HIV/AIDS Policy

1. Background

1.1 Human Immunodeficiency Virus (HIV) is mainly spread through sexual contact, and infection through contact with HIV infected blood is a very small proportion. Most HIV infected people experience a 5 to 8 year period before developing Acquired Immune Deficiency Syndrome (AIDS). People with AIDS have a life expectancy of 1 to 2 years. No cure for HIV infection and AIDS is available at present.

1.2 The constitution guarantees the right to a basic education, the right not to be unfairly discriminated against, the right to life and bodily integrity, the right to privacy and not to have the privacy of their communication infringed, the right to a safe environment and the right to dignity.

1.3 This policy must be read in conjunction with the Department of Education’s National Policy on HIV/AIDS as published in Government Gazette No 20372 dated 10 August 1999. All numbers indicated in brackets refer to the paragraph in the National Policy.

2. Legislation


2.2 The South African Schools Act, Act 84 of 1996.


2.4 General Notices:

2.4.1 Notice 1926 of 1999

2.4.2 Department of Education National Education Policy Act, 1996 (No 27 of 1996)

3. AIDS Testing

3.1 Testing for HIV/AIDS for employment or attendance at schools is prohibited. (2.4)(4.3)
4. Disclosure

4.1 No learner or educator is compelled to disclose their HIV/AIDS status. (6.1) Voluntary disclosure to the appropriate authority would be welcomed and an enabling environment must be cultivated in which the confidentiality of such information is ensured and in which unfair discrimination is not tolerated. (6.2)

5. Non Discrimination and Equality

5.1 No learner or educator with HIV/AIDS may be unfairly discriminated against directly or indirectly. (3.1) Learners may not be denied admission or continued attendance at school on account of their HIV/AIDS status or perceived status. (4.1) Educators must be trained and given support to handle confidentiality where learners disclose their HIV/AIDS condition. (2.5) An educator may disclose his/her HIV/AIDS status to the principal. (6.3) Unauthorised disclosure of HIV/AIDS related information could give rise to legal liability. (6.5)

5.2 Infection control measures and adaptations must be universally applied and carried out regardless of the known or unknown HIV status of individuals concerned. (2.6) All persons should be considered as potentially infected and their blood and body fluids treated as such. (2.6.1)

5.3 Learners must be educated about their rights concerning their own bodies, to protect themselves against rape, violence, inappropriate sexual behaviour and contracting HIV. (2.6.5)

6. Attendance

6.1 Learners with infectious illnesses must be kept away from school to protect all other members, especially those whose immune system may be impaired by HIV/AIDS. (2.8)

6.2 Learners of compulsory school – going age with HIV/AID may be granted exemption from attendance in terms of Section 4(1)

6.3 If and when learners become incapacitated schools and institutions should make work available to them for study at home and should provide support where possible (5.7)

7. Education

7.1 Learners must receive age appropriate education about HIV/AIDS. (9.2) (See par 9 for content) This should be integrated in the curriculum. (2.10) The learner’s regular educator should provide education about HIV/AIDS. (Education regarding HIV/AIDS must be integrated in the curriculum and presented by the regular educator). The educators must attend courses to improve their knowledge of, and skills to deal with, HIV/AIDS. (2.10.2)

8. Safe School Environment: Universal Precaution
8.1 As HIV is transmitted only through blood, semen, vaginal fluid and breast milk and not day to day social contact (2.2), the prevention of HIV/AIDS transmission is to be promoted by the application of Universal Precautions within the school.

8.2 These precautions must be applied regardless of the known or unknown HIV status of individuals concerned.

8.2.1 Wounds

a) All blood, open wounds (sores, breaks in the skin, grazes, open skin lesions); and bodily fluids which could be contaminated with blood (tears, saliva, mucus, phlegm, urine, vomit, faeces and pus) should be treated as potentially infectious. (7.1.1)

b) Blood spills should be handled with extreme caution. Skin exposed to blood should be washed immediately with soap and running water. All bleeding wounds must be cleaned immediately with running water and antiseptic. If there is a biting or scratching incident where the skin is broken, the wound should be washed and cleaned under running water, dried, treated with antiseptic and covered with a waterproof dressing. Blood splashes to the face should be flushed with running water for at least three minutes. Disposal bags and incinerators must be made available to dispose of sanitary wear. All open wounds must be completely and securely covered with a non-porous or waterproof dressing or plaster so that there is no risk of exposure to blood. (7.1.2). All persons attending to blood spills and wounds must wear protective latex/rubber gloves. Bleeding can be managed by compression with material that will absorb blood. (7.1.4)

8.2.2 Surfaces, medical instruments and medical waste

a) Surfaces contaminated with bodily fluids and blood must be cleaned with running water and bleach (1:10 solution) and paper or disposable cloths. The person doing the cleaning must wear protective gloves. (7.1.5)

b) Blood contaminated material must be sealed in a plastic bag and incinerated / sent to an appropriate disposal firm. Tissues and toilet paper may be flushed down a toilet. (7.1.6)

c) Instruments contaminated with blood or body fluids must be washed and placed in a strong bleach solution for at least one hour. (7.1.7)

9. Medical Supplies and First Aid Kits

9.1 The school will maintain at least 2 first aid kits, which will include the following: 2 large and 2 medium pairs of disposable gloves; household rubber gloves for handling blood soaked material;
Absorbent material, waterproof plasters, disinfectant Hypochlorite), and a protective resuscitation mouth piece; Protective eye wear and protective face mask to cover nose and mouth.

9.2 Each classroom must have a pair of latex or household rubber gloves. (7.4) Latex or household rubber gloves must be available at every sports event and must be available to playground supervisors. (7.5)

9.3 First aid kits and cleaning equipment must be accessible at all times. (7.6) The contents of the first aid kits should be checked regularly against a content list. (7.8) A fully equipped first aid kit must be available at all school events, outings and tours, and must be kept on vehicles transporting learners. (7.9)

10. Training

10.1 Learners, educators and other staff must be given appropriate information and training on HIV transmission, the handling and use of first aid kits and the application and importance of universal precautions: (7.1)

10.2 They must be trained to:

10.2.1 Manage their own bleeding and injuries and to assist and protect others.

10.2.2 Instructed never to touch blood or open wounds, nor to handle nosebleeds, cuts and scrapes of their friends on their own, but to call for help from educators immediately.

10.2.3 Understand that all open wounds and grazes must be covered with waterproof dressing or plaster at all times

10.2.4 All cleaning staff, learners, educators and parents must be informed about the universal precautions that will be adhered to at SVPS. (7.11)

11. Prevention of HIV transmission during play and sport

11.1 The risk of HIV transmission during contact play and sport is insignificant, but increases when open wounds are exposed to infected blood. (8.1)

11.2 Adequate wound management is therefore essential: (8.2)

11.2.1 No one may participate in contact play with an uncovered wound.

11.2.2 If bleeding occurs during play, the injured player must be removed immediately and treated as per the universal precaution. The player may resume playing as long as the wound remains completely and securely covered. (8.2.2)

11.2.3 Blood stained clothes must be changed. (8.2.3) The same precautions must be applied to
injured educators, staff members and spectators.