National Policy on HIV, STIs and TB for Learners, Educators, School Support Staff and Officials in all Primary and Secondary Schools in the Basic Education Sector 2017. Presented at KZN Provincial Council on AIDS Meeting on the 13th of September 2017
Venue: Greys Hospital Hall, Pietermaritzburg
Background

- SA faces dual epidemics of HIV and TB
- Access and retention in school is known as a protective factor against HIV infection, early pregnancy and other forms of vulnerability
- HIV and TB pose significant risk to the attainment of quality basic education as they negatively impact the efficiency, quality and output of the Basic Education Sector
- The epidemics deplete Basic Education's human capital, weaken its systems and structures and divert resources away from core mandate of improving teaching and learning
Why a new Policy?

- Alignment with National Strategic Plan 2017–2022
- A need for a clear policy position and response to HIV and AIDS in the Sector
- Approach to HIV, STIs, TB and unintended learner pregnancy as a management issue/business for everyone
- A need to focus on learners and educators, school support staff and officials
- A need also to focus on TB as the most common cause of death amongst people living with HIV
- HIV is the greatest risk factor for developing TB
- Integration of the most up-to-date approaches to HIV, STIs, TB and unwanted pregnancy prevention
- Policy has been gazetted – August 2017
Guiding Documents

- Sustainable Development Goals: 2, 3, 4
- National Strategic Plan on HIV, STIs and TB 2017–2022
- Children’s act no. 38 of 2005 as amended
- Criminal Law Amendment act 32 of 2007
- Action Plan to 2019 and Vision 2030
- Education White Paper 6 (DBE, 2001)
- Integrated School Health Policy (2012)
- DBE Care and Support for Teaching & Learning Framework (2008)
Guiding Principles

- Access to education
- Access to counselling, testing, treatment, care and support
- Access to information
- Access to protection
- Equity and protection from stigma and discrimination
- Fair labour practice
- Gender equality, sensitivity and responsiveness
- Privacy and confidentiality
- Reasonable accommodation
- Safety, security and health in workplaces and learning institutions
Policy Focus

- The policy focuses on learners, educators, school support staff & officials and its application to public & independent schools.
- The policy is informed by and also seeks to address key determinants of HIV prevalence and incidence which are: Age of sexual debut; condom use; multiple sexual partners; age-disparate partners; alcohol and drug abuse; knowledge and attitude; and STIs and learner pregnancy.
Policy Goals

• Improved coordination and mainstreaming of the policy to accelerate implementation
• Increased knowledge, cognitive skills and life skills in general and on HIV and TB in particular, to inform the life choices of all learners, educators, school support staff and officials to protect them from infection and disease;
• Improved access to HIV and TB prevention, diagnosis, treatment and care and support services to reduce the incidence and impact of HIV and TB within the sector; and
• Increased retention of learners, educators, school support staff and officials in a safe and protective education environment to improve system efficiency, quality and output
Policy themes

1. Prevention
2. Treatment, care, counselling & support
3. Impact Mitigation
4. Workplace issues
5. Creating an enabling environment
6. Management of policy response
THEME 1: CREATING AN ENABLING ENVIRONMENT

- **Objective**: creation of an enabling environment for the implementation of the policy response through public support and endorsement by leadership at all levels
- **Alignment**: Strategic Documents–NDP;NSP;PSP,etc
- **Mainstreaming**: Every unit at all levels– routine management
- **Management & Coordination**–structures– Clarity of roles and responsibilities– encouraging participation by sectoral and developmental partners leading to maximum realisation of educational and health rights of the learners
Objective: To provide skills, knowledge, information, materials, services and commodities for learners, educators, officials and support staff to empower them to make life choices to protect themselves from HIV, STIs and TB as well as unintended pregnancy.

- Age- and developmentally-appropriate Comprehensive Sexuality Education provided in schools through compulsory and timetabled subject in the curriculum (Life orientation) for all leaners.
Theme 2: Prevention (2)

- Curriculum will be supplemented through the innovative development and introduction of co-curricular, evidence-based learning activities, which will be regularly assessed from Grade 1 to Grade 12.

- Continuing Professional Teacher Development (CPTD) provided by the DBE.

- Learners, educators, school support staff and officials will be trained in universal precautions for HIV as well as universal airborne infection control precautions to prevent the spread of TB and other airborne diseases.
Through mechanism of the Integrated School Health programme (ISHP), DBE will promote multi-sectoral combination prevention approach which will entail the following:

- Facilitating access to and holistic information on the use of male and female condoms for learners over the age of 12 as well as all educators, school support staff and officials.
- Discreet access to male and female condoms (barrier protection) and information on their use will be available to all learners, – dependent only on age of consent, inquiry or need – by suitably persons in a supportive and friendly manner.
- Management and mechanisms for the storage and distribution of condoms will be informed by the local context of each institution.
- Detailed guidance will be provided in the supporting strategy and summarised in School Field Guides.
Counselling and services on sexual and reproductive health will be provided via mobile health units or alternative channels. This should include the offer and provision of dual protection and other contraception, HIV counselling and testing (HCT), adolescent-friendly health services and screening for STIs.

Services will be provided in a manner that protects the privacy and confidentiality of learners, educators, support staff and officials. Where this cannot be guaranteed, the persons concerned must be referred to a health facility to receive the services.

Participation is voluntary and access will be facilitated by the Principal and the School Management Team, in the language of choice wherever possible.
Theme 3: Treatment, Care, Counselling and Support (1)

- Objective: To provide a positive and supportive environment where all learners, educators, school support staff and officials living with or affected in any way by HIV, STIs, TB or unintended pregnancy among learners can access information, treatment, care, counselling and support.

  - Psychological Support Services (PSS) and other public and private professional services will be mobilised to help identify and refer learners, educators, school support staff and officials living with or affected by HIV, STIs and/or TB, personal trauma and abuse.
  - Schools will accommodate any reasonable absence required for diagnosis, treatment, care, counselling and/or support linked to HIV, STIs, TB or pregnancy – 14 days after starting treatment.
  - Provision of education on Gender Equity, Equality, Sensitivity and Empowerment.
Theme 4: Impact mitigation

- **Objective:** To mitigate the impact of HIV, STIs, TB and unintended learner pregnancy
  - Identification, assessment and support (material, psycho-social and curriculum support) of OVC at risk of dropping out of school or underperforming academically
  - Offering of additional and specialist support to learners affected by HIV, STIs, TB or pregnancy with special educational needs and/or disabilities
  - Provision of nutritional support through school feeding scheme in the most disadvantaged communities for learners made vulnerable by poverty, orphaning, HIV, STIs, TB, pregnancy or any other condition
  - Ensuring that lesbian, gay men, bisexual, transgender, queer, questioning and intersex (LGBTQI) learners, educators, school support staff and officials enjoy the same support, protection and freedom as their heterosexual peers – curriculum for CSE
Objective: workplace characterised by non-discriminatory labour practice, as well as sensitivity and responsiveness to the needs of those living with or affected by HIV, STIs or TB, and is free of risk and stigma for all educators, school support staff and officials.

- Education and awareness sessions for employees on HIV, STI, TB and reproductive health as well as zero tolerance for any form of sexual abuse directed at any learners or employee.
- Reasonable accommodation of employees living with or affected by HIV, STI or TB, including enforced absenteeism for treatment, counselling or the renewal of prescribed medication.
- Provision of all employees with male and female condoms and other forms of contraception in the workplace.
- Regular provision of universal access to screening, diagnosis, counselling, care and treatment in order to reduce disability and/or death resulting from HIV, STIs, or TB.
Objective: sustainable management structures and strategies are in place at all levels of the Basic Education Sector to plan and implement this HIV, STIs and TB Policy and monitor and report its progress and success over the life of the Policy.

- Establishment of a HEDCOM Sub-Committee, with an explicit mandate to coordinate and strengthen the work of the DBE at national, provincial, district and institutional level, and monitor implementation of this Policy.
- DBE will develop Field Guides for the application and use of this Policy at provincial, district and institutional levels, designed to address key issues and questions at each of these levels.
## Abridged policy implementation role-out plan

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time Frame</th>
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<tr>
<td>Advocacy to Top management &amp; political structures on the policy to solicit support</td>
<td>September 2017</td>
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<tr>
<td>Consultative workshops on the policy with relevant internal DOE structures at provincial, district and school levels</td>
<td>October 2017–March 2018</td>
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<td>Consultative meetings with key role players and stakeholders</td>
<td>October 2017–March 2018</td>
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<tr>
<td>Development of an inclusive Policy implementation Plan</td>
<td>September 2017–March 2018</td>
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<tr>
<td>Implementation, monitoring and support of the policy activities</td>
<td>October 2017–December 2018</td>
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<tr>
<td>Undertake periodic evaluations of the impact of the DBE National Policy on HIV, STIs and TB</td>
<td>January 2019–December 2019</td>
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Conclusion

- Collaboration and meaningful engagement of all stakeholders is critical for the successful implementation of this policy.
- Formation of a provincial Task team with all relevant role players from different branches of DoE, Sister departments and civil society. The team to be coordinated at the HODs office since it cuties across branches– Intergovernmental Relations.