Namibia National Teachers Union HIV and AIDS Workplace Policy
HIV and AIDS Workplace Policy

Namibia National Teachers Union
Foreword

Namibia is regarded as one of the countries with the highest prevalence rate of HIV and AIDS in the world. Given this high prevalence rate, the impact of HIV and AIDS is felt in every aspect of life and it affects all sectors of society. The time has passed when HIV and AIDS has been perceived as merely a health issue. It has now been recognized as a social, economic and political issue.

One of the sectors which is not immune from the impact of HIV and AIDS is the education sector. It affects the sector in three important ways, namely changing the demand for education, the supply of education and the quality of education. The loss of skilled and qualified teachers, together with the entry into the labor market of unqualified and poorly trained teachers, may lower both the standard and the skill level.

It is against this background that NANTU as a caring social movement has taken the first step in taking advantage of its strategic positioning to deal with HIV and AIDS. NANTU is strategically position as it carries a torch of enlightenment which is education. Since education is a tool of social transformation, NANTU has role to play in empowering the members, employees and the nation at large to deal with HIV and AIDS better.

This can only possible if it is carried in a coordinated and fascinated manner. Therefore, the organisation has initiated a process of policy development of HIV and AIDS to serve as guiding document of the organisation in its expedition to deal with HIV and AIDS.

The policy serve a dual purpose; that of guidance and also offering protection to members and employees against victimization on the basis of their real or perceived HIV status.

As a result, it is an honor and very progressive for us as a teachers union that once again, we are able to look at more fundamental issues which has potential to threaten our very existence no matter how far-fetch and vague may appear.

In conclusion, may we put this policy to good use to the best of our abilities.

Once again, we “Educate to Liberate” and we shall “Educate to Liberate Our Nation from HIV and AIDS”

Basilius G.M. Haingura
Secretary General
NANTU
## Table of Contents

1. Introduction .................................................. 6
2. Goals of the Policy .............................................. 6
3. Policy Objectives .............................................. 7
4. Scope of the Policy ........................................... 7
5. Promoting a non-discriminatory Working Environment .... 7
6. Recruitment and Selection .................................... 8
7. Workplace Testing ............................................. 8
8. Confidentiality and Disclosure ................................. 8
9. Screening ....................................................... 9
10. Management of Employees and Members Living with HIV and AIDS ........................................... 9
11. Protection Against Victimization .............................. 9
12. Grievance Handling ........................................... 10
13. Promoting a Safe Working Environment ..................... 10
14. Workplace HIV and AIDS Program .......................... 10
15. Implementation of the Policy .................................. 11
16. HIV and AIDS Gender Mainstreaming ....................... 12
17. Greater Involvement of Members and Employees LWHA ........................................... 12
18. Budget ....................................................... 12
19. Communication Between NANTU, Ministry of Education, Civil Society and the Private Sector ........................................... 12
20. Policy Review .................................................. 13
21. Monitoring and Evaluation .................................... 13
22. Annexure A: Universal Precautions .......................... 14
23. Annexure B: Glossaries ....................................... 16
Accronyms and Abbreviations

AIDS — Acquired Immune Deficiency Syndrome
HIV — Human Immunodeficiency Virus
NANTU — Namibia National Teachers Union
VCT — Voluntarily Counseling and Testing
1. Introduction

The Namibia National Teachers Union herein referred to as (NANTU) recognizes that HIV and AIDS is not only a health issue but developmental issues that affect all sectors of society with complex social and economic implications. NANTU being the core stakeholder of education sector which employs approximately 38,000 staff members need to be proactive. Even though NANTU is a small entity in the global village, it can’t sit back and watch as HIV and AIDS gains an upper hand in reversing the economic and social development of the country. According to the sero-sentinel survey of 19.9% in 2006, NANTU needs to be proactive in the fight against HIV and AIDS.

The impact of HIV and AIDS is multi-facet, affecting people in their most productive years of life, its leads to reduced earnings, as well as increasing care demands, higher expenditures on health care and premature death.

HIV and AIDS affects the education sector in three important ways, namely changing the demand for education, the supply of education and the quality of education. The loss of skilled and qualified teachers, together with the entry into the labor market of unqualified and poorly trained teachers, may lower both the standard and the skill level.

At the economic level, the consumer market is reduced, leading to a drop in resources available for production and investment. This would also lead to reduced consumer demand, resources and investment possibilities directly affect economic growth.

NANTU is also cognizant of the fact that HIV and AIDS will continue to impact negatively on NANTU members, employees and their families and on the greater well being and development of Namibian society.

According to the 2006 National HIV sentinel survey, Namibia has an HIV prevalence rate of 19.9% thus calling for all sectors, including NANTU as the main player in education sector (which is social transformation tool), to mainstream HIV and AIDS into all strategies and programs to address and mitigate the impact of HIV and AIDS in society.

2. Goals of the Policy

• Seeks to provide a supportive environment to minimize the social, economic and developmental consequences of HIV and AIDS on the NANTU members and employees,

• Is committed to addressing HIV and AIDS in a positive, supportive and non-discriminatory manner so that people infected and affected by HIV and AIDS continue to enjoy equal rights through respect and protection.
3. Policy Objectives

The objectives of this policy are to:

3.1. Demonstrates NANTU leadership commitment to mitigating the impact of HIV and AIDS.

3.2. Provides clarity about NANTU position on HIV and AIDS in the workplace as well as on the rights and responsibilities of NANTU as an membership based organisation and an employer on the one hand and that of members and employees in the context of HIV and AIDS on the other.

3.3. Ensure compliance with all applicable legislation.

3.4. Provide a framework for the design and implementation of an HIV and AIDS workplace program in NANTU that:

3.4.1. Promotes a non-discriminatory working environment in which people living with HIV and AIDS are free from victimization and able to be open about their HIV status without fear of stigma or discrimination;

3.4.2. Provides access to appropriate HIV and AIDS information and education programs for members, employees and their families;

3.4.3. Provides or cause government to provides affordable access to appropriate disease management, care, support and treatment for members or employees living with HIV and AIDS; and

3.4.4. Strikes a balance between the rights and responsibilities of NANTU as an employer on one hand and its members and employees on another.

4. Scope of the Policy

Subject to the provisions of the Labor Act (Act No. 11 of 2007) this policy will apply to all:

- Employees and prospective employees of the Namibia National Teachers Union.
- All categories of NANTU membership.

5. Promoting a non-discriminatory working environment

5.1. NANTU recognizes that stigma and discrimination leveled at people living with HIV and AIDS is one of the most significant barriers to effectively addressing HIV and AIDS.

5.2. NANTU is accordingly committed to ensuring that there will be no direct or indirect unfair discrimination against any of its members, employees, or job applicants for employment on the basis of their HIV status. Members or employees who are living with HIV and AIDS will not be victimized or unfairly discriminated against in respect of Pension/Retirement/Provident funds; medical benefit funds; stated benefits or sick leave; continued employment, training and promotion.
6. **Recruitment and Selection**

6.1 NANTU recognizes that the criterion for employment from a health perspective is physical and mental fitness to perform the duties for which the person is to be employed.

6.2 The organisation may require applicants for employment to undergo pre-employment medical examinations to ensure that any applicant is physically able to perform the duties.

6.3. But such examination shall not however include an HIV test and no applicant shall be denied employment on the basis of HIV status.

7. **Workplace testing**

7.1. No member or employee shall be subjected to mandatory HIV and AIDS testing.

7.2. NANTU shall however promote voluntary counseling and testing for its members or employees.

7.3. Voluntary counseling and testing for HIV on the request of the member or employee should be done by a suitably qualified person in a conducive environment with informed consent of the employee in accordance with normal medical, ethical rules and with pre-and post test counseling.

8. **Confidentiality and Disclosure**

8.1. Members or employees living with HIV and AIDS have the legal right to confidentiality about their HIV status in all aspects which bind them to the organisation.

8.2. A Member or employee is under no obligation to inform NANTU of her/his HIV status.

8.3. Confidentiality regarding all medical information relating to a member, employee, or prospective employee shall be maintained, unless disclosure is legally required. This applies to all personnel who obtain such information in ways permitted by NANTU, by law, or from the member or employee concerned.

8.4. Information held by the executive at any level or any member or employee of NANTU regarding the HIV status of a member or employee shall not be disclosed to any person without the member or employee written informed consent. To disclose the HIV status of a member or employee to any other person without his or her written informed consent shall constitute a disciplinary offence.

8.5. NANTU will endeavor to create an environment where members and employees feel at ease to voluntarily disclose their status in order to enable executive to render such assistance to allow the members or employee to continue working for as long as they are medically fit to do so.

8.6. Should a member or employee choose to disclose his or her HIV status, this information shall be treated as confidential and shall not be disclosed to any other person without the written, informed consent of the member or employee concerned.
9. Screening

9.1. Should it be necessary to conduct HIV screening to gather epidemiological data on the prevalence of HIV in the workplace and education sector as a whole by NANTU or government or wherever appropriate,
9.2. Such screening shall be undertaken on an:
   • Anonymous, confidential and private basis and,
   • Only after consultation with members or employees and,
   • Only with the full informed consent of the employees or members concerned.
9.3. Such testing should be carried out with the provision of both pre-and post-test counseling.

10. Management of members and employees living with HIV and AIDS

10.1. Membership shall not be terminated or employees dismissed simply because he or she is HIV positive.
10.2. Members or employees (in case of government) HIV status shall not have any bearing on selection for retrenchment.
10.3. Members or employees who are living with HIV and AIDS shall continue to work under normal conditions in their current employment as long as they are medically fit to do so.
10.4. The same principles that govern other chronic medical conditions shall apply to HIV and AIDS in dealing with:
   • Training and promotion
   • Sickness and absenteeism
   • Transfer to suitable alternative positions
   • Incapacity
10.5. Should a member or employee become too ill to perform his or her assigned duties, NANTU shall investigate the extent of the incapacity and accommodate the member or employee in an alternative position in so far as is reasonably possible.
10.6. Should such accommodation not be reasonably possible, the member’s position or employee service may be terminated on grounds of medical incapacity, in which event the appropriate Pension Fund rules governing ill health retirement will apply when appropriate.
10.7. NANTU shall, as far as reasonably possible, facilitate access through NANTU or government medical aid scheme to affordable treatment for HIV and AIDS, including anti-retroviral for all members or employees who need it.

11. Protection against Victimization

11.1. Employees or members living with or affected by or believed to be living with or affected by HIV and AIDS shall be protected from stigmatization and discrimination.
11.2. No employee or member shall be allowed to victimize or harass or to behave in an abusive or offensive manner towards a co-employee or member who is living with or perceived to be living with HIV and AIDS.

12. Grievance Handling

12.1. Any employee or member who feels that he or she has been discriminated against on the basis of his or her HIV status shall be entitled to raise their grievance by way of standard grievance procedures.
12.2. NANTU shall ensure that available grievance procedures are designed in such a way as to adequately protect the confidentiality of the employee or member lodging the grievance and personnel dealing with HIV related grievances shall protect the confidentiality of the aggrieved employee’s or member HIV status.

13. Promoting a safe working environment

13.1. NANTU shall provide, maintain and urge government, as far as is reasonably possible, a safe working environment and to minimizing the risk of HIV infection in the workplace.
13.2. The risk of HIV transmission within the organisation setting is minimal. However, occupational accidents involving bodily fluids may occur. Should such accidents occur, the universal precautions outlined in Annexure A should be adhered to. NANTU shall provide its members or employees with adequate information in the use and application of universal precautions as well as with access to the equipment necessary to practice these precautions.
13.3. In the event of accidental exposure by an employee to HIV in the course and scope of employment, NANTU shall provide such employee with access to short term antiretroviral prophylaxis, the cost of which will be borne by the NANTU.
13.4. NANTU shall encourage all members and employees to be part of the medical aid scheme where possible.

14. Workplace HIV and AIDS Program

14.1. In consultation with key stakeholders in the workplace, NANTU shall design and implement, without delay, appropriate HIV and AIDS prevention, care, support and treatment program for the workplace in consultation with and aimed at all levels and categories of members and employees which shall include:
14.1.1. Basic information about HIV and AIDS, how it is spread and how it can be prevented;
14.1.2. The promotion of non-discriminatory, supportive and sensitive attitudes towards people living with HIV and AIDS;
14.1.3. Information on the rights and services, including counseling, care, support and treatment, available to members and employees living with or affected by HIV and AIDS;
14.1.4. Information on male and female condom use and other safer sexual practices and the provision of male and female condoms in the workplace; and
14.1.5. Information on the precautions necessary for attending to injured and bleeding personnel and the provision of accessible disposable gloves, aprons and bleach at strategic places in the workplace.

14.2. Administer, monitor and evaluate the impacts of HIV and AIDS and STI’s programs in the workplace and amongst members, the training of key personnel and members about HIV and AIDS and STI’s as well as the proper management of members and employees affected by the disease.

14.3. Ensure that sufficient resources, both human and financial, are made available to deal with HIV and AIDS and STI’s issues amongst members and in the workplace.

14.4. HIV and AIDS focal person shall advise the executive regarding program implementation and progress.

14.5. Liaise with the Ministry of Education and relevant stakeholders such as AIDS Service organizations, community based organization, home based care organizations, central government, the insurance industry and medical aid providers to explore means of making a broader range of services and support available to members and employees living with or affected by HIV and AIDS.

15. Implementation of the Policy

15.1. The Secretary General, Deputy Secretary General and National Teacher Council shall be responsible for the implementation of this Policy, ensuring compliance with and knowledge about its provisions and for taking immediate and appropriate corrective action whenever a provision of the policy is not complied with.

15.2. An HIV and AIDS Focal Person within NANTU shall coordinate HIV and AIDS programs and activities within the NANTU and the whole institution.

15.3. All members and employees shall be held responsible and accountable for complying with this policy.

15.4. HIV and AIDS capacity building and training programs shall take place during working hours and all employees and respective members will be obliged to attend and participate in such programs whenever possible.

15.5. The Executive shall open and maintain appropriate communication channels to enable members and employees to raise concerns and grievances concerning HIV and AIDS and STIs. The Executive is encouraged to participate actively in HIV and AIDS programs and to lend visible support to these programs.
16. HIV and AIDS Gender Mainstreaming

16.1. NANTU commits itself to integrating an understanding of the HIV and AIDS epidemic in all planning processes. In particular, NANTU commits itself to mainstreaming HIV and AIDS into all aspects of the work of the organisation such as the organisation governance structure, programs, policies and projects to ensure that HIV and AIDS responses become part and parcel of all mandates and functions of the NANTU.

16.2. NANTU recognises that HIV and AIDS impact on men and women differently with the latter group being adversely affected by the epidemic due to biological, socio-cultural and economic reasons. As a result, the application of this policy is designed to take account of these unequal gender relations and enable all members and employees to successfully avoid risks related to the spread of HIV infection and to cope with the impact of HIV and AIDS.

17. Greater Involvement of Members and Employees Living With HIV and AIDS

17.1. NANTU shall allow and encourage People Living with HIV and AIDS to use their experience in living with HIV to have an impact on the design and implementation of responses to the epidemic through a variety of roles at different levels.

17.2. NANTU shall ensure greater involvement of members and employees living with HIV and AIDS at all levels, including speaking and educating, committee membership, policy development, planning, decision making and implementation.

18. Budget

18.1. NANTU shall commit itself to making adequate provision in its budget for the effective implementation of all aspects of HIV and AIDS and STI’s programs.

19. Communication between NANTU, Ministry of Education, Civil Society and the Private sector

NANTU shall commit itself to:
Promoting the establishment of effective partnerships with relevant stakeholders such as AIDS Service Organisation, non-governmental and community based organizations to share experiences and knowledge in effectively and appropriately responding to HIV and AIDS in the workplace and to solicit the assistance of such other organizations in developing and implementing appropriate programs.
20. Policy review

This policy will be reviewed on a regular basis to take account of the progression of the epidemic, developments in medical care, experience in managing it in the workplace and its impact on members and employees.

21. Monitoring and Evaluation of the HIV and AIDS workplace program

21.1. The impact of HIV and AIDS as well as the effectiveness of the HIV and AIDS workplace programs in NANTU will be regularly monitored and evaluated to ensure that the program is appropriate and effective.

21.2. Quantitative and qualitative indicators, based on national HIV and AIDS indicators, will be measured, and appropriate remedial action will be implemented where necessary.

21.3. Indicators in respect of impact of HIV and AIDS in the workplace include:
• Absenteeism due to illness and compassionate leave
• Ill-health retirements
• Deaths in service
• Number of people treated for tuberculosis and other opportunistic infections, such as shingles
• Knowledge of people with HIV and AIDS in service
• Costs for prevention and treatment programs

21.4. Indicators in respect of effectiveness and impact of HIV and AIDS and STI’s programs include:
• Knowledge, attitude and practices (KAP) survey
• Number of members and employees attending information programs
• Number of members and employees benefiting from capacity building and training programs
• Number of male/female condoms distributed to members and employees
• For on-site clinics, STI’s prevalence
ANNEXURE “A”

UNIVERSAL PRECAUTIONS

1. Blood, especially in large spills such as from nosebleeds, and old blood or bloodstains, should be handled with caution. Skin exposed accidentally 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 cleansed 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 must be made available to dispose of sanitary wear.

3. All open wounds, sores, breaks in the skin, grazes and open skin lesions should at all times be covered completely and securely with a non-porous or waterproof dressing or plaster so that there is no risk of exposure to blood.

4. All persons attending to blood spills, open wounds, sores, breaks in the skin, grazes, open skin lesions, body fluids and excretions should wear protective latex gloves or plastic bags over their hands to eliminate the risk of HIV transmission effectively. Bleeding can be managed by compression with material that will absorb the blood, e.g. a towel.

5. If a surface has been contaminated with body fluids and excretions which could be stained or contaminated with 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), and paper or disposable cloths. The person doing the cleaning must wear protective gloves or plastic bags.

6. Blood-contaminated material should be sealed in a plastic bag and incinerated or sent to an appropriate disposal firm. Tissues and toilet paper can readily be flushed down a toilet.

7. If instruments (for instance scissors) become contaminated with blood or other body fluids, they should be washed and placed in a strong household bleach solution for at least one hour before drying and re-using.
Recommended Content of First Aid Boxes:

- 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 (for example when broken glass makes the use of latex gloves inappropriate)
- absorbent material
- waterproof plasters
- disinfectant (such as hypo chloride)
- scissors
- cotton wool
- gauze tape
- tissues
- water containers
- resuscitation mouth piece 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 are in essence barriers to prevent contact with blood or body fluids. Adequate barriers can also be established by using less sophisticated devices than those described above, 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
- scarf instead of protective face mask

Used items should be dealt with as indicated in paragraphs 6 and 7 above.
**GLOSARIES:**

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome is a range of medical conditions that occurs when a person immune system is seriously weakened by infection with Human Immunodeficiency Virus (HIV).</td>
</tr>
<tr>
<td>Antiretroviral Therapy-</td>
<td>Treatment with two or more antiretroviral drugs, for people with advanced HIV disease and evidence of a compromised immune system.</td>
</tr>
<tr>
<td>Discrimination</td>
<td>Any distinction, exclusion or preference made on the basis of HIV status or perceived HIV status.</td>
</tr>
<tr>
<td>Education Sector –</td>
<td>All government and private educational institutions, including stakeholders, all programs, activities and players in the field of education.</td>
</tr>
<tr>
<td>Employee -</td>
<td>An administrator, teacher or non-teaching support staff member employed in an educational institution.</td>
</tr>
<tr>
<td>Employer-</td>
<td>An institution 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.</td>
</tr>
<tr>
<td>Epidemiological Data -</td>
<td>The data extracted to indicate the rate of HIV infection in the workplace.</td>
</tr>
<tr>
<td>Gender</td>
<td>Differences in social roles and relations between men and women.</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus – a virus that weakens the body’s immune system, ultimately causing AIDS.</td>
</tr>
<tr>
<td>Mainstreaming –</td>
<td>Incorporating the implications of HIV and AIDS into normal everyday consideration and actions of an organisation.</td>
</tr>
<tr>
<td>Membership -</td>
<td>This shall refer to all categories of membership in terms of the organisation constitution.</td>
</tr>
<tr>
<td>Post Exposure Prophylaxis –</td>
<td>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.</td>
</tr>
<tr>
<td>Reasonable Accommodation –</td>
<td>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.</td>
</tr>
<tr>
<td>Screening</td>
<td>Assessing the level of actual risk of exposure to HIV and/ or providing access to HIV testing.</td>
</tr>
<tr>
<td>Stakeholder –</td>
<td>An individual, organisation or body with a direct and continuing interest in an educational interest.</td>
</tr>
<tr>
<td>Universal Precautions –</td>
<td>Infection control practices to be used to minimize the risk of exposure to blood-borne pathogens.</td>
</tr>
<tr>
<td>Work Environment –</td>
<td>All conditions related to the workplace.</td>
</tr>
<tr>
<td>Workplace –</td>
<td>Any occupational setting, station or place where workers spend time for gainful employment.</td>
</tr>
</tbody>
</table>

*Most of these definitions has been adapted from the Workplace HIV and AIDS Policy for the Education Sector.*