.5. Ill-health and absenteeism

9.5.1. The education sector and institutions will actively promote all feasible means to maintain the health and performance of employees living with HIV and AIDS.

If employees are unable to continue their normal duties on medical grounds, the normal rules regarding incapacity will apply.

9.5.2. Employees with HIV and AIDS shall continue with work as long as they are medical-

ly fit to perform their duties. If employees are unable to continue their normal duties on medical grounds, the normal rules regarding incapacity will apply.

9.5.3. To reduce the negative effects of illness and incapacity on staff members and education delivery, the sector will:

- take steps to improve access of staff to medical care;
- develop efficient systems for relief staff;
- take steps to improve retirement benefits and ensure more efficient processing of applications; and
- monitor and assess sick leave provisions and adapt them, where necessary.

9.5.4. General provisions relating to compassionate leave and funeral attendance will apply to all educa-

Where teaching time is lost due to funeral attendance, an institution must make arrangements for learners to catch up.

tion sector staff that is affected by HIV and AIDS. The education sector and institutions will monitor and review

provisions where necessary to balance the interests of staff and education delivery. In general, where teaching time is lost due to funeral attendance, an institution must make arrangements for learners to catch up, in accordance with staff regulations.

9.5.5. Different demands on women affected by HIV and AIDS shall be taken into account in policy and management decisions on compassionate leave.



9.6. Recruitment, deployment and staff balance

9.6.1. The education sector and institutions will review current policies, codes and practice for recruitment and deployment of staff. In particular, the ministry of education and institutions will:

- ensure that partners and spouses are not separated unnecessarily;
- promote effective succession and succession planning for managers and other staff;
- assist the redeployment of staff who need access to family or medical care; and
- improve teacher provisioning systems to avoid loss of teaching time.

9.7. Exposure at the workplace

9.7.1. An education sector employee who accidentally contracts HIV in the course and scope of his/her

employment shall be entitled to immediate post-exposure prophylaxis and follow-up in the form of compensation according to the prevailing law.

9.8. Responsibility and accountability

9.8.1. All heads of education institutions and workplaces are responsible and accountable for:
a) implementing this policy; b) appropriate HIV and AIDS programmes; and c) practices in the

They will take immediate and appropriate corrective action when provisions of policy are violated.

workplaces under their control. They shall take immediate and appropriate corrective action

when provisions of policy are violated.

9.8.2. It will be the responsibility of all heads of workplaces to lend visible support to programmes and attend HIV and AIDS workplace activities.

9.8.3. All education sector employees will be held responsible and accountable for complying with the HIV and AIDS workplace policy and will be required to attend, lend support to and participate in HIV and AIDS activities.

10. MANAGING THE RESPONSE

10.1. Role of the Aids Control Units and other leadership

10.1.1. HIV and AIDS is a serious problem in the education sector and it requires an appropriately high level, full-time commitment of management

resources, particularly at national level. The education sector commits itself to establishing well-staffed, strong and sustainable ACUs at all levels of the education and training system.

10.1.2. Leadership is critical to the success of responses to HIV and AIDS. As the apex body in the education sector responsible for HIV and AIDS programmes, the ministry of education's ACU will be responsible for the coordination of the planning, management and implementation of policy and programmes at national level.

Other managers, administrators and leadership at national, provincial, district and institutional levels will support the ACU.

10.1.3. Other managers, administrators and leadership at national, provincial, district and

institutional levels will support the ministry of education's ACU and actively support responses in their areas of responsibility.

10.1.4. Other ACUs at all levels of the system need to be accountable and responsive to the needs of learners, employees, employers, stakeholders and other staff in the sector.

10.2. Planning

10.2.1. The Education Sector Strategic Plan will encompass the activities of ACUs at all levels of the education sector.

10.2.2. The ministry of education will be expected to plan for and mobilise resources from within the country and from external sources to support the HIV and AIDS within the education strategic plan.

10.2.3. The education sector will also mobilise and advocate for adequate resources in areas such as pensions, care, relief systems or other interventions

The education sector will also mobilise and advocate for adequate resources

that protect the ability to deliver quality, accessible education.

10.2.4. The ministry of education's ACU will coordinate resource planning and budgeting and liaise with other sectoral partners to develop a shared strategy aimed at preventing the spread of the epidemic and mitigating its impacts on the education sector.

10.2.5. Management structures at all levels must be capable of planning, developing and co-ordinating partnerships and interventions within and outside of government.

10.2.6. Resource utilisation at all levels will be carefully prioritised to ensure that interventions in the sector have maximum impact and are sustainable.

10.3. Human resource training and development

10.3.1. As part of the HIV and AIDS response, the ministry of education will be expected to liaise with other ministries and organisations in human resource planning across the sector to sustain education delivery.

10.3.2. Each education sub-sector will ensure adequate monitoring and planning so that there is an efficient, adequate supply of appropriately skilled teachers and lecturers to meet needs for education. This should consider attrition due to HIV and AIDS and other factors, and expected numbers of learners.

10.3.3. In- and pre-service training of teachers and other educators will be required to give them the skills to protect themselves from infection, to implement the HIV and AIDS curriculum, and to deal with the effects of HIV and AIDS in the sector in a positive, effective way.

10.3.4. The education sector will ensure adequate structures, staffing and continuity of staffing for HIV and AIDS-related functions.

10.3.5. Each education sub-sector will take the strongest measures to ensure appropriate recognition of HIV and AIDS-related training and develop career paths that encourage staff to work and remain in HIV and AIDS related fields.

The education sector will ensure adequate structures, staffing and continuity of staffing for HIV and AIDS related functions.

10.3.6. The sector and its partner institutions will explore creative options, such as distance learning, information and communication technologies (ICT) and other techniques, to:

- increase quality of HIV and AIDS education;

- maintain the quality of education when teachers and other educators are absent or suitable substitutes are not readily available; and
- increase efficiency of teacher and educator training.

10.3.7. All training in the sector shall be in line with the objectives of the education sector policy on HIV and AIDS. This training must be accredited by a recognised education and training institution or based on standards set by Government of Kenya. Where

All training in the sector shall be in line with the objectives of the education sector policy on HIV and AIDS.

this is not feasible or efficient, a nominated body of institutional heads, together with the

ministry of education's ACU, will be responsible for ensuring appropriate standards.

10.3.8. HIV and AIDS training will be appropriately adapted to the needs of all learners and staff in the sector. Cost-effective and flexible strategies, such as networking and peer education, should be enhanced and promoted as widely as possible.

10.3.9. The co-ordination of all the training programmes in the various sub-sectors will be the responsibility of the ministry of education's ACU and must aim at more effective coverage of the sector and targeted at areas of highest need.

10.4. Partnerships

10.4.1. The ministry of education will make a deliberate and systematic effort to form, manage and sustain partnerships for the benefit of the education and training sector from within and outside the sector, and develop a management information system to monitor and coordinate partnership agreements and activity.

10.4.2. In order to promote joint planning, the ministry of education will establish and convene a consultative forum that will meet on a regular basis to monitor implementation of partnership agreements, strengthen co-ordination and share information. Relevant ministries, the Public Service Commission, semi-autonomous government agencies, civil society, the private sector and development partners are expected to participate actively in the consultative forum.

10.4.3. The ministry of education will strive towards creating an environment and working practices that

Partnership resources will need to be carefully managed.

are transparent, accountable and efficient in the handling of partnership

agreements. Partnership resources will need to be carefully managed to ensure that the sector is adequately covered and that the most vulnerable groups are targeted.

10.5. Research

10.5.1. Special attention will be given to research on levels of HIV prevalence, levels of orphan hood and vulnerability, access to education, the quality of education, the effectiveness of prevention programmes, impacts on the workplace and differential impacts on gender. Examples of good practice will be

highlighted and replicated within the education and training sector.

Examples of good practice will be highlighted and replicated within the education and training sector.

10.5.2. Universities and other institutions of higher learning should be encouraged to undertake basic, preventive and curative research or enter into local or international consortiums or partnerships for this purpose.

10.5.3. All education sub-sectors will be required to provide the data necessary for the development of a consolidated and accessible information system to support, inform and coordinate sector HIV and AIDS planning, resource allocation and management.

10.5.4. All external research and other organisations wishing to undertake HIV and AIDS related research in the sector will be encouraged to undertake authorised research and provide copies of their findings for incorporation into the central information system to reduce duplication and enhance sector knowledge.

10.6. Monitoring and evaluation

10.6.1. Management at all levels of the sector must integrate strategies and mechanisms for monitoring and evaluating the quality of programmes, the responses to interventions and the efficiency of resource utilisation in the sector, as well as using this information for planning and management.

10.6.2. The ministry of education's ACU will plan and develop a monitoring and evaluation framework that is feasible and relevant in the education sector and consistent with international good practice. Special attention will be given to establishing and strengthening Education Management Information System (EMIS) capacity within the ministry and at province, district, sub-sector and institutional levels, and to identifying HIV and AIDS-sensitive data and indicators.

This will be used to identify vulnerabilities of the system and inform planning.

10.6.3. The ministry of education and each of its sub-sectors will endeavour to have adequate resources to make monitoring and evaluation successful. Monitoring and evaluation systems will monitor impacts such as illness, absenteeism and deaths (of learners and staff), as well as effects in areas such as quality of learning and teacher balance. This will be used to identify vulnerabilities of the system and inform planning.

10.6.4. The ministry of education and each education sub-sector shall make resources available to ensure that monitoring and evaluation activities are successful.

10.7. Advocacy

10.7.1. The ministry of education will ensure that managers and stakeholders in the education sector are knowledgeable and informed of the content of the Education Sector Policy on HIV and AIDS and committed to its dissemination.

10.7.2. The education sector and its sub-sectors will develop specific advocacy strategies to support implementation of this education policy.

10.7.3. Government departments, development partners, civil society and private sector are called upon to support the education sector's efforts in advocacy.

Government departments, development partners, civil society and private sector are called upon to support the sector's efforts in advocacy and implementation of this education policy.

10.8. Further policy development and review

10.8.1. This policy will be reviewed from time to time to ensure that it remains relevant to the needs of the sector.

10.8.2. All education sub-sectors are expected to develop their own specific policies on HIV/AIDS that are consistent with this sectoral policy.

11. ANNEXURES

A. Details of the “Scope of the Education Sector”

The Education Sector Policy on HIV and AIDS applies to learners, employees, managers, employers, and other providers of education and training in all public and private, formal and non-formal learning institutions at all levels of the education system in the Republic of Kenya. By definition, this includes the following levels, phases and sectors:

.....
Early childhood care and education

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Primary education

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Special needs education

.....
Secondary education

.....
Technical and vocational education and training

.....
Adult and continuing education

.....
Higher education

.....
Non-formal education

.....
Skills training for out-of-school youth

It will also apply to the semi-autonomous government agencies and all other stakeholders in the provision of education, including: Teachers Service Commission (TSC).

B. Reference of international conventions, national laws, policies, guidelines and regulations

- Constitution of the Republic of Kenya
- Bill of Rights
- Education Act
- Teachers Service Commission Act and code of regulations
- National Examination Council Act
- Sessional Paper No. 4 on AIDS in Kenya (1997)
- National programme guidelines on orphans and other children made vulnerable by HIV/AIDS (2003)
- Report on the Taskforce on Legal Issues relating to HIV/AIDS (2003).
- National Guidelines for Voluntary Counselling and Testing 2001, also on Home-based Care and ARVs
- National policy on condoms
- The Children's Act
- Kenya National HIV/AIDS Strategic Plan 2000-2005
- Mainstreaming gender into the Kenya National Strategic Plan 2000-2005, among others.
- International conventions, including Convention on the Elimination of Discrimination Against Women (CEDAW)

- ILO Code of Practice on HIV/AIDS
- Federation of Kenya Employers policy documents

C. Universal infection control precautions

1. Blood, especially in large spills such as from nosebleeds, and old blood or bloodstains, should 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

All bleeding wounds, sores, breaks in the skin, grazes and open skin lesions should ideally be cleaned.

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 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 of 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 tap 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 to it.

5. All persons should wear protective latex gloves or unbroken plastic bags over their hands when attending to blood spills, open wounds, sores, breaks in the skin, grazes, open skin lesions, body fluids and excretions. Doing this will effectively

Bleeding can be managed by compression with material that will absorb the blood.

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 disposable cloths. The person doing the cleaning must wear protective gloves or plastic bags over their hands.

7. 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 re-using.
9. Needles and syringes should be safely disposed of and not re-used.

Recommended content of First Aid Kits:

- Two large and two medium pairs of disposable latex gloves.
- 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.
- Scissors.
- Cotton wool.
- Gauze tape.

- 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:

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.

