



## **IEU POLICY ON HIV/AIDS**

### **A. INTRODUCTION**

Infection with the human immunodeficiency virus (HIV) and the acquired immunodeficiency syndrome (AIDS) represent urgent worldwide problems with broad social, cultural, economic, political, ethical and legal dimensions and impact.

Today a substantial proportion of the people in all countries of the world are between the ages of five and eighteen years. A large number of them are in school systems or are in communication with those who are. Information, values and skills conveyed in schools have considerable impact on the lives of these young people. Active involvement of teachers through their representative organisation in planning, implementing and evaluating (in cooperation with health, communication and social science experts) school health promotion programs to deal with issues of AIDS and other sexually transmitted diseases (STD) is a necessity if knowledge is to be increased and risk behaviour reduced among young people. In addition, their involvement is critical in initiatives to combat ignorance and to prevent discrimination against both their colleagues and students who are HIV-infected.

To date, epidemiological studies from throughout the world have documented that the human immunodeficiency virus (HIV) is transmitted in only three ways:

1. Unprotected anal or vaginal intercourse with an HIV-infected person;
2. Exposure to HIV-infected human tissues, such as blood, blood products, or donated organs and semen (Exposure to blood principally involves the transfusion of HIV-infected blood or the use of HIV-contaminated syringes and needles and other unsterilized skin piercing instruments);
3. From infected woman to foetus or infant before, during or shortly after birth (perinatal transmission).

HIV is not transmitted by casual person-to-person contact in any setting. There is considerable no evidence to show that HIV is transmitted by insects, food, water, sneezing, coughing, toilets, urines, swimming pools, sweat, tears, shared eating and drinking utensils or other items such as protective clothing, telephones, shared toys, books furniture or athletic clothing.

It is important that everyone involved in school settings understands and communicates to others that ordinary contact between students, between teachers, between student and teacher and teacher and student does not involve a risk of acquiring or transmitting HIV. The primary risk behaviours that lead to HIV infection in students between the ages of five and eighteen years are the same as those for adults: unprotected anal or vaginal intercourse, contact with the bloodstream by HIV-contaminated unsterilized skin piercing equipment (usually needles but also instruments for scarification, etc) and, in countries where the screening of blood for HIV antibodies is not yet routine, by blood transfusions.

## **B. NATIONAL HIV/AIDS STRATEGY**

1. The IEU endorses the National HIV/AIDS strategy which was established by the Federal and State Governments for the positive initiatives that have already been achieved.
2. In particular, the IEU endorses the following guiding principles of the Strategy:
  - a. transmission of HIV can be prevented by changes in individual behaviour that require education and prevention programs that are adequately funded by State and Federal Governments
  - b. individuals must accept responsibility for protecting themselves becoming infected through sexual behaviour or through the use of intravenous non prescription drugs
  - c. the community has a right to expect that the appropriate public health and education strategies will be put into place to combat the HIV epidemic
  - d. the law should complement and assist the public health and education programs
  - e. public health objectives will be most effective if there is cooperation from those with HIV infection or the most at risk
  - f. no HIV testing should occur without the consent of the individual, appropriate pre and post test counselling should occur and the result should remain confidential
  - g. those infected with HIV have the right to full participation in community activities without discrimination and are entitled to appropriate comprehensive health care, income support and other community services as other community members
  - h. professional care givers have a duty to care for individuals with HIV
  - i. governments, employers and unions have a responsibility to provide safe working conditions and training programs that minimise the risk of occupational HIV transmission
  - j. adequately funded research is essential to the management of the HIV epidemic
3. The Role of IEU

The IEU acknowledges it has a role to play within the HIV/AIDS Strategy by:

- a. Safeguarding the rights of the people in the educational community. The IEU will strongly promote the following rights of people in the education community in relation to HIV/AIDS:
  - i. Students will not be excluded from education in kindergartens, schools and TAFE institutes or universities because of their inferred HIV/AIDS status

- ii. Students or education workers who have AIDS will not be denied treatment of health care because of the notion of user pays
  - iii. Students or educational workers should not be exposed to HIV infection because of inadequate education and prevention programs
  - iv. No student or education worker shall face discrimination in educational institutions because of preferred sexuality, race, gender, or inferred HIV/AIDS status
  - v. No student or education worker will have mandatory HIV/AIDS testing to gain admittance to courses or employment in education institutions
- b. Promoting specific support for people with AIDS in the Educational Community

IEU will assist education workers and students who have AIDS to ensure that:

- i. they have access to workers' compensation when that is appropriate
- ii. they receive free and accessible treatment when it becomes available
- iii. support programmes are available for partners who are caring for people with AIDS.
- iv. they are protected from discrimination, intolerance and homophobia
- v. they receive free vaccinations when a vaccine is developed

### **C. PERSONS WORKING IN OR ATTENDING SCHOOL**

1. HIV/AIDS screening: HIV/AIDS screening, whether direct (HIV testing), indirect (assessment of risk behaviours), or the seeking of information about tests already taken, is not necessary and should not be required.
2. Confidentiality: Confidentiality regarding all medical information, including HIV/AIDS status and sexuality must be maintained.
3. Privacy: There should be no obligation on the teacher, other school staff member or pupil to inform the school administration or the medical office regarding his or her HIV/AIDS status.
4. Protection of school employees and students: Persons in the school who are HIV-infected or perceived to be HIV-infected must be protected from stigmatization and discrimination by co-workers, unions, employers, students, parents and the community. Information and education are essential to maintain the climate of mutual understanding necessary to ensure this protection.
5. Access to services: School employees and students, teachers, other staff, students and their families should have access to information and educational programs on HIV/AIDS, as well as relevant counselling and appropriate referral.
6. Benefits: HIV-infected teachers and other staff members should not be discriminated against; they should have access to standard social security benefits, superannuation and occupationally related benefits.
7. Reasonable changes in working or schooling arrangements: HIV infection by itself is not associated with any limitation in fitness to work or attend school. If fitness to work or to attend school is impaired by HIV-related illness, reasonable alternative working or schooling arrangements should be made. Decisions about impairment should be based on medical criteria.
8. Continuation of employment or school attendance: HIV infection is not a cause for termination of employment or assignment. As with many other illnesses, persons with

HIV-related illnesses should be able to work or attend school so long as medically fit for available, appropriate work or activities.

9. Partners of people with AIDS should be afforded the same rights as other workers in relation to carer's leave regardless of sexuality.

#### **D. HIV/AIDS HEALTH PROMOTION PROGRAMS**

1. Comprehensive HIV/AIDS health promotion programs should take place within school settings as an integrated part of the curriculum. Programs should give students the information and skills they need to make responsible choices about behaviours which will reduce the risk of HIV transmission or infection. Programs should recognise that some students will be homosexual and homosexually active; and that in the Australian context they are epidemiologically at the greatest risk of HIV infection. Such programs are likely to be most effective if they value the development of the self esteem of students and are integrated with other curriculum content such as health education, social science and biology.
2. Teachers and all other education personnel should receive adequate initial and in-service training about HIV/AIDS.
3. Teachers through their representative organisations should be involved in every stage of planning, implementation and evaluation of HIV/AIDS health promotion programs for students and for education personnel.
4. Teachers must be protected against loss of employment or benefits, and any other measures which may be taken against them in the context of their teaching of curricula covering the transmission and prevention of HIV infection, including discussion of human sexuality as appropriate to the students' age group.

#### **E. WORK POLICY ON HIV/AIDS**

The IEU believes that an education workplace policy should be put in place in all schools and associated workplaces.

In particular, it believes that the issues to be addressed in such a policy include:

- a. Statement of intent  
the commitment of the organisation or institution to provide a healthy and safe working environment for students and employees.
- b. Management responsibilities
  - i. to provide education, training and guidance for managers, supervisors, principals, employees and students about HIV/AIDS
  - ii. to apply the principles of occupational health and safety to the problem of HIV/AIDS
    - to identify work procedures where there is potential occupational exposure.
    - to assess the extent of the hazard
    - to implement control procedures to prevent occupational exposure to HIV
  - iii. to maintain confidentiality of medical information/
- c. Employee responsibility

- i. to carry out their duties in a responsible manner that does not put their colleagues or students at risk
  - ii. to observe any reasonable instruction of the employer in relation to safe working procedures
- d. Anti-discrimination  
Support for anti-discrimination legislation especially as it relates to sexual preference
- e. HIV/AIDS screening  
Ensuring that there is no necessity for pre-employment or pre-entrance HIV/AIDS screening
- f. First Aid  
Safe First Aid procedures are adopted