THE NATIONAL POLICY

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ON HIV & AIDS FOR THE

EDUCATION SECTOR

IN

NIGERIA

Draft

September, 2005

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ACRONYMS

AED	Academy for Educational Development
AHI	Action Health Incorporated
AIDS	Acquired Immune Deficiency Syndrome
ARV	Ante Retro Viral
ARFH	Association for Reproductive and Family Health
BCC	Behaviour Change Communication
CEDPA	Center for Development and Population Activities
CUBE	Capacity for Universal Basic Education
CSOs	Civil Society Organizations
CiSHAN	Civil Society Network on HIV & AIDS in Nigeria
DFID	UK Department for International Development
EFA	Education For All
ENHANSE	Enabling HIV & AIDS+TB and Social Sector Environment
FBOs	Faith Based Organisations
FLHE	Family Life and HIV & AIDS Education
FME	Federal Ministry of Education
FMOH	Federal Ministry of Health

FMOL&P	Federal Ministry of Labour and Productivity		PABA	People Affected by AIDS
GIPA	Greater (and meaningful) Involvement of PLWHA		PCD	Partnership for Child Development
HIV	Human Immunodeficiency Virus		PLWHA	People Living with HIV & AIDS
IATT	Inter-Agency Task Team		PSR	Public Service Rules
IEC	Information Education and Communication		PTA	Parent Teacher Association
ILO	International Labour Organization		SEEDS	State Economic Empowerment and Development Strategy
LEEDS	Local Economic Empowerment and Development Strategy		SERVICOM	Service Compact
JCCE	Joint Consultative Committee on Education		SMOE	State Ministry of Education
MDG	Millennium Development Goals		STI	Sexually Transmitted Infection
NACA	National Action Committee on AIDS		UBE	Universal Basic Education
NAPEP	National Poverty Eradication Programme		UBEC	Universal Basic Education Commission
NAPTAN	National Parent Teacher Association of Nigeria		UNESCO	United Nations Educational Scientific and Cultural Organisation
NCE	National Council on Education			
NEEDS	National Economic Empowerment and Development Strategy		USAID	United States Agency for International Development
NEPWHAN	National Network of People Living With HIV & AIDS in Nigeria		UNAIDS	Joint United Nations AIDS Program on AIDS
			UNDP	United Nations Development Program
			VCT	Voluntary Counselling and Testing
NIEPA	National Institute for Educational Planning and Administration			
NNRIMS	Nigerian National Response Information Management Systems			
NPE	National Policy on Education			
NUT	Nigerian Union of Teachers			
OVC	Orphans and Vulnerable Children			

DEFINITIONS

1. "The Sector" as used in this document refers to the Education Sector both formal and non-formal.

2. 'Staff" includes full time, part time, contract and permanent staff of the Ministries of Education, their affiliates and private educational institutions.

3. Learners include students and pupils in the formal and non-formal sector.

4. Ministries of Education and their affiliates' refer to the Federal and State Ministries of Education, their agencies and educational institutions in Nigeria.

5. 'Dependant' includes:

   - Child Dependants defined as any child of a staff member (biological or legally adopted) aged 0-18 years.

   - Adult Dependants defined as unemployed or aged dependant not more than four persons

6. Family refers to a staff's spouse and children and dependants as defined in 5 above.

7. "HIV-related information" includes information that someone:

   o may be HIV positive;

   o has received counselling about being tested for HIV and has chosen to have an HIV test;

   o is receiving or has received treatment or counselling which suggests that he or she may have had experiences which put him or her at risk of contracting HIV;

   o or has a close association or relationship with someone who is HIV positive.

8. 'HIV screening' is defined as any measurement of potential or actual HIV infection. This should be done directly through HIV testing.

9. 'Reasonable accommodation' means any modification or adjustment to a job or to the workplace that is reasonably practicable to both the employer and the staff and will enable a person living with HIV or AIDS to have access to or participate or advance in employment.

10. An 'Affected' person refers to one who experiences the impact of HIV & AIDS through the loss or sickness of family members, friends and or colleagues.

11. 'Orphans' refer to children within the age bracket 0 – 18 years who have lost one or both parents (biological or adoptive) due to AIDS related illness.

12 'Vulnerable Children' refer to children less than 18 years whose safety, well being and development are for various reasons threatened e.g. HIV & AIDS, absence of able care givers, being a child head of a household, displacement due to death of parents, being physically and mentally challenged, street children, child labourers etc

FOREWORD

Education is central and vital to the health and socio-economic development of any nation. With 5% national prevalence in Nigeria, HIV & AIDS is an epidemic threatening our development and survival as a nation. HIV & AIDS can impact the Education Sector severely. It affects the quality of teachers through absenteeism due to sickness; loss of many hours of teaching periods; decreases teachers' supply and increases demand for teachers. AIDS related illnesses are responsible for the recent increase in mortality of teachers, learners, school dropouts and child headed families. Increasing number of orphans is worrisome; these children are malnourished and experience psychosocial problems owing to separation from their families as well as stigma and discrimination.

The need to formulate the National Policy on HIV & AIDS for the Education Sector was recognized and agreed upon by all stakeholders at a series of workshops on "Accelerating the Education Sector Response to HIV & AIDS in Nigeria". These workshops were organized by the Federal Ministry of Education (FME) in collaboration with National Action Committee on AIDS (NACA), UNAIDS-Inter Agency Task Team (IATT) and Partnership for Child Development (PCD). The first of the workshops took place in Abuja for FME and its Agencies while others were held for State Ministries of Education (SMOE) and their agencies at the National Institute for Educational Planning and Administration (NIEPA) Ondo. FME was given the mandate to coordinate the development of the Policy. This policy will adequately address and cater for the peculiarities of the Sector.

It is essential to acknowledge that HIV & AIDS is a critical management problem that must be addressed as a matter of priority, if Nigeria is to achieve Education For All (EFA) and Millennium Development Goals (MDG). The Policy provides the basis to address issues, and complications from the epidemic as well as strategies to respond to them. These strategies will ensure prevention, access to treatment, care and support for People Living with HIV & AIDS (PLWHA), as well as mitigating of impact arising from the epidemic. Apart from this Policy being educational in tone, and procedure, it is also in consonance with existing service policies, rules and regulations.

Furthermore, it provides guidance for employees, employers and learners, in terms of procedures, skills acquisition and resource mobilization. Finally, it will also ensure that actions and programmes are monitored and evaluated.

Hajja Bintu Ibrahim Musa
Minister of State
Federal Ministry of Education
Abuja.

PREFACE

In 2001, President of the Federal Republic of Nigeria, Chief Olusegun Obasanjo introduced a new paradigm in the prevention and control of HIV & AIDS in Nigeria. Within that construct, the Federal Ministry of Education has the responsibility for providing a policy that will guide learners, teachers and other workers in the Education Sector. This has been achieved by the Federal Ministry of Education in collaboration with different stakeholders in the education sector.

The current status of the epidemic in Nigeria reveals that the sero-prevalence across board is 5% which translates to about 3.7 million adults who are living with the virus. This is a serious development problem as the epidemic tends to affect the productive sector of the economy. In other parts of Africa where the pandemic has matured, it has affected the school system sometimes to the point of near paralysis.

This Policy therefore is an important landmark by the Education Sector to contribute to the fight against HIV & AIDS. It provides guidelines for the establishment of good practices for the protection, care and support of learners, teachers and other significant stakeholders.

The Policy is a product of active participation by different stakeholders including education sector agencies, States' HIV & AIDS Desk Officers, People Living with HIV & AIDS (PLWHA), Civil Society Organisations (CSOs), Faith-Based Organisations (FBOs), teachers, workers within the Sector, National Parent Teacher Association of Nigeria (NAPTAN) and development partners have gone through several iterations before final acceptance.

The content includes intervention strategies that will ensure:

- The prevention of HIV transmission;
- Access to care, treatment and support for PLWHA and People Affected by HIV & AIDS (PABA);
- Access to education and socio-economic security for orphans and vulnerable children;
- Elimination of stigma and discrimination against PLWHA and PABA;
- Promotion and protection of the rights of PLWHA; and
- A definition of the roles and responsibilities of government, employers, workers, teachers, learners and all stakeholders within the Sector.

We at the National Action Committee on AIDS are quite pleased to be part of this and it is our hope that the Policy will be translated into strategies and activities which will protect and provide succour for the different constituents of the Education Sector who indeed are our country's future.

Professor Babatunde Osotimehin
Chairman, National Action Committee on AIDS.

ACKNOWLEDGEMENTS

This Sectoral Policy is as a result of many hours of deliberations by stakeholders. The diverse gatherings gave opportunities for useful and purposeful contributions to the development and production of this document. Thus this Policy has a widespread ownership because all the important stakeholders participated in its development.

Many people have contributed to the success of this Policy and we hereby acknowledge and appreciate their inputs.

World Bank/DFID Abuja: Dr. Don Taylor for opening up our initial contact with the UNAIDS-IATT. Don was a source of inspiration and encouragement.

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Deep appreciations go to the Honourable Minister of Education, Honourable Minister of State for Education, Permanent Secretary of Education and Director Educational Support Services for their support and encouragement in the development of this Policy.

Finally, I acknowledge with deep gratitude the contributions of my colleagues in the Education Sector and the Technical Working Committee. Thank you for a job well done.

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1.0 INTRODUCTION

"AIDS is turning back the clock on development. In too many countries the gains in life expectancy won are being wiped out. In too many countries more teachers are dying each week than can be trained…" Education and HIV & AIDS: A Window of Hope (The World Bank,2002)

The emergence of HIV & AIDS is one of the most devastating occurrences in human history. Statistics show that over 20 million deaths have been recorded while about 40 million people are currently living with the virus globally.

In Nigeria, HIV & AIDS emerged in 1986 and its sero-prevalence increased from 1.8% in 1991 to 5.8% in 2001. Although the country has seen a slight decline from that figure to 5.0% in 2003, there is still no reason for complacency. This is because given Nigeria's large population of over 120 million, an estimated 4 million are HIV infected, 54% of which are women while 46 % comprise of men and children.

The impact of the epidemic can be felt in violation of rights of the infected and affected persons, supply and demand of labour, loss of valuable skills and experience as a result of death from the disease; increase in the numbers of OVC, threat to occupational safety and investments; gender inequalities and increased burden on women who bear the brunt of the epidemic. Estimates based on the 2001 sero-prevalence results show that female AIDS cases out numbered male cases by a ratio of approximately 1.17 to 1 in 2000 and will continue to rise through to 2015 with a female to male ratio of 1.27 to 1. In 2004, projections based on the 2003 sero-prevalence results suggest that about 200,000 adults died as a result of AIDS, giving rise to about 600,000 OVC in Nigeria in that year *(National Sero-Sentinel Survey, FMOH, 2003)*. With regards to gender inequalities, the impact on women cannot be overemphasized. It should also be noted that the families of the infected persons are not spared from the impact of the epidemic such as stigma and discrimination.

2.0. IMPACT ON THE SUPPLY, DEMAND AND QUALITY OF EDUCATION

The epidemic's impact on the Education Sector has far-reaching implications for long-term development and this has raised a lot of concern. According to the Dakar Framework for Action,

"The threat posed by HIV & AIDS to the achievement of EFA goals and to development more broadly, especially in Sub-Saharan Africa, presents an enormous challenge."

Some impacts on the Education Sector that have been identified include the following:

- A reduction in efficiency and productivity owing to illness and absenteeism
- A depletion of student and teacher populations
- An increase in teacher demand and reduction in teacher supply
- An increase in school drop–outs and reduction in access to education
- An increase in demand for public services and benefits
- An increase in the number of school – age children who are orphaned by HIV & AIDS
- A decrease in the production of man-power for the workforce.

The epidemic weakens the quality of training and education, which means fewer people benefit from quality school and university education. It also accelerates the impact of a pre – existing professional 'brain drain'.

In Nigeria available empirical data suggest that HIV & AIDS has begun to make some impact on the Education Sector. Reports from the '*Assessing Educators Views on the Impact of HIV & AIDS on Primary Education in Nigeria*', indicate that at least a tenth of teachers interviewed in Lagos Nassarawa and Kano affirmed that HIV & AIDS had a negative impact on primary education in their States. More specifically, the Ed-SIDA Model reports that AIDS deaths among teachers in 2001 amounted to 6.5% of the total recruitment in 2002. It also reveals that AIDS will contribute immensely to the annual attrition in the teaching population rising from 10.8% in 2002 to 13.9% by 2015.

Regarding children orphaned as a result of AIDS, Nigeria is said to have the highest burden in West Africa, as estimates from the 2003 Sentinel Survey reports 1.8 million children falling into this category.

3.0 JUSTIFICATION FOR THE POLICY

The need to formulate an HIV & AIDS Policy for the Education Sector (hereinafter referred to as the Sector) in Nigeria was recognized and agreed by stakeholders at a series of World-Bank funded and NACA – supported workshops on "Accelerating the Education Sector Response to HIV & AIDS in Nigeria". The first of these workshops took place in Abuja in June 2003, followed by three other meetings held at the National Institute for Educational Planning and Administration (NIEPA), Ondo in June 2003, March 2004, February, June and October 2005 respectively. These meetings brought together representatives of the Education Sector Agencies/Parastatals, State HIV & AIDS Desk Officers, National Network of People Living with HIV & AIDS (NEPWHAN) and Civil Society Organizations (CSOs), Faith-Based Organizations (FBOs), teachers and other workers within the Sector, education planners/administrators as well as development partners.

At these workshops, discussions revealed that in countries where the HIV & AIDS prevalence in the adult population exceeds 10% such as Uganda, Botswana, Kenya and Zambia, the Education Sector is greatly impacted and thus to forestall a similar occurrence in Nigeria there was a need to put in place a policy document that will guide prevention activities within the Sector. Also, participants recognized that most school counsellors have no in-depth knowledge of HIV & AIDS. In addition, there is widespread silence on adolescent sexuality, reproductive health and HIV & AIDS issues in particular, and the present school curriculum does not capture these issues fully.

Though, some education workplaces and institutions have sporadic projects on HIV & AIDS, there is no standard practice to guide their actions, neither are such activities coordinated, monitored nor evaluated. As is the case with the general population, stigma and discrimination against PLWHA abounds. There have been cases of dismissal from work and schools as a result of real or perceived HIV status of individuals or their relatives. There is widespread ignorance, and inaccurate knowledge about HIV & AIDS. Also, there is limited access to Voluntary Counselling and Testing (VCT), care, treatment and support, as well as dearth of specific legislation on HIV & AIDS. Though Nigerian labour laws abound to protect workers from discrimination there is no specific mention of HIV & AIDS, which has emerged to challenge the traditional way of doing things.

At present, responses to these issues are piecemeal. Though, education ministries have mainstreamed HIV prevention into their curricula as a valuable part of a successful AIDS response, they are overwhelmed by limited resources to manage the impact of the epidemic. In addition, very few of them have the capacity to examine the epidemic's impact on the education system itself and take appropriate action.

The need to develop a sector-specific policy to guide and accelerate the Sectoral response to HIV & AIDS can therefore, not be over emphasized. In this regard, the Government of Nigeria is committed to making a strong statement through this National Policy on HIV & AIDS for the Education Sector. The Policy is the product of collaboration between the Ministries of Education, Development Partners, Civil Society and Communities. It will be instrumental in helping to prevent the spread of the epidemic, mitigate its impact on staff, learners and their families as well as provide the social protection they need to help cope with the disease.

3.1   POLICY PROCESS

This Policy was developed using a participatory approach and is the product of series of dialogues and consultations as well as advocacy with key stakeholders in the Sector. With technical and financial assistance from USAID (through the POLICY and ENHANSE Projects) and technical support from CUBE, UNESCO, UNDP, ActionAid and SMARTWork, the first

National stakeholders meeting was organized on the 22nd of July, 2004 at the Pioneer Hotel in Abuja. The purpose of the meeting was to develop a framework that would form the basis for the National Education Sector HIV & AIDS Policy (from which this Policy has evolved). A key outcome of this meeting was the formation of a Technical Drafting Team comprised of the six (6) zonal representatives of the State Ministries of Education HIV & AIDS Unit, representatives of NEPWHAN, CiSHAN, NIEPA, FME, UBEC and NAPTAN and headed by Professor Oladapo Ladipo of ARFH. The team worked in small groups and produced an initial draft based on the inputs generated by stakeholders on agreed thematic areas. These inputs made up the policy document. The draft policy document was reviewed and adopted at a subsequent National Stakeholders meeting held in Abuja on the 8th of September 2004.

4.0. POLICY FRAMEWORK

This Policy aspires to provide a framework for recognizing the existence of HIV & AIDS issues in the Sector. It also provides strategies for prevention, treatment, care and support for the infected and affected, as well as impact mitigation in the Sector.

4.1 GUIDING PRINCIPLES

The Sector is fully committed to offering a broad range of HIV & AIDS prevention, treatment, care and support measures and interventions. Since the aim of this policy is to guide the Sector in the design of HIV & AIDS programmes, the following are the guidelines, on which the policy is based.

- Recognition of HIV & AIDS as a development and workplace issue
- Non-stigma and non-discrimination in recruitment, employment, admission and termination
- Confidentiality of all HIV & AIDS related information
- Recognition of the multi-ethnic and socio-cultural diversity of Nigeria
- Gender sensitivity, equity and responsiveness
- Respect of fundamental human rights of all peoples
- Greater involvement of People Living with HIV & AIDS
- Partnerships and involvement of CSOs, FBOs, and the private sector

4.2 GOAL OF THE POLICY

The overall goal of the Policy is to provide a framework to guide formulation of appropriate interventions, which will be effective in:

i. Preventing transmission of HIV & AIDS and other sexually transmitted infections (STIs);

ii. Protecting and supporting vulnerable groups; and

iii. Mitigating the social and economic impacts of HIV & AIDS in the Sector.

4.3 SPECIFIC OBJECTIVES

The objectives of this Policy are to:

i) Promote awareness and educate on HIV & AIDS and other sexually transmitted infections;

ii) Develop strategies and interventions that support behaviour change;

iii) Create a supportive work and learning environment for infected and affected staff and learners;

iv) Provide a workplace environment devoid of stigma and discrimination on the basis of real or perceived HIV status, or vulnerability to HIV infection.

4.4   SCOPE OF APPLICATION

This Policy will be applicable to all Government and private education institutions and workplaces in Nigeria. Also, it shall be applied equally to all employees and learners, regardless of sex, ethnicity or religion. This policy recognizes the socio-cultural diversity of Nigeria and as such recommends that application of the strategies outlined in the document should conform to acceptable socio-cultural and religious norms and values of each state of the

federation as long as it does not put anyone at the risk of contracting HIV.

4.5 COMMITMENTS

The Honourable Minister of Education, Honourable Commissioners of Education and all other stakeholders (private and public) within the Sector affirm that:

i. This Policy recognizes HIV & AIDS as an issue in the workplace, schools and institutions. It is complementary to the National Policy on HIV & AIDS in the workplace, the international and local labour laws and is premised upon the principles of justice, equity and fair play.

ii. This Policy is complementary to the Constitution of the Federal Republic of Nigeria, Civil Service Rules and Regulations, the National Policy on HIV & AIDS, the National Health Policy, the National Policy on Education, the Child Rights Act and all other laws pertaining to the protection of human rights and the corporate existence of Nigeria.

iii. In subscribing to this Policy, it is also a commitment to maintaining a healthy lifestyle, which includes good health practices and positive health-seeking behaviour.

iv The HIV & AIDS workplace and medical benefits policies are developed on the premise that one does not knowingly

put oneself at risk, and that one will seek appropriate care treatment and support of acceptable quality.

v. The Sector shall ensure that this Policy and other ministerial responses to HIV & AIDS are key components of SERVICOM, NEEDS, SEEDS and LEEDS.

5.0 POLICY THEMATIC AREAS

To achieve the above stated objectives the policy will focus on the following themes:

i.   Prevention of HIV & AIDS;
ii. Reduction of Stigma and discrimination;
iii. Treatment, Care and Support;
iv. Orphans and Vulnerable Children;
v.   Gender Right and Ethics;
vi. Program Management and Development.

5.1   Prevention of HIV & AIDS

Prevention is central to, and acts as, a basis for all efforts in combating the HIV & AIDS epidemic. The Sector will adopt a holistic, comprehensive, pro-active and practical approach to ensure behaviour change. This will involve the design, implementation and coordination of various interventions to change attitudes, beliefs and risky behaviour of staff, learners, their families and communities. Staff will be provided with adequate information to bring about attitude and behavioural change in order to reduce the risk of infection. Such information will take into account gender-specific risk factors for HIV & AIDS, including the issue of gender-based violence.

5.1.1 Voluntary Counselling and Testing (VCT)

Medical personnel, in accordance with law, will handle all medical information about the staff in confidentiality. Confidentiality is premised on no compulsory disclosure of the HIV status. Disclosure of the status will be on a voluntary basis, with written consent by the concerned staff and learners after counselling on the potential consequences particularly for women, who may face severe consequences than the men. Employers, and other personnel involved in the process of VCT will be provided with appropriate training and guidance to ensure that confidential medical information is handled in accordance with the relevant law. A policy of acceptance and non-discrimination will be adopted. The Sector shall therefore ensure that confidentiality about HIV & AIDS is not infringed upon. Mechanisms shall be put in place to ensure the above.

5.1.2 Occupational Safety

Occupational health, safety and welfare should be assured in the Sector. A healthy working environment should ensure security to both infected

and affected staff. Practices and procedures will address vulnerability of workers and protect them from HIV infection.

5.2 Reduction of Stigma and Discrimination

The principle of this policy on stigma and discrimination is to safeguard the rights of people living with and affected by HIV & AIDS so as to improve the quality of their lives and minimize stigma. The Sector is not only a service provider but also is directly affected by HIV & AIDS. The Sector shall have zero tolerance approach towards verbal and/or physical violence, emotional or psychological abuse and discrimination of HIV positive persons by or from learners, staff and management. Stakeholders in the Sector are reminded everyday that HIV & AIDS is non- discriminating. We are therefore duty bound to practice compassion and tolerance towards all people living with and affected by HIV & AIDS, including our colleagues.

5.2.1 *Recruitment, Employment, Admission and Termination*

In the Sector, staff and learners will not be forced or pressured in any manner to be tested for their HIV status for purposes of recruitment, access to training and promotion or termination of employment. The medical examinations should test for the physical fitness of the worker or prospective worker to perform the job in question and should not include the test for HIV status. Indirect screening methods such as questions in verbal or written form about previous HIV tests or questions related to the assessment of risky behaviour should not be permitted. The Sector shall not endorse/require mandatory HIV testing for whatever purpose from staff or would-be staff, learners, and potential learners. The Sector shall under no circumstance discriminate against staff and learners on the basis of their HIV status with specific regard to training, promotion and staff retention. The Sector shall under no circumstance discriminate against learners on the basis of their real or perceived HIV status.

5.3 Treatment, Care and Support

HIV & AIDS is a workplace issue and should be treated like any other serious illness/condition. This is necessary not only because it affects the workforce, but also because the workplace, being part of the local community, has a role to play in the wider struggles to limit the spread and effects of the epidemic. A compassionate and caring social and workplace environment is necessary for positive support to people living with and affected by HIV & AIDS. Care and support of the infected and affected families is essential in lessening the economic burden as well as social and psychological stress.

The Sector shall undertake to treat HIV infection and AIDS as any other chronic illness and as such shall make appropriate linkages to the health sector.

5.4. **Orphans and Vulnerable Children**

and sexual abuse which may result in HIV infection. In addition HIV & AIDS affects the supply, demand and quality of education. The Sector shall foster and ensure with a high sense of responsibility the provision of quality education, care and support for OVC.

Orphans and children made vulnerable as a result of HIV & AIDS are at risk of poor educational attainment due to lack of affordable schooling; increased family responsibility; stigma and discrimination

5.5 Gender, Rights and Ethics

5.5.1 Gender

Gender Equality in ILO code of practice on HIV/AIDS and the world of work

> "*The gender dimensions of HIV/AIDS should be recognized. Women are more likely to become infected and are more often adversely affected by the HIV/AIDS epidemic than men due to biological, socio-cultural and economic reasons. The greater the gender discrimination in societies and the lower the position of women, the more negatively they are affected by HIV. Therefore, more equal gender relations and the empowerment of women are vital to successfully prevent the spread of HIV infection and enable women to cope with HIV/AIDS.*
>
> --ILO code of practice on HIV/AIDS and the world of work

The Sector acknowledges that women and girls are often at risk of HIV infection and experience severe consequences including early age at infection due to biological, socio-cultural and economic factors. Also recognized, is the fact that norms of masculinity promote sexual risk-taking. Girls and women are often infected at an earlier age than men.

Hence, this policy shall promote prevention measures that take into account those gender-specific risk factors; women and men will gain information and skills to share responsibility in protecting themselves and their families from the infection as well as its impact. The policy will seek to mitigate the more severe consequences that women and girls suffer due to HIV & AIDS. These include severe stigma and discrimination, gender-based violence at home, schools, institutions and communities. It will also address the increasing workloads of girls and women in the home, decreased wage-earning capabilities and potentially accelerated decline in health due to lack of access to treatment and care.

Benefits for employees with HIV & AIDS or employees with family members living with HIV & AIDS will accommodate gender roles while policies and strategies regarding recruitment, employment, admission and termination will be equally non-discriminatory for men and women living with HIV & AIDS. Female employees and learners should have equal access to preventive education, care, support and mitigation programmes.

5.5.2 Rights

Human rights and dignity of everyone in the Sector shall be observed irrespective of one's HIV status. PLWHA and PABA and their families shall be protected against exploitation, denial of rights, discrimination and victimization by co-workers, clients and employers at the workplace.

5.6   Program Management and Development

5.6.1 Institutional Framework

In actualising the Sector's contribution to the current multisectoral and multi-level approach to the HIV & AIDS response, it is necessary that HIV & AIDS desk/units be set up with appropriate and adequate numbers of staff with specific considerations for gender and in line with the principle of Greater and meaningful involvement of People living with HIV & AIDS (GIPA). These desks/units will be mandated with ensuring the implementation of the strategies within this policy at all levels. It is anticipated that the staff appointed to these desks will have their capacity constantly built to enable them respond to the challenges and emerging issues posed by the HIV & AIDS epidemic.

5.6.2 Implementation, Monitoring and Evaluation

The Sector shall be responsible for developing and promoting a plan for the implementation of this policy and review the policy from time to time as deemed necessary. Strong political and Government commitment and leadership at all levels is necessary for sustained and effective interventions against HIV & AIDS epidemic. Capacity building for a robust implementation is essential for the success of this policy and shall be granted adequate priority. The Sector shall commit at least 5% of their annual budgets for the effective implementation of this policy.

Monitoring and Evaluation as a critical component of program management is essential to ensure appropriate and timely implementation of planned interventions as directed by the strategies outlined in this policy. To this end, sector-specific indicators which are in congruence with the indicators in the Nigerian National Response Information Managements Systems (NNRIMS) will be developed alongside the implementation framework for the policy.

5.6.3 Resource Mobilisation and Partnerships

The management of HIV & AIDS in the Education Sector requires multi-sectoral, multi-level interventions and interagency collaboration. In addition, as resources are limited there is need for effective coordination and collaboration amongst all stakeholders to ensure effective utilisation of the scarce resources. The Sector recognises the importance of national and international technical and financial support in combating the HIV & AIDS within the Education Sector. Nigeria is part of the ECOWAS HIV & AIDS Education Desk Officers Network which has common programmes and strategies in addressing the issues of HIV & AIDS within the Sector and the sub-region. The Policy subscribes to partnerships amongst

partners at the national, state and local government levels including workers' representatives, FBOs, CSOs and organised private sector in addressing the challenges HIV & AIDS poses to the Sector. The active involvement of and the forging of partnerships amongst all stakeholders will aid the progress and success of interventions aimed at preventing HIV infection, de-stigmatization and non-discrimination among staff and learners at all levels.

6. STRATEGIES

In addressing HIV & AIDS and related issues within the Sector the following strategies shall be employed:

⇒ Prevention

⇒ Reduction of Stigma and Discrimination

⇒ Treatment Care and Support

⇒ Orphans and Vulnerable Children

⇒ Program Management and Development

⇒ Gender Rights and Ethics

6.1. PREVENTION OF HIV & AIDS

While recognising the multi-ethnic and socio-cultural diversity of Nigeria, prevention strategies and messages to be employed within this sector should be such that does not put anyone at risk of contracting HIV.

6.1.1. All staff within the Sector shall be fully informed and involved, as appropriate, on HIV & AIDS Education Programmes. They shall receive any additional professional education that may be required

and all pertinent information materials (IEC & BCC) on AIDS. These materials shall be updated and supplied to all duty stations by Ministries of Education and their affiliates

6.1.2. The Sector shall provide staff, learners and their families with relevant, accurate and up-to-date information to enable them protect themselves from HIV and other sexually transmitted or blood borne infections and to cope with AIDS related illness.

6.1.3. The Sector shall provide information to staff and learners as to where safe blood can be obtained.

6.1.4. HIV & AIDS Prevention and Awareness training Programmes shall be institutionalized across the Sector.

6.1.5. Information programmes, courses and campaigns shall be integrated into existing capacity building exercises conducted by the Sector.

6.1.6. The Family Life and HIV & AIDS Education (FLHE) curriculum shall be produced, distributed and implemented at all levels of the Sector nationwide.

6.1.7. The Sector shall ensure the effective implementation of UBE strategies that guarantee universal access to quality HIV & AIDS preventive education.

6.1.8. All schools shall have established and functional anti-HIV & AIDS clubs.

6.1.9. Annually, a team of peer educators shall be trained among staff and learners to provide informal source of HIV & AIDS Preventive education.

6.1.10. Quality condoms (male & female) shall be made available to staff. Access shall be free or subsidised.

6.1.11. Voluntary Counselling and Testing shall be made available to learners, staff, spouse and their children either at on-site VCT services within the Sector or through linkages with reproductive health clinics and the costs shall be borne as per the Ministries of Education and private educational institutions' medical benefits policy as applicable.

6.1.12. STI diagnosis and treatment services shall be made available to learners, staff, spouse and children through linkages with reproductive health clinics and costs shall be borne as per the Ministries of Education and private educational institutions' medical benefits policy as applicable.

6.1.13. The Sector shall ensure that work and learning environments are healthy and safe to prevent transmission of HIV.

6.2. VOLUNTARY COUNSELLING AND TESTING

6.2.1. The Sector shall maintain confidentiality regarding all medical information, including HIV & AIDS status.

6.2.2 The Sector shall encourage a supportive work/learning environment, in which staff and learners can discuss HIV & AIDS openly, including their own experience living with HIV & AIDS. Where staff and learners disclose that they or their dependants are living with HIV & AIDS, their confidence will be respected with regard to the circumstances in which the information was shared.

6.2.3 HIV-related information in respect of student admission, staff employment, staff or their dependants and learners shall be kept strictly confidential.

6.2.4 Staff and volunteers working for the Sector shall sign a commitment to confidentiality and shall be informed that the unauthorised disclosure of HIV-related information is a disciplinary offence that may result in a grievance procedure as per Ministries of Education and private educational institution's personnel policies. Depending on the situation, it may also lead to legal proceedings against the person who disclosed the information.

6.3. OCCUPATIONAL SAFETY OR OTHER EXPOSURE

6.3.1 The Sector, as far as possible, shall seek to minimize injury from motor vehicle accidents among staff and learners in the Sector; this shall be done by ensuring that:

- All vehicles belonging to the Sector are fully fitted with seat belts,
- All staff wear seatbelts when travelling on duty,
- All vehicles belonging to the Sector are regularly and properly serviced and maintained and equipped with first aid kits.

6.3.2. Helmets shall be provided and worn by all staff travelling by motorcycle while on duty.

6.3.3. The Sector shall develop procedures for the immediate referral for counselling, assessment and medical treatment (with post-exposure prophylaxis, of staff exposed to the risk of HIV infection (e.g. through accident or sexual assault), whether in the workplace or elsewhere.

6.3.4 The Sector shall ensure that facilities (Clinics, Laboratories etc) used by staff and learners uphold the observance of universal safety precautions.

6.3.5 The Sector shall provide insurance cover for work-related accidents and injuries for all staff.

6.3.6 The Sector shall ensure the availability of and access to protective clothing and materials including gloves *etc* in health facilities, laboratories, recreational facilities and official vehicles.

6.3.7 The Sector shall make special concessions with regards to staff posting in the interest of families to encourage fidelity amongst spouses.

6.4 REDUCTION OF STIGMA AND DISCRIMINATION

STIGMA AND DISCRIMINATION

6.4.1. The Sector shall undertake to address stigma and the natural fear of HIV & AIDS in the workplace and school environment through the training of staff and learners and the promotion of open, acceptable and supportive work and learning environment for staff and learners that choose to disclose their HIV status.

6.4.2 Persons in schools, institutions and workplaces infected by, or perceived to be affected by HIV will be protected from stigmatization and discrimination.

6.4.3 Employees living with HIV & AIDS shall have access to benefits from statutory social security and occupationally related schemes.

6.4.4 The Sector shall not discriminate on the basis of actual or perceived HIV status or membership of a group at increased risk of HIV infection.

6.4.5 Staff living with HIV & AIDS, shall be treated no less favourably than staff with other serious illnesses.

6.5 RECRUITMENT, EMPLOYMENT, ADMISSION AND TERMINATION

The only medical criterion for recruitment is fitness to work. HIV infection does not, in itself, constitute a lack of fitness to work.

6.5.1. HIV screening shall not be required either as a condition for admission into school, recruitment or for continuation of employment.

6.5.2. There shall be no obligation on applicants, or learners, student and staff to reveal their HIV status.

6.5.3. AIDS shall be regarded as other serious medical conditions in considering medical classification

6.5.4. Nothing in the pre-employment examination or in the relevant application or health forms shall be considered as obliging any candidate to declare his or her HIV status

6.5.5. HIV infection or AIDS shall not, of itself, be considered a basis for termination of employment. Staff with HIV-related illness shall continue in employment as long as they are fit for available and appropriate work. If fitness to work is impaired by HIV-related illnesses, reasonable alternative working arrangements shall be made by the employer;

6.5.6. Staff with HIV or AIDS shall enjoy health and social protection and be accorded the necessary care and support as applicable to other employees suffering from serious illness.

6.5.7. HIV testing shall not be required as a condition of eligibility for national social security schemes, general insurance policies, occupational schemes and health and life insurance

6.5.8. The Sector shall impose sanctions on any school authority that sends out learners or staff on account of real or perceived status of the staff and learners, or those of his/her parents or guardian. The Sector shall impose sanctions on any employee who discriminates against or stigmatizes another employee.

6.6 TREATMENT, CARE AND SUPPORT

6.6.1. The Sector shall reasonably accommodate the special needs of staff living with, or directly affected by, HIV & AIDS on a case-by-case basis, subject to the overall requirements of the organisation.

6.6.2. The Sector shall provide staff and learners with up-to-date information on VCT, as well as psychosocial support services.

6.6.3. The Sector shall inform staff and learners on the necessity for prompt treatment of opportunistic infections and disseminate up-to-date information on medical facilities/institutions experienced in handling HIV-related cases.

6.6.4. The Sector shall provide information on the availability of antiretroviral drugs/certified alternative medical treatment in designated healthcare centres.

6.6.5. Depending on the situation, reasonable accommodation of HIV infected and affected staff and learners shall be provided. This may include flexible working hours and times off for counselling and medical appointments, extended sick leave, transfer to lighter duties, part-time work, and return-to-work/resumption of school and provision for missed examinations.

6.6.6. The Sector acknowledges that HIV & AIDS impact on male and female staff differently. This includes the recognition that women normally undertake the major part of caring for those with AIDS-related illnesses, and that pregnant HIV positive women have additional special needs. Any staff and family assistance arrangements shall be designed to accommodate these differing impacts.

6.6.7. The Sector will also encourage positive health-seeking behaviour, cultivate the culture of openness at workplaces and other sites; encourage spiritual support through faith-based communities; reduce the workload for people living with and affected by AIDS; and provide medical benefits to staff members and their families.

6.7. ORPHANS AND VULNERABLE CHILDREN (OVC)

6.7.1. The Sector shall work to create linkages with the Child Development Units of Ministries of Women Affairs and other organizations and support groups working on OVC to ensure that they access their services.

6.7.2. The Sector shall ensure that the HIV status of a child or parents is not used as a criterion for admission or exclusion from school activities.

6.7.3. The Sector shall enforce the principle of non-discrimination and non-stigmatization of OVC within the Sector.

6.7.4. The Sector shall sensitize all staff and learners to the special physical and psychosocial needs of OVC and provide medical, psychosocial support and counselling services for OVC

6.7.5. The Sector shall ensure that OVC have free access to education and advocate for the removal of all barriers that prevent OVC from obtaining quality education

6.7.6. Heads of educational institutions shall as far as possible accommodate the peculiar needs of orphans and vulnerable children by way of flexible school hours to enable them access treatment or attend counselling sessions when necessary.

6.7.7. The Sector shall work in collaboration with Health Ministries to strengthen school-based clinics and referral systems to ensure OVC who are adolescents to access reproductive health services.

6.7.8. The Sector shall ensure that OVC have access to bursaries, loans, and scholarships for higher education.

6.8 Program Management and Development

Implementation, Monitoring and Evaluation

6.8.1. The Sector shall develop and implement active staff education strategies for HIV & AIDS.

6.8.2. The Sector shall provide information and training in the workplace and learning environment on issues raised by the epidemic, and appropriate responses, put in place and on the general needs of People Living with HIV & AIDS and their carers.

6.8.3. Capacity building programmes shall be targeted at, and adapted to the different groups being trained in the Sector: planners and administrators, supervisors, staff and learners.

6.8.4. Management within the Sector shall ensure that staff and learners that are HIV infected have access to appropriate, accurate and timely information on HIV & AIDS. Information will include the availability of local support organisations for People Living with HIV

& AIDS. Such information and training shall be gender sensitive, as well as sensitive to the peculiar needs of the physically challenged.

6.8.5.   Staff training on HIV & AIDS shall take place during paid working hours and attendance by all including senior staff shall be considered as part of work obligations.

6.8.6.   Specific training shall be organised for the infected and affected staff and learners on adequate nutrition and how to access treatment for Opportunistic Infections and ARV

6.8.7.   There shall be definite budgetary allocations for capacity building and training.

6.8.8.   All activities outlined within the implementation framework for this policy shall be routinely monitored

6.8.9.   A monitoring and evaluation plan shall be outlined within the policy implementation framework

6.8.10.   There should be annual review and planning meetings of the Sector's HIV & AIDS programme.

6.8.11.   Periodic evaluation of the impact of HIV & AIDS on the Sector will be conducted and disseminated accordingly.

6.9. GENDER, RIGHTS AND ETHICS

Gender

6.9.1.   The Sector acknowledges that HIV & AIDS impacts on male and female staff differently. This includes the recognition that women normally undertake the major part of caring for those with AIDS-related illnesses, and that pregnant women with HIV have additional special needs.

6.9.2.   Any staff, learner, and family shall be given assistance designed to accommodate these differing impacts and address gender inequalities as appropriate e.g. by encouraging and supporting men as care givers

6.9.3.   Physical and/or verbal abuse and harassment especially of female staff and learners shall attract strict disciplinary measures as stipulated by the Policy implementation team at all levels.

Rights

6.10.1   The Sector recognizes HIV & AIDS as human rights issues and is committed to ensuring that the rights of PLWHA and PABA are promoted and protected within the Sector.

6.10.2.   Compulsory and consensual testing of persons shall be prohibited. Rather, VCT shall be promoted.

6.10.3.   The right to VCT shall be forfeited by person(s) who engage(s) in sexual abuse, rape or deliberate transmission of the virus.

6.10.4.   No individual shall be denied employment or admission into schools by reason of their real or perceived status.

6.10.5.   As mentioned in section 2 of this document, the individual's right of confidentiality shall be respected, except in the cases of persons who engage(s) in deliberate transmission of the virus, rape or sexual abuse.

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6.10.6. No staff or learner shall be denied access to benefits legally accruing to all workers, staff and learners as a result of real or perceived HIV status.

6.10.7. The Sector shall support the enactment or strengthening of laws that protect the rights of workers, learners, PLWHA and PABA

6.10.8. The Sector shall ensure that in line with international regulations, strict ethical considerations are upheld in all research activities involving human subjects.

7.0. COUNSELLING, GRIEVANCES AND DISCIPLINARY PROCEDURES

The Sector shall identify qualified counsellors from whom staff, learners and dependants (in line with PSR policies and regulations) seek confidential advice, counselling and referral on HIV-related matters. Information shall also be provided on where such advice, counselling and referral can be accessed.

The Policy implementation team at all levels shall ensure that all complaints from staff and learners regarding non-compliance to this policy shall be duly investigated and referred to the appropriate authority. Staff can use grievance procedures from the established personnel policies for work-related grievances, including failure by the Sector to implement any aspect of this policy. Disciplinary proceedings, as per the personnel policy of the Ministries of Education, their affiliates and other stakeholders in the Sector, shall be instituted against any staff member who violates this policy.

If all the above administrative measures stipulated within the Sector to seek redress when provisions of this policy are violated against staff or learners as a result of their real or perceived HIV status, then the aggrieved person shall seek enhanced access to justice through:

i. independent, speedy and effective legal procedures for seeking redress,

ii. ability to bring cases under representative capacity including the possibility of public interested organisations bringing cases on behalf of PLWHA and PABA. Also redress may be sought through the National Human Rights Commission , Public Complaints Commission or the Legal Aid Council

8.0. RESPONSIBILITY FOR IMPLEMENTATION

The HIV & AIDS Co-ordinating Units of the Federal and State Ministries of Education and their parastatals have the primary responsibility for the implementation of this policy. The management of HIV & AIDS in the Sector is a complex issue requiring multi-sectoral interventions. Interagency collaboration and the forging of partnerships are paramount to the progress and success of interventions.

Furthermore, collaboration and partnership is a *sine-qua non*-for the provision of treatment and care to those infected with HIV & AIDS. As the Sector steps

up its prevention and treatment campaigns in its institutions and schools, it is also committed to fostering a supportive and compassionate work environment, free of fear and discrimination. For effective implementation of this document, the Sector shall work in partners and shall ensure appropriate training of staff, learners and their respective unions.

Annexes

Annex 1

Commitment to Confidentiality

1. I have read and understood the Sector HIV & AIDS Policy and Medical Benefits Policy.
2. I recognise that through my employment or association with Ministries of Education or her affiliates, I may learn information or have access to information of a highly personal and confidential nature.
3. I understand that such information includes information that someone:
   - May have HIV;
   - Has been asked to have an HIV test or been counselled about having a test for HIV;
   - Is receiving or has received treatment or counselling which suggests he or she may have HIV;
   - May have had experiences which put him or her at risk of contracting HIV; or
   - Has a close association or relationship with someone with HIV & AIDS.
4. I shall only disclose such information when authorised with the written consent of the person concerned.
5. I shall only disclose such information with the written consent of my boss/employer where the person involved proves difficult and it becomes obvious that non-disclosure poses any threat to the health of other members of the society.
6. I understand that any breach of this agreement shall be deemed as divulging official secret punishable under the relevant code of conduct and, or, possible legal proceedings against me.

Annex 2

HIV & AIDS National Policy Technical Working Committee

The Education Sector HIV & AIDS Policy Technical Working Committee (hereafter referred to as the 'Team') was made up of representatives of:

- Federal and State MOE Zonal HIV & AIDS Desk Officers
- NACA
- FME Legal Unit
- ARFH
- AHI
- UBEC

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- NEPWHAN
- NIEPA
- CISHAN
- NUT
- NAPTAN
- POLICY Project
- ENHANSE Project
- USAID
- UNESCO
- ActionAid
- SMARTWork
- Unicef

This team shall be charged with the following responsibilities:

1. Development of the Sector policy document and its subsequent review on a regular basis.
2. Provision of information and other requisites for the smooth implementation of the policies.
3. Planning, implementation and overall monitoring of the policies & their implementation.
4. Advocacy and information sharing on the policy
5. Production and dissemination of the policy