



UNIVERSITY OF NAIROBI



HIV & AIDs POLICY

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Foreword

HIV and AIDs is destroying the lives of individuals, families and communities in Kenya and all over the world. Over 70% of cases of HIV infection in the world are found in the Sub-Saharan Africa. For this reason, many concerned individuals have urged Africa to take serious steps to stop this pandemic. The declaration of both HIV and AIDs as a national disaster by President Daniel Moi in 1999 and "Total War on Aids" by President Mwai Kibaki in 2003 called on Kenyans to stop the disease. Buttressing efforts to stop HIV and AIDs has been the millennium development goal number six whose aim is to combat diseases such as HIV and AIDs, tuberculosis, and malaria.

The University of Nairobi must play its rightful role in these efforts because, first, it is integral to the Kenyan nation and, second, it has produced the highly skilled human resources essential for national development which should be protected and provided with an enabling environment to develop best practices for prevention, control, care and support of HIV and AIDS programmes.

As the University community responds to this national disaster, it must ensure its response not only is all-inclusive, effective and well-coordinated but also is anchored in a sound policy. This policy document is the foundation on which the University, inspired by its mission, bases its HIV and AIDs activities and programmes.

The University however is fully aware of the dynamic nature of the HIV and AIDs with all its ever-changing multisectoral and multidisciplinary ramifications and implications. The policy therefore is amenable to appropriate review to respond to developments on HIV and AIDs.

I would call on all the units of the university to ensure that activities and programmes in their mandates to embrace the guidelines of the policy for the sake of both the present generation and the posterity.

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Vice Chancellor and Professor of Veterinary Surgery

List of Acronyms and Abbreviations

AIDs	-	Acquired Immune Deficiency Syndrome
HIV	-	Human Immune Deficiency Virus
PEP	-	Post Exposure Prophylaxis

Definition of Terms

Affected: a person feeling the impact of HIV and AIDs through sickness or a loss of relatives, friends or colleagues or a person whose life has changed in any way by HIV and AIDs due to the broader impact of the epidemic

Affected: a person who experiences the impact of HIV and AIDs through the loss or sickness of family members

AIDs: the final phase of HIV infection characterized 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 life-threatening diseases

ART: a combination of medical drugs, accompanied by support services, taken by persons living with HIV for their lifetime to minimize the level of virus in the blood, improve health and extend life

Confidentiality: the right of every learner, employee or job applicant to have one's medical or information, including HIV status, kept secret as enshrined in the HIV and AIDs Prevention and Control Act, 2006

Discrimination: a direct or indirect discrimination against anyone on the basis of their HIV status and/or one or more, but not exclusive to race, gender, sex, pregnancy, marital status, ethnic or social origin, colour, sexual orientation, age, disability, religion, conscience, belief, culture, language, or birth

Employer: the University of Nairobi

HIV: the germ that causes AIDs

Infected: a person living with HIV

PEP: medical treatment given to persons who have been exposed to the HIV infection through rape or injury within 72 hours to prevent them from contracting the virus

SERO-STATUS: the presence or absence of HIV in the body

Workplace: occupational settings, stations and places where workers spend time for gainful employment in the educational sector

1.0 Introduction

The University of Nairobi spells out mechanisms for implementing its activities and programmes relating to HIV and AIDs in the policy, which covers these nine areas:

- a. education and prevention,
- b. peer counselling, blood safety, occupational health and safety,
- c. impact and incidence of HIV and AIDs on the future,
- d. medical coverage,
- e. anti-retroviral therapy,
- f. HIV and AIDs treatment,
- g. cost and benefits impact,
- h. mechanisms of HIV and AIDs prevalence and scientific risk assessment, and
- i. confidentiality management and post exposure prophylaxis (PEP).

Since the start of the HIV and AIDs pandemic, around 78 million people have become infected with HIV and 39 million people have died of AIDs-related illnesses in the world. In 2013, 35 million people were living and about 2.1 million people became newly infected with HIV; 0.24 million children became newly infected with HIV. By 2013, 38% of adults living with HIV were receiving treatment while only 24% of children living with HIV were on treatment with ant-retroviral drugs.

In Kenya the HIV pandemic is primarily driven by heterosexual transmission. According to the Kenya AIDs Indicator Survey, (KAIS) 2012, the estimated national HIV prevalence is 5.6% in adults and adolescents aged between 15 years and 64 years, representing an estimated 1.2 million Kenyans.

In the education sector, evidence shows that alcohol and substance among learners is on the rise, posing a great danger to the health of, and increased risk of HIV infection to, young people. Fifty percent of alcohol and substance abusers in Kenya are aged between 10 years 19 years, representing the age group with the highest new HIV rates in Kenya. Overall, the educational sector is in a unique position to provide learners of all ages with comprehensive sexuality life skills education that imparts knowledge on HIV and AIDs, along with alcohol and substance abuse, and enhance a positive attitude towards and in desired behaviour.

2.0 Scope of the Policy

The policy provides guidelines and sets standards for the prevention and the management of HIV and AIDs in the university. It applies to staff, their dependants, and students and will guide outreach services to the society.

3.0 Objectives

The overall goal of the HIV and AIDs policy is to provide leadership in prevention, treatment, care and support to staff, their dependents, and students and to mitigate the socio-economic and health impact of HIV and AIDs. The specific objectives of policy however are to

- a. provide an institutional framework for addressing HIV and AIDs,
- b. update regularly HIV and AIDs model policies for the prevention of the infection and the control of and the care for the infected and the affected and mitigate the impact of HIV and AIDs,
- c. adopt and implement effective awareness strategies for the prevention and the control of the infection as well as the care for and the support of the infected,
- d. create an effective strategy for the destigmatization of HIV and AIDs,
- e. encourage and facilitate fundamental and applied research on effective interventions against the HIV and AIDs pandemic in the university,
- f. build institutional and national capacity to develop, implement, monitor and evaluate HIV and AIDs programmes,
- g. mainstream HIV and AIDs education in the university by teaching it as a course unit to all undergraduates,
- h. mobilize the university community to participate in HIV and AIDs prevention, care and support at all levels in Kenya, and
- i. update the HIV and AIDs database and management information system with the aim of providing strategies for use by the university's top management and operational information for caregivers.

4.0 Legal Framework

The university recognizes that the application of the policy must be in the context of the existing Kenya HIV and AIDs legislation and relevant laws such as

- a. the Constitution of Kenya, 2010,
- b. the HIV and AIDs Prevention and Control Act, No. 14 of 2006,
- c. the Sexual Offences Act, No. 3 of 2006,
- d. the Employment Act, 2007,
- e. the Occupational Safety and Health Act, 2007,
- f. the Sessional Paper No.4 of 1997 on HIV, and
- g. the Education Sector Policy on HIV and AIDs, 2013 and international instruments such as

- a. the Universal Declaration of Human Rights,
- b. the International Covenant on Economic, Social and Cultural Rights,
- c. the International Covenant on Civil and Political Rights, and
- d. the African Charter of Human and Peoples Rights.

5.0 Employment Policy and HIV and AIDs

5.1 Fair Labour Practices

In line with the International Labour Organization/the Federation of Kenya Employers workplace guidelines, the university will ensure that every employee, whether HIV infected or affected, will have the right to fair labour practices of recruitment, appointment and promotion.

5.2 Equality

HIV infected persons will have equal rights, opportunities and responsibilities and will be protected from all forms of stigma and discrimination.

5.3 Privacy and Confidentiality

Every employee will have the right to privacy and confidentiality in relation to one's HIV status, and no employee will be required to undergo a mandatory HIV test. A disclosure of one's status is encouraged within a safe, supportive and acceptable environment, but it will not be mandatory, and no person may disclose information related to HIV status of another person without one's consent. In the case of a minor, the best interest of the child will be guided by decisions concerning disclosure as required by Aids Act 2006 and Article 53 of the Constitution of Kenya, 2010.

5.4 Access to Treatment, Care and Support

Infected and affected persons will have the right to access holistic treatment care and support in line with available resources.

5.5 Safety in Work Place

5.5.1 The university will have a responsibility to minimize the risk of HIV infection by taking appropriate first aid and universal infection control precautions.

5.5.2 There will be zero tolerance to sexual harassment, abuse and exploitation in the workplace.

5.6 Involvement of People Living with HIV

The university will promote the involvement of people living with HIV on all levels of activity.

5.7 Gender Responsiveness

The application of the policy will be responsive to the needs of male and female employees in relation to how HIV and AIDs affects and impacts on them.

6.0 Students Policy and HIV and AIDs

6.1 Access to Education

The University will ensure that a student will not be denied access to education on the basis of one's actual or perceived HIV status. Access to education therefore will be facilitated for students living with HIV.

6.2 Access to Information

Every student has the right to relevant information, knowledge and skills about HIV and AIDs.

6.3 Equality

Every HIV infected student will have equal rights, opportunities and responsibilities and will be protected from all forms of stigma and discrimination.

6.4 Privacy and Confidentiality

Every student will have the right to privacy and confidentiality in relation to one's HIV status, and no student will be required to undergo a mandatory HIV test. A disclosure of one's status is encouraged within a safe, supportive and acceptable environment but will not be mandatory.

6.5 Access to Treatment Care and Support

Infected and affected students will have the right to access holistic treatment care and support in line with available resources.

6.6 Safety in the Learning Environment

There will be zero tolerance to sexual harassment, abuse and exploitation in the university.

6.7 Gender Responsiveness

The application of the policy will be responsive to the needs of male and female students in relation to how HIV and AIDs affects and impacts on them differently.

7.0 Commitment

The university commits itself to

- a. avail adequate information on HIV and AIDs control to students and staff,
- b. consult with its staff and students on matters relating to HIV and AIDs,
- c. ensure adequate training on HIV and AIDs, and
- d. prevent the spread of HIV and AIDs among students and staff.

8.0 Accountability

In partnership with government departments, agencies and stakeholders, the Vice Chancellor will be responsible for the implementation of the policy.

9.0 Funding

The university will ensure the sustainability of essential HIV and AIDs programmes by procuring local and external resources for funding their core aspects.

10.0 Policy Review

The policy will be reviewed after every five years or as need may arise.