



REPUBLIC OF KENYA

# HIV AND AIDS POLICY

MINISTRY OF GENDER, CHILDREN  
AND SOCIAL DEVELOPMENT

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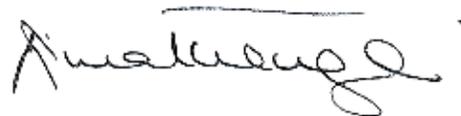
## PREFACE

The development of this policy has been necessitated by the challenges posed by HIV and AIDS in the Ministry. HIV and AIDS affect people mainly in their prime ages, between 15 and 49 years, who constitute the workforce. The illness and subsequent deaths of workers resulting from HIV and AIDS, has an enormous impact on the Ministry's provision of services. Resources that would have been used for service delivery and poverty reduction are diverted to mitigate the effects of the scourge.

In response to the government initiative through the Sessional Paper No. 4 of 1997 on AIDS, the Ministry has developed this comprehensive Workplace Policy as a guide in the fight against HIV and Aids in the work place. This policy is the formal starting point for the management of HIV and AIDS in the workplace as it establishes a coherent approach in addressing the issues associated with the pandemic. It provides consistency in the Ministry's dealings with employees through the programmes, procedures and rules that flow from the policy. The policy emphasizes the need for HIV and AIDS activities to be mainstreamed into the core activities of the Ministry's Departments, Semi Autonomous Government Agencies (SAGAs) and Institutions. To achieve this, there is need to ensure adequate allocation of human and financial resources for HIV and AIDS programmes.

The policy provides guidance for those who deal with the day-to-day HIV and AIDS related issues and problems that arise within the workplace and also outlines employee's rights, responsibilities and expected behavior in the workplace. The strategies outlined in this policy aim at minimizing the effects of the pandemic in the Ministry by providing the means towards greater efficiency in service delivery. The Policy's emphasis is on performance improvement as officers will be healthier and live longer regardless of their HIV status once the condition is properly managed.

The implementation of this policy will go along way in mitigating the impact of the pandemic in the Ministry



**HON. ESTHER MURUGI MATHENGE, EGH, MP  
MINISTER FOR GENDER, CHILDREN AND SOCIAL DEVELOPMENT**

## FOREWORD

Since the first case of HIV and Aids was diagnosed more than two decades ago, the pandemic has continued to claim many lives in the country. Until recently HIV and AIDS data showed that the most at risk of infection were between the ages of 15-49 years. However, the 2007 Kenya AIDS Indicator Survey (KAIS) has shown that the prevalence rate has extended to 60 years and beyond .This implies that all employees who will be retiring at age 60 should become a concern of the Ministry. Likewise children in both statutory and charitable children institutions are vulnerable to the infection.

The Ministry as one of the employers in the public sector realizes the need to have a co-ordinated intervention strategy in the workplace to mitigate the impact of the pandemic. Consequently, a ministerial task force was constituted to develop this workplace policy on HIV and AIDS. The policy will be a handy reference to tackle the challenges brought into the occupational settings by the effects of HIV and AIDS and guide Human Resource managers in developing workplace programmes to facilitate effective and planned responses for the prevention and management of HIV and AIDS at the workplace.

I wish to thank the ministerial task force on Workplace Policy on HIV and AIDS for their effort and commitment in the development of this policy.



**DR. JAMES W. NYIKAL, CBS  
PERMANENT SECRETARY**

## DEFINITION OF CONCEPTS

<b>Affected</b>	A person who is feeling the impact of HIV and AIDS through sickness or loss of relatives, friends or colleagues.
<b>AIDS</b>	Acquired Immune Deficiency Syndrome: a cluster of medical conditions often referred to as opportunistic infections.
<b>Care</b>	Promotion of a person's well-being through medical, physical, psychosocial, spiritual and other means.
<b>Comprehensive Care</b>	A range of services offered to HIV positive persons including, treatment, clinical, physical, nutritional and psychosocial support.
<b>Counseling</b>	A session where a person with difficulties is assisted to think through the problem and find a possible solution.
<b>Confidentiality</b>	The right of every person, employee or job applicant to have his/her medical or other information, including HIV status kept secret.
<b>Evaluation</b>	The assessment of the impact of a programme at a particular point in time.
<b>HIV</b>	Human Immunodeficiency Virus: a virus that weakens the body's immune system, ultimately causing AIDS.
<b>HIV Screening</b>	A medical test to determine a person's sero-status
<b>Infected</b>	A person who is living with the virus that causes AIDS.
<b>Manager</b>	A person who is in charge of staff and other resources.
<b>Monitoring</b>	Continuous assessment of a programme. An epidemic occurring
<b>Pandemic</b>	simultaneously over a wide area and affecting many people.
<b>Policy</b>	A statement setting out a department's or organization's position on a particular issue.
<b>Post Exposure Prophylaxis</b>	Immediate treatment given to a person who is presumed to have been exposed to HIV.

<b>Prevalence of HIV</b>	The number of people with HIV at a particular point in time, often expressed as a percentage of the total population.
<b>Prevention</b>	A programme designed to combat HIV infection and transmission.
<b>Programme</b>	A plan of action which includes planning, resource allocation, implementation, monitoring and evaluation.
<b>Support</b>	Services and assistance that are provided to help a person cope with difficult situations and challenges.
<b>Treatment</b>	A medical term describing the steps taken to manage an illness.
<b>VCT</b>	Voluntary Counseling and Testing: A process that enables people to willingly know their sero-status to help them plan their lives and make informed decisions.
<b>Workplace</b>	Occupational settings, stations and places where workers spend time for gainful employment.
<b>Workplace Programme</b>	An intervention to address a specific issue within the workplace.

## **ABBREVIATIONS AND ACRONYMS**

ACU	Aids Control Unit
AIDS	Acquired Immune Deficiency Syndrome
ARVs	Anti Retro Virus
CEO	Chief Executive Officer
DPM	Directorate of Personnel Management
FGM	Female Genital Mutilation
GBV	Gender Based Violence
HAPC	HIV and AIDS Prevention and Control
HIV	Human Immunodeficiency Virus
HOD	Head of Department
IEC	Information, Education and Communication
ILO	International Labour Organization
MIR	Minimum Internal Requirements
KAIS	Kenya AIDS Indicator Survey
MSM	Men having Sex with Men
MSPS	Ministry of State for Public Service
MTEF	Medium Term Expenditure Framework
NACC	National AIDS Control Council
PEP	Post Exposure Prophylaxis
PLWHA	People Living with HIV and AIDS
PSCK	Public Service Commission of Kenya
SAGAs	Semi Autonomous Government Agencies
STIs	Sexually Transmitted Infections
VCT	Voluntary Counseling and Testing

## **1.0 INTRODUCTION**

The HIV and AIDS pandemic is now a global crisis and constitutes one of the most formidable challenges to development and social progress. It is eroding decades of development gains, undermining economies, threatening security and destabilizing societies.

HIV and AIDS profoundly disrupt the economic and social bases of families. It mainly affects people in their prime years of life, the hardest hit being those in the productive ages of between 15 and 60 years. The death of parents has left 1.5 million children as orphans under the care of grandparents/guardians who may not have the capacity and skills to look after them well. It is also affecting the fundamental capacities and rights of staff at the workplace, particularly with respect to discrimination, stigmatization and care and support of those living with and affected by HIV and AIDS. This has also led to high dependency a rate which aggravates problems associated with the already widespread poverty.

Illnesses and deaths associated with HIV and AIDS has enormously impacted negatively on the Ministry's service delivery. Budgetary resources allocated for the provision of medical services are hardly enough to cater for the increasing cases requiring care and support of those infected and affected.

As a response to this calamity, the Ministry of State for Public Service has put in place a national public sector workplace policy on HIV and AIDS where by every public organization is required to develop their own policies. It is in this context that the Ministry has developed this workplace policy which aims at providing guidance to the management of employees who are infected and affected by HIV and AIDS and prevention of further infections. The policy also defines the Ministry's position and practices for the comprehensive response to HIV and AIDS pandemic. In addition, it provides guidance for those who deal with the day-to-day HIV and AIDS related issues and problems that arise within the workplace and outlines employee's rights, responsibilities and expected behavior in the workplace.

This policy also stipulates the appropriate institutional framework as well as monitoring, evaluation and review mechanism.

## **2.0 RATIONALE**

HIV and AIDS present the greatest challenge to the performance of this Ministry and have put immense pressure in the workers. It has led to management succession problems, loss of skilled and experienced manpower due to deaths, loss of man hours due to prolonged illnesses, absenteeism, reduced performance, increased stress, stigma, discrimination and loss of institutional memories, among others

As a result of the negative impact of HIV and AIDS in the workplace, the Ministry has the challenge to provide a policy framework for the prevention, treatment, care and support of the infected and affected.

So far, there has been no formal ministerial policy to guide staff to address HIV and AIDS issues. There is therefore, need to develop a clear, consistent, coherent and harmonized policy framework on HIV and AIDS for all ministry employees.

### **3.0 OBJECTIVES**

The main objective of this policy is to provide a framework to address HIV and AIDS in the Ministry.

Specifically, the policy aims at:

- Setting Minimum Internal Requirements (MIR) for managing HIV and AIDS in the Ministry;
- Establishing and promoting programmes to ensure non-discrimination and non-stigmatization of the infected;
- Contributing to national efforts to minimize the spread and mitigate against the impact of HIV and AIDS;
- Ensuring adequate allocation of resources to HIV and AIDS interventions;
- Guiding human resource managers and employees on their rights and obligations regarding HIV and AIDS.

### **4.0 SCOPE**

This policy sets standards for managing HIV and AIDS for workplace Programmes and applies to all employees of the Ministry.

### **5.0 LEGAL AND REGULATORY FRAMEWORK**

The Ministry will be guided by existing statutes and regulations for responding to HIV and AIDS related issues in the workplace. Reference will also be made to the international obligations including the International Labour Organization (ILO) Code of Practice on HIV and AIDS and World of Work (2001). Other relevant legal and regulatory provisions include the following:

#### **5.1 The Constitution of Kenya**

The Constitution of the Republic of Kenya is the supreme law of Kenya and all other laws must comply with it. The fundamental rights in the constitution provide every person with the right to equality and non-discrimination.

## **5.2 Service Commissions Act Cap 185 (1985 Revised)**

The Act prohibits discrimination in appointment, promotion and transfer. In particular the Act provides in regulation 13 of the Public Service Commission of (PSC) Regulations that the appointment, promotion and transfer of a public officer shall take into account only the merit, ability, seniority, experience and official qualifications of the candidate.

Under regulation 19, the Act provides that if a public officer is incapable by reason of any infirmity of mind or body of discharging the functions of his public office, he/she may present himself/herself before a Medical Board with a view to it being ascertained whether or not he/she is incapable as aforesaid.

Further under part IV of the PSC Regulations, an officer must be informed and given a chance to respond and appeal to the Public Service Commission of Kenya in accordance with the provisions laid down in the Regulations in respect of disciplinary proceedings or any termination of employment. No punishment shall be inflicted on any public officer which would be contrary to any law.

These provisions cover other public officers under their respective Service Commissions in accordance with the relevant regulations.

## **5.3 The Employment Act Cap. 226**

The Employment Act sets out the minimum standards applicable for conditions of employment relating to wages, leave, health and contracts of service including termination of the contract.

Under the Act, the employer shall provide proper healthcare for his employees during serious illness. The employer can only discharge this function if the employee notifies the employer of the illness.

The Act implies that there should be no discrimination on the grounds of HIV and AIDS status.

## **5.4 HIV and AIDS Prevention and Control Act**

The HIV and AIDS Prevention and Control Act makes specific reference to HIV and AIDS in relation to discrimination, privacy, confidentiality and personal rights.

Specifically the Bill provides:

- Under section 13, no person shall compel another to undergo an HIV test save where a person is charged with an offence of a sexual nature under Chapter XV of the Penal Code;
- Section 22 prohibits the disclosure of an HIV test result of another

person without his written consent; and

- In Part VIII, the Bill makes it an offence for any person to be discriminated against on the grounds of actual, perceived or suspected HIV status, in relation to employment, access to education, credit, insurance, healthcare, travel, habitation and seeking public office.

### **5.5 Occupational Safety and Health Act 2007**

This Act provides for Safety, Health, and welfare of persons employed and all persons lawfully present at workplaces and for matters incidental thereto and connected therewith.

The Act requires of the employer, as far as it is reasonably practicable, to create a safe working environment for the employees. The implication of the Act regarding HIV is that the employer needs to ensure that the risk of possible infection in the workplace is minimized.

### **5.6 Sexual Offences Act**

This Act provides for penalties against sexual offences relating to Workplace. The Act also provides for measures aimed at checking deliberate transmission of HIV or any other life threatening sexually transmitted disease.

### **5.7 Public Sector Workplace Policy on HIV and AIDS by Ministry of State for Public Service (MSPS)**

This policy requires that every public organization should have its specific workplace policy on HIV & AIDS.

## **6.0 GUIDING PRINCIPLES**

The Principles that guide this policy are in accordance with international conventions, national laws, policies, guidelines and regulations. These principles are:

### **6.1 Recognition of HIV and AIDS as a Workplace Issue**

HIV and AIDS is a workplace issue and should be treated like any other serious illness/condition in the workplace. This is necessary not only because it affects the workforce but the workplace, being part of the local community, has a role to play in the wider struggle to limit effects of the pandemic.

### **6.2 Non-Discrimination**

There should be no discrimination and/or stigmatization of workers on the basis of real or perceived HIV status. Discrimination and stigmatization of the infected inhibits efforts aimed at promoting HIV prevention.

### **6.3 Gender Equality**

Gender dimensions of HIV and AIDS should be recognized. Women are most likely to become infected and are more often adversely affected by the HIV and AIDS pandemic 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, equal gender relations and the empowerment of women are vital to successful prevention of the spread of HIV infection and enable women to cope with HIV and AIDS.

### **6.4 Children and HIV and AIDS**

Children are infected and affected by HIV and AIDS. Respect for the view of the child as a principle is crucial as it affirms that children are entitled to express their views in all matters affecting them and requires that those views be given due weight in accordance with the child's age and maturity. It recognizes the potential of children to enrich decision-making processes and to participate as citizens and actors of change. This principle underscores the importance of ensuring that orphans and vulnerable children participate in decisions that affect them, such as those concerning their care and inheritance, and that they have importance contributions to make in the fight against HIV and AIDS

### **6.5 Older Persons and HIV and AIDS**

Older persons are affected by HIV&AIDS in different ways. They are the caregivers of orphans left by their children who may have been employees of the Ministry. In such circumstances the Ministry ACU will refer such cases to relevant organizations and programmes such as Social transfer (Cash Transfer) for necessary support

Older persons are also at risk of contracting infections as they care for infected children. They will be guided on how to take care of themselves.

### **6.6 Persons with Disabilities and HIV and AIDS**

Persons with Disabilities working in the Ministry will be accorded equal treatment with the able bodied employees. They will be facilitated to work for 60 years as provided for in the Disability Act, 2003.

### **6.7 Safe and Healthy Work Environment**

The work environment should be healthy, safe and adapted to the state of health and capabilities of workers. All managers have a responsibility to minimize the risk of HIV transmission by taking the appropriate first Aid/Universal infection control precautions at

the workplace.

## **6.8 Social Dialogue**

A successful HIV and AIDS policy requires co-operation, willingness and trust between management, employees and their families.

## **6.9 Screening for purpose of Employment**

HIV and AIDS screening should not be required of job applicants or persons in employment and testing for HIV should not be carried out at the workplace except as specified in the National HIV and AIDS policy on testing.

## **6.10 Confidentiality**

Access to personal data relating to a worker's HIV status shall be bound by the rules of confidentiality consistent with existing ILO code of practice, medical ethics and relevant laws.

## **6.11 Continuation of Employment Relationship**

HIV infection is not a cause for termination of employment. Persons with HIV related illnesses should be allowed to work for as long as they are medically fit in available appropriate work.

## **6.12 Prevention**

HIV infection is preventable. Prevention of all means of transmission can be achieved through behavior change, knowledge, treatment, and the creation of a non-discriminatory environment. Social partners are in a unique position to promote prevention effort, particularly in relation to changing attitudes and behavior through the provision of information and education and in addressing socio-economic factors.

## **6.13 Care and Support**

Solidarity, care and support should guide the response to HIV and AIDS at the workplace. All employees are entitled to affordable health services and to benefits from statutory and occupational schemes including relevant insurance.

## **6.14 Management Responsibility**

The Ministry's management will ensure the highest-level of leadership as part of the government's campaign against the pandemic.

## **6.15 Partnerships**

The Ministry's leadership will be responsible and accountable for implementation of this policy. It will at all times develop effective partnerships to enhance the success of the policy

implementation.

### **6.16 Fair Labour Practices**

Every person, whether infected or affected, has the right to fair labour practices in terms of recruitment, appointment and continued enjoyment of employment, promotion, training and other benefits. HIV testing as a requirement for any of the above is prohibited.

### **6.17 Workplace Ethics**

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

### **6.18 Involvement of People Living with HIV and AIDS (PLWHA)**

The involvement of PLWHA in educating and informing other workers shall be promoted at all levels of the Ministry.

## **7.0 MANAGEMENT OF HUMAN RESOURCE**

The Human Resource is the most important factor in the Ministry's service delivery as it controls all other factors. Success or failure of the Ministry depends largely on the human resource and there is need to examine the issues that affect it. According to ILO, HIV and AIDS is a major threat to the world of work because it affects the most productive segment of the labour force. It is imposing huge costs on enterprises in all sectors through declining productivity and earnings, increasing labour costs and loss of skills and experience. It has also led to high staff turnover, high costs in training and replacement, high health care and employee welfare costs including funeral expenses.

In this regard, managers in the Ministry have a particularly important role to play in its response to HIV and AIDS. It is their responsibility to address the problems caused by HIV and AIDS in the workplace at both Ministerial and individual levels. The dichotomy between Ministerial requirements and those of individuals living with or affected by HIV and AIDS makes this a challenging task.

In this respect the policy addresses the following human resource management issues:

### **7.1 Recruitment and Promotion**

HIV screening should not be a requirement for staff recruitment and/or promotion.

### **7.2 Sick Leave**

Sick leave will be provided for as stipulated in the relevant service regulations. However, additional sick leave days will be decided by the management on case-by-case basis at the discretion of the Authorized Officer/Chief Executives.

### **7.3 Working Hours**

Normal working hours will continue to apply for all employees. However, a more flexible and humane approach will be applied for those who are infected or affected.

### **7.4 Counseling Services**

The Ministry will ensure that there are adequate trained counselors and peer counselors in departments, institutions and SAGAs.

### **7.5 Termination of Employment**

The policies and procedures pertaining to termination of services will apply to all employees. No employee shall be dismissed or have employment terminated based solely on perceived or actual HIV status.

### **7.6 Medical Privileges**

The normal provision of medical privileges will continue to apply. However, to reduce the negative effects of illness and incapacity on employees the Ministry, in liaison with relevant stakeholders, will take steps to improve access to comprehensive care.

### **7.7 Deployment, Transfers and Field assignments**

The Ministry will ensure:

- Where possible, spouses are not separated to minimize vulnerability;
- Where employees are deployed in remote areas, the period served in such areas is limited to three years. Employees in these areas will also be facilitated to make frequent visits to their families;
- Staff requiring access to family support or medical care are deployed appropriately; and
- Where fitness to work is impaired by illness, reasonable alternative working arrangements are made.

### **7.9 Housing and Accommodation**

The prevailing Government policy on housing will continue to apply. Suitable accommodation for employees requiring institutional housing will be provided and where this is not possible, employees will be allowed to reside outside the Institutions and be provided with house allowance.

### **7.10 Training and Development**

The Ministry will:

- Educate and train all its employees on HIV and AIDS related issues;
- Monitor and evaluate human resource so that there is adequate supply of

- appropriately skilled manpower to meet its needs for service delivery;
- Mainstream HIV and AIDS in all training Programmes, institutions curricula and undertake regular updates to respond to the dynamics of HIV and AIDS; and
- Ensure there is appropriate recognition of HIV and development of career paths that encourage staff

### **7.11 Sexual Harassment, Abuse and Exploitation**

There shall be zero tolerance to sexual harassment, abuse and exploitation in the workplace. Involvement in these vices shall be treated as gross misconduct and where proven, shall lead to disciplinary action.

It is the moral responsibility of infected employees to take care of themselves and others to avoid re-infection and infecting others.

### **7.12 Gender Responsiveness**

HIV and AIDS affects and impacts on women and men differently due to their biological, social, cultural and economic circumstances. Application of this policy should be responsive to their different needs.

### **7.13 Exposure at the Workplace**

- Employees who accidentally get exposed to HIV in the course of their duties shall be facilitated to access immediate Post-Exposure Prophylaxis (PEP) and follow up in the form of treatment in case of infection.
- Provision shall be made to ensure safety and absence of risk to health, arising from the use, handling, storage and transport of articles and substances.

### **7.14 Retirement on Medical Grounds**

HIV and AIDS is not a cause for termination of employment. As with many other illnesses, persons with HIV-related illnesses should be able to work as long as medically fit for available appropriate work or until declared unfit to work by a Medical Board. Where an employee is medically unfit to continue working, the Government will hasten the retirement process.

### **7.15 Terminal Benefits**

Whenever an employee retires or dies due to HIV and AIDS or other reasons the Ministry will facilitate speedy processing of terminal benefits. Accordingly, it will be necessary for both the managers, employers and employees to ensure that the next of kin records are updated regularly.

## **7.16 Confidentiality and Disclosure**

- Disciplinary action, consistent with relevant legislation and regulations, will be taken against any employee who discloses a fellow employee's HIV sero status without consent.
- Creating a climate of openness about HIV and AIDS is an effective prevention and care strategy. The Ministry shall create a working environment in which employees can feel safe to disclose their HIV status

## **7.17 Discrimination and Stigma**

- All employees have the same rights and obligations as stipulated in the terms and conditions of service.
- No employee or job applicant shall be discriminated against in access to or continued employment, training, promotion and employee benefits on the basis of their actual or perceived HIV status.
- Employees shall not refuse to work or interact with fellow colleagues on the grounds that the latter are infected or perceived to be infected. Such refusal shall constitute misconduct

## **7.18 Grievances and Concerns**

The Authorized Officer/Chief Executives shall establish and maintain communication channels for employees to raise concerns and grievances and access support relating to HIV and AIDS.

## **7.19 Management Responsibility**

A manager has an obligation and a responsibility to:

- Show leadership as part of the national campaign to address the pandemic;
- Be educated and informed about the pandemic including developments in respect of prevention and treatment;
- Implement this policy, as well as continuously disseminate information about HIV and AIDS to all employees; and
- Include HIV and AIDS workplace issues in the Ministry's Strategic Plan.

## **7.20 Employee Responsibility**

- It is the responsibility of an employee to take appropriate action on being informed

about HIV and AIDS, to protect him/her and the family and seek guidance and counseling.

- It is the moral responsibility of infected employees to take care of themselves and others to avoid re-infection and infecting others.

## **8.0 HIV AND AIDS PROGRAMMES IN THE WORKPLACE**

The main thrust of this policy revolves around initiating and carrying out programmes in the workplace. The component of the programmes will include but not limited to the following:

### **8.1 Prevention and Advocacy**

The programmes will be Ministry specific and will involve creation of HIV and AIDS awareness and promotion of positive cultural and behavioral change among employees. Some of these are:

- Promotion of testing and support programmes in the workplace;
- Provision of information and materials on safe sex practices;
- Promotion of attitude and behavior change including abstinence;
- Establishment of HIV and AIDS resource centers;
- Incorporation of HIV and AIDS education curricula in training institutions;
- Encouraging HIV and AIDS peer education and counseling programmes at the workplace;
- Creating a pool of resource persons on HIV and AIDS intervention programmes.
- Provision of VCT services
- Sensitization of employees on emerging issues and their relation to HIV and AIDS from time to time e.g. FGM,GBV,MSM and male circumcision among others

### **8.2 Care and Support of the Infected and Affected**

Comprehensive care of the infected and affected calls for a collaborative approach involving various stakeholders. This will also help mitigate the negative socio-economic impact.

Some of the critical components include:

- Establishment of appropriate linkages, networks and referral systems for comprehensive care and support;
- Setting up and strengthening social support structures;

- Linking infected employees and their families to support groups;
- Strengthening of institutional health facilities where available;
- Provision of counseling services at the workplace;
- Provision of ARVs and nutritional support to the infected employees.

## **9.0 IMPLEMENTATION**

The ultimate goal of this policy is to ensure that the Ministry is able to sustain the provision of quality service in spite of the challenges posed by HIV and AIDS. The success of this policy will therefore depend on its effective implementation and a coordinated effort of stakeholders. The following components will form the implementation modalities:

### **9.1 Institutional Framework**

An Institutional Framework is necessary for the implementation of the workplace policy particularly with respect to human and financial resource management. This calls for high level commitment by the Ministry in terms of allocation of adequate resources for HIV and AIDS programmes in the annual budgets.

Existing ACU and Sub- ACUs will be strengthened and decentralized to Provincial and District levels. These structures will be staffed by senior officers on full time basis.

The ACU will be manned by at least three (3) senior officers and will report to the Permanent Secretary.

The Permanent Secretary/Chief Executives are responsible and accountable for implementing this policy and development of appropriate HIV and AIDS programmes and practices in their workplaces. They shall also take immediate and appropriate corrective action when provisions of this policy are violated.

### **9.2 Responsibility and Accountability**

#### **9.2.1 The Permanent Secretary/CEOs/HODs will:**

- Develop, implement and review this policy;
- Advocate for HIV and AIDS issues in decision making at all levels;
- Advocate for a scheme of service for officers handling HIV and AIDS related duties to ensure their motivation and retention;
- Ensure allocation of resources and evidence based budgeting;
- Monitor and evaluate programmes related to this policy;

- Strengthen commitment at all levels of management;
- Create partnerships with and across Ministries, development partners and stakeholders;
- Provide support to ACU and Sub-ACUs;
- Mainstream HIV and AIDS in Ministry's planning , MTEF budgeting process and all other programmes and activities; and
- Chair Ministerial HIV and AIDS committee.

### **9.2.2: AIDS Control Unit/Sub-ACUs**

ACU will be responsible to the PS while Sub-ACUs will be responsible to CEOs and HODs for implementation of this workplace policy.

The functions of the ACUs will be to:

- Ensure that HIV and AIDS is mainstreamed into the core functions of the Ministry/Departments/SAGAs;
- Provide information necessary for planning and budgeting for HIV and AIDS programmes;
- Ensure that HIV and AIDS programmes are implemented within the specific units;
- Develop and adopt guidelines for the use of allocated resources for HIV and AIDS activities;
- Make proposals for enhancing HIV and AIDS programmes;
- Develop Workplans for the fight against HIV and AIDS in the Ministry;
- Constitute appropriate HIV and AIDS committees at various levels
- Conduct statistical analysis and compile data for use by the Ministry
- Liaise with NACC, MSPS (HIV and AIDS Secretariat) and other ACUs for best practices sharing and implementation;
- Introduce new services or models of service delivery to deal with the dynamics of HIV and AIDS;
- Advocate for legislation to protect the infected from discrimination and to encourage effective roles in prevention and care by all relevant stakeholders;

- Develop Ministry/units specific Information, Education and Communication (IEC) materials;
- Ensure that this policy is disseminated to Ministry staff;
- Ensure that the services of ACU are accessed at all levels; and
- Conduct quarterly monitoring of programmes and annual evaluations.

## **10.0 MONITORING, EVALUATION AND RESEARCH**

In order to plan, implement and evaluate its HIV and AIDS programmes effectively, the Ministry will undertake a survey to establish baseline data and regular risk and impact assessment studies. The studies will include knowledge, attitudes and behaviour/practices. Studies will be carried out in consultation and with the consent of employees and their representatives and in conditions of complete confidentiality.

## **11.0 POLICY REVIEW AND DEVELOPMENT**

This policy will be reviewed and revised as necessary in the light of changing conditions and the findings of surveys/studies disseminated.