

REPUBLIC OF KENYA



MINISTRY OF AGRICULTURE, LIVESTOCK, FISHERIES & COOPERATIVES

STATE DEPARTMENT FOR LIVESTOCK



WORKPLACE POLICY ON HIV AND AIDS

MAY, 2020

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GLOSSARY OF TERMS AND CONCEPTS

AIDS	Acquired Immune Deficiency Syndrome which results from advanced stages of HIV infection and is characterised by opportunistic infections or HIV related cancers, or both
Antiretroviral	Drugs used to inhibit the multiplication of retroviruses such as HIV
Behavior change	Any transformation or modification of human sexual behavior, which may include abstinence, being faithful, and consistent and correct use of condoms.
Care and support	A continuum of services and assistance provided to help a PLHIV and may include the provision of HIV testing services, treatment for opportunistic infections, antiretroviral therapy and employee assistance programmes
Confidentiality	The right of every person, employee or job applicant to have his/her medical/other information, including HIV status kept secret
Discrimination	Any distinction, exclusion or preference which has the effect of nullifying or impairing equality of opportunity or treatment in employment or occupation
Gender	Socially constructed or learnt differences in social roles and relations between men and women
HIV	Human Immunodeficiency Virus, a virus that damages the human immune system
HIV Screening	Direct HIV testing as well as indirect measures (assessment of risk-taking behaviours or asking questions about tests already taken or about medication)
HIV Testing	A medical test to determine a person's HIV-status
HIV Testing Services	Full range of services that are offered together with HIV testing. These include counselling, linkage to appropriate HIV Prevention, care and treatment services and other clinical support services
Intern	A student or a recent graduate undergoing supervised practical on-the-job training
Maisha	A slogan used to refer to the prevention and management of HIV and AIDS in Kenya
Maisha Certification System	A compliance and accountability mechanism for delivery of the Maisha Performance Contract targets for the Ministries, Departments and Agencies
Ministry	The Ministry responsible for livestock matters
Peer Educator	A trained and motivated worker who undertake informed and organized educational activities with staff/people of equal standing with the goal of imparting knowledge and encouraging them to examine and change their risk attitude, beliefs and behavior
Prevalence of HIV	The number of people with HIV at a particular point in time, often expressed as a percentage of the total population
Psychosocial Support	Psychological and social services that are provided to help a person cope with difficult situations and challenges
Reasonable accommodation	Any change, modification or adjustment to job conditions, equipment, work environment, or the way things are usually done that is reasonably practicable and enables an employee living with HIV to have access to, or participate or advance in, employment or effectively perform job functions, or enjoy equal access to benefits available to other employees at the workplace

Sexual
Harassment
Stigma

The act of persistently making unwelcome sexual advances or requests against the wishes of a person

A spoilt identity, mark of disgrace or labelling due to an attribute an individual may have that makes one feels disrespected, unloved or devalued

The State
Department.
Treatment
Workplace

The State Department for Livestock

A medical term describing the steps taken to manage an illness

Occupational settings, stations and places where employees spend time for gainful employment. Workplace includes, any land, premises, location, vessel or thing, at, in, upon, or near which, a worker is, in the course of employment (Occupational Safety and Health Act No 15 of 2007)

ACRONYMNS AND ABBREVIATIONS

ACU	AIDS Control Unit
ADSA	Alcohol, Drug and Substance Abuse
AIDS	Acquired Immune Deficiency Syndrome
ARVs	Anti-Retroviral Drugs
GBV	Gender Based Violence
GIPA	Greater Involvement of People living with HIV
GoK	Government of Kenya
HAPCA	HIV and AIDS Prevention and Control Act 2006
HIV	Human Immunodeficiency Virus
HRP&PM	Human Resource Policy and Procedures Manual
IEC	Information, Education, and Communication
ILO	International Labour Organization
KASF	Kenya AIDS Strategic Framework
KENPHIA	Kenya Population based HIV Impact Assessment (KENPHIA)
M&E	Monitoring and Evaluation
MDAs	Ministries, Departments and Agencies
MIPA	Meaningful Involvement of People Living with HIV
NACC	National AIDS Control Council
NCDs	Non-Communicable Diseases
NHIF	National Hospital Insurance Fund
OSHA	Occupational Safety and Health Act
PEP	Post Exposure Prophylaxis
PLHIV	People Living with HIV
PMCT	Prevention of Mother to Child Transmission of HIV
PWDs	People with Disabilities
SAGAs	Semi-Autonomous Governments Agencies
SDGs	Sustainable Development Goals
SDL	State Department for Livestock
UHC	Universal Health Coverage

FOREWORD

HIV and AIDS is a public health and developmental challenge that has adversely affected various sectors of the economy in Kenya. It is estimated that approximately 1.5 million Kenyans are living with HIV (KENPHIA Report, 2018). The illnesses and subsequent deaths of employees resulting from AIDS continues to negatively impact on productivity and threatens to reverse the socio-economic gains made in the past years.

The public sector continues to be threatened by the impact of HIV and AIDS and as such, the State Department for Livestock (SDL) recognises that a healthy workforce enhances productivity. In acknowledgement of this, the State Department has mainstreamed HIV and AIDS into its operations. The development of this HIV and AIDS Workplace Policy (2020) further demonstrates support and commitment to mitigate the impact of HIV and AIDS. The policy resonates with the aspirations of Sustainable Development Goals (SDGs), Vision 2030 and “Big Four Agenda”.

The Policy framework will guide the response to HIV and AIDS at the SDL workplaces. It provides mechanisms for dealing with both prevention and management of HIV and AIDS-related problems with an ultimate purpose of contributing towards the national efforts to combat the pandemic. Similarly, it formalizes the rights and responsibilities of every person involved, directly or indirectly, on matters pertaining to HIV and AIDS.

This Policy demonstrates the State Department’s concern and commitment in taking concrete steps to prevent and manage HIV among employees, their immediate family members, clients and key stakeholders. Ultimately, a healthy workforce will result in better service delivery to the clients as well as better lives for employees and their dependents. The implementation of this Policy will ensure a sustainable provision of quality and timely services.

I call upon all staff and stakeholders to rally behind the implementation of the HIV and AIDS workplace policy.



Harry Kimtai, CBS
Principal Secretary

PREFACE

HIV and AIDS may hinder the achievement of national goals and objectives if not timely addressed. In this regard, HIV and AIDS has been recognized as a workplace issue and incorporated into the SDL's Strategic Plan (2018-2022), Performance Contract and an ACU Committee constituted to spearhead mainstreaming of HIV interventions into the core functions of the State Department.

The Strategic Plan 2018-2022 identifies HIV and AIDS as a potential threat to productivity. Strategic Objective 4 recognises that mainstreaming prevention and control of HIV and AIDS is core to the achievement of the SDL's mandate. In the Strategic Plan, it has been noted that a policy framework is critical for the successful HIV programming targeting employees, their immediate family members, clients and key stakeholders. It is against this background, that the State Department has developed the HIV and AIDS Workplace Policy (2020).

The Policy covers key areas such as legal and regulatory framework, guiding principles, policy statements, employees' rights and obligations, operational guidelines, implementation framework, monitoring and evaluation. The successful implementation of this policy will hinge on unrelenting and concerted effort of all managers, employees and key stakeholders.

I wish to specially recognize the Principal Secretary for his visionary leadership and oversight, which has ensured an enabling environment and resources for the achievements we have made over the years.

I call upon the Heads of Directorate and employees to play their individual and collective roles for the successful implementation of this Policy.



Munyembo Mwachala
Secretary Administration

ACKNOWLEDGEMENT

The development of the HIV and AIDS Workplace Policy has been a collaborative effort of various stakeholders. First and foremost, would like to appreciate the National AIDS Control Council (NACC) for their guidance, in particular Ms. Salome Ochola for her invaluable technical contribution that led to the finalization of this Policy.

Similarly, we recognize the exemplary leadership of the Principal Secretary, Secretary Administration and all the Directors for their efforts, commitment and valuable contributions towards the development of this Policy.

Further, we take this opportunity to express our deepest appreciation to the AIDS Control Unit (ACU) Committee members led by Jessica Omundo (Administration) and composed of Karuku Muba (Central Planning and Project Management Unit), Michael Gachukia (Livestock Policy Research and Regulations), Dr. David Mwangi Kiai (Directorate of Veterinary Services), Leah Boit and Mary Kitheka (Directorate of Livestock Production), Dennis Deche (Finance), Peninah Ndirangu (Accounts), Jemimah Ingosi (Human Resource Management and Development), and the Secretariat composed of Phyllis Njeri (Administration), George Otieno (Administration) and David N. Mbugua (AHITI Kabete) for spearheading the development of this Policy.



Jonam N. Kinama
Senior Deputy Secretary

1.0 BACKGROUND

1.1 Establishment of State Department for Livestock

The State Department for Livestock (SDL) is one of the four State Departments in the Ministry of Agriculture, Livestock, Fisheries and Cooperatives established through Executive Order No. 1 of 2020.

1.2 Mandate

The mandate of the State Department for Livestock is to promote, regulate and facilitate livestock production for socio economic development and industrialisation; to oversee the running of the Semi-Autonomous Government Agencies (SAGAs) and training institutions under its purview.

1.3 Core Functions

The core functions of the State Department for Livestock as derived from the Executive Order No. 1/2020 are:

- i) Livestock policy management;
- ii) Development of livestock industry;
- iii) Promotion of quality of hides and skins
- iv) Veterinary services and disease control;
- v) Range development and management;
- vi) Livestock research and development;
- vii) Animal genetic research;
- viii) Livestock marketing;
- ix) Promotion of dairy industry;
- x) Livestock insurance policy;
- xi) Livestock branding;
- xii) Promotion of bee keeping;
- xiii) Leather Sector development and promotion of value chain; and
- xiv) Oversee the running of SAGAs and training institutions under its purview.

1.4 Strategic Objectives

The strategic objectives for the State Department for Livestock are:

- i) Strengthening policy, legal and institutional Capacity.
- ii) Increasing production and productivity.
- iii) Improving market access and trade.
- iv) Improving resilience for ASAL communities.
- v) Strengthening monitoring & evaluation (M&E) and information management.

1.5 SAGAs and Training Institutions

The SAGAs under the State Department are:

- i) Kenya Veterinary Vaccines Production Institute
- ii) Kenya Veterinary Board
- iii) Animal Technician Council
- iv) Kenya Dairy Board
- v) Kenya Leather Development Council
- vi) Veterinary Medicines Directorate

The training institutions in the SDL are:

- i) Animal Health and Industry Training Institute (AHITI) Kabete.
- ii) AHITI Ndomba.

- iii) AHITI Nyahururu.
- iv) Meat Training Institute, Athi River.
- v) Dairy Training Institute, Naivasha.
- vi) Livestock Training Institute, Wajir.
- vii) Regional Pastoral Training Centre, Narok.
- viii) Mobile Pastoral Training Centre, Isiolo.
- ix) National Beekeeping Institute, Nairobi.
- x) National Rabbit Conservation and Training Institute, Ngong.

1.6 Key External Stakeholders

The key clients/ external stakeholders are but not limited to the following;

- i) Livestock farmers and pastoral communities;
- ii) Training and learning institutions;
- iii) Livestock Farmers and Producers Organizations;
- iv) Community Based Organizations;
- v) Non-Governmental Organizations;
- vi) The private sector;
- vii) Stock traders and business men;
- viii) Professional bodies;
- ix) Financial Organizations;
- x) Manufacturers and processors.

1.7 Vision, Mission and Core Values

1.7.1 Vision

To be a leading agency in facilitating efficient delivery of services in livestock development for livelihood support, food security and economic growth.

1.7.2 Mission

To promote sustainable development of livestock sector by creating an enabling environment through policy and legislative interventions while providing services that increase productivity, value addition, market access and income in the livestock industry.

1.7.3 Core Values

In conducting its functions, the staff in the State Department will be expected to uphold the following core values:

- i) **Professionalism:** Apply the highest standards of service delivery.
- ii) **Integrity:** Uphold honesty, uprightness and reliability at all times.
- iii) **Transparency and accountability:** Be open and answerable to the various stakeholders.
- iv) **Effectiveness:** To be responsive and exceed customer expectations in provision of services.
- v) **Commitment:** All staff shall demonstrate their commitment to results, customers and organization by living by the set of values outlined here.
- vi) **Teamwork:** Efforts shall be made to deliver as one through learning and sharing.
- vii) **Meritocracy:** Compliance with all existing guidelines and regulations in human resource selection, recruitment, placement, development and promotion shall be upheld.
- viii) **Inclusiveness:** we shall ensure impartial and equitable representation of all forms of diversity within our processes.

2.0 INTRODUCTION

2.1 HIV Situation in Kenya

HIV and AIDS have eroded decades of development gains, undermining economies, threatening security and destabilizing societies. In Kenya, it continues to have negative socio-economic impact and exert immense pressure on households, communities, workplaces, businesses and enterprises. Stigma and discrimination related to HIV leads to frequent violations of fundamental human rights at the workplace.

HIV and AIDS manifest in increased labour costs and loss of skilled and experienced employees due to absenteeism, presentism, bereavement, sick leave, increased medical costs, employee turnover, reduced performance, increased stress, low employee morale, increased need for training and mentorship and declining customer base. These negatively impacts on productivity and service delivery at individual, corporate and industry levels.

After HIV was declared a national disaster in 1999, remarkable achievements have been made through a multi-sectoral response to HIV and AIDS in Kenya. According to Kenya Population-based HIV Impact Assessment (KenPHIA 2018), HIV prevalence was 4.9% and this dropped to 4.4% (Kenya HIV Estimates 2020) which translates to approximately 1.5 million Kenyans living with HIV. Despite the achievements made, Kenya still ranks fourth country in the world with the highest number of people living with HIV (PLHIV) where women are more affected (5.7%) than men (3.1%).

Whereas HIV Progress report 2018 shows that we are making significant progress against the pandemic, United Nations Joint Team on AIDS (UNAIDS Report 2019) warns that the progress does not match the Country's target of ending new HIV infections, AIDS related deaths, stigma and discrimination by 2030. At a prevalence rate of 4.4% and HIV incidence of 41,408 in 2019 (Kenya HIV Estimates 2020), the public sector risk losing out significantly if they fail to take action. This calls for policy and strategic actions in order to meet the Country's HIV response goals and objectives.

The workplace can contribute to prevention of new HIV infections and it is an appropriate setting for mitigation of the associated socio-economic impact. In view of the above, the SDL has developed this Policy to address the concern in-line with the Public Sector Workplace Policy on HIV and AIDS (2017).

2.2 Rationale

HIV and AIDS manifest in increased labour costs and loss of skilled and experienced employees that impact negatively on productivity and service delivery at individual, corporate and industry levels. To realise the aspirations of the Sustainable Development Goals, Medium Term Plan III of Kenya's Vision 2030 and "Big Four Agenda", the economic impact of HIV and AIDS in the workplace must be strategically addressed. At a HIV prevalence of 4.4% and incidence of 41,408 reported in 2019, the SDL risk losing out significantly if there is no tangible framework to guide the HIV response.

The SDL recognizes that HIV and AIDS is a workplace issue that impacts negatively on the achievement of its strategic objectives. Therefore, a policy framework is central to addressing HIV and AIDS challenges at the workplace. In this regard, the SDL has developed this Policy in line with the Public Sector Workplace Policy on HIV and AIDS 2017 to enhance productivity and service delivery.

3.0 POLICY GOAL, OBJECTIVES AND SCOPE

3.1 Policy Goal

It Policy provides a framework and sets standards for addressing HIV and AIDS at the State Department.

3.2 Policy Objectives

The specific objectives are to;

- i) define SDL's position on HIV and AIDS,
- ii) guide the management and employees on workplace rights and obligations regarding HIV and AIDS,
- iii) create a conducive environment, establish structures and rights-based approaches for responding to HIV and AIDS at SDL and
- iv) contribute to the delivery of Kenya AIDS Strategic Framework 2020/21- 2024/25 (KASF II) results and targets.

3.3 Scope

The Policy applies to the management and employees of SDL.

4.0 LEGAL AND REGULATORY FRAMEWORK

Kenya has several legal statutes which support the implementation of HIV and AIDS interventions at the workplace. While not all are specific to HIV and AIDS, their interpretation and application create an enabling legal and regulatory environment for the desired impact on HIV and AIDS. These include both national laws and international instruments.

4.1 Kenya Laws

This Policy is anchored on the following laws:

4.1.1 The Constitution of Kenya

The Constitution of the Republic of Kenya is the Supreme Law of Kenya and lays the foundation for all other national laws.

- a) Article 10 of the Constitution provides for the National Values and Principles of Governance that binds all State organs, State officers, public officers and all persons whenever any of them;
 - i) Applies or interprets the Constitution.
 - ii) Enacts, applies or interprets any law; or
 - iii) Makes or implements public policy decisions.
- b) The National Values and Principles of Governance include;
 - i) Patriotism, National unity, sharing and devolution of power, the rule of law, democracy and participation of the people.
 - ii) Human dignity, equity, social justice, inclusiveness, equality, human rights, non-discrimination and protection of the marginalized.
 - iii) Good governance, integrity, transparency and accountability.
 - iv) Sustainable development
- c) In particular, the policy seeks to address the following Articles of the Constitution of Kenya;
 - i) Article 6- Devolution and access to services in all parts of the Republic, so far as it is appropriate to do so having regard to the nature of the service;
 - ii) Article 27- Equality and freedom from discrimination;
 - iii) Article 31- Every person has the right to privacy;
 - iv) Article 43- Every person has the right to the highest attainable standard of health, which includes the right to health care services, including reproductive health care;
 - v) Article 232- Values and principles of public service which include high standards of professional ethics and accountability for administrative acts and affording adequate and equal opportunities for appointment, training and advancement, at all levels of the public service of; men and women; members of all ethnic groups and Persons with disabilities.

4.1.2 HIV and AIDS Prevention and Control Act (2006)

This Act makes specific reference to HIV and AIDS in relation to provision of education and information at the workplace, discrimination, privacy, confidentiality and human rights. Specifically, the Act provides that: -

- i) Under sections 4 and 7, the Government shall promote public awareness about the causes, means of transmission, consequences and means of prevention and control of HIV and AIDS through Comprehensive Nationwide Educational and Information campaign at all places of work and ensures the provision of basic information and instructions on HIV

- prevention and control to all public employees. Section 7 further notes that such information to be provided, shall cover issues of confidentiality at the workplace and attitudes towards infected employees;
- ii) Under section 13, no person shall compel another to undergo a HIV test save where a person is charged with an offence of a sexual nature under the Sexual Offences Act(2006);
Section 22 prohibits the disclosure of a HIV test result or any related assessment result of another person without his/her written consent;
 - iii) In Part VIII, the Act 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 or seeking public office; and
 - iv) Section 25 makes provision for establishment and functioning of the HIV Tribunal with jurisdiction to examine cases of HIV-related discrimination thereby implementing the fundamental rights of persons living with or affected with HIV.

4.1.3 The Employment Act (2007)

The Act defines the fundamental rights of employees and the basic conditions of employment. It addresses issues on discrimination (Part II Section 5) and sexual harassment (Part II Section 6). The Act implies that there shall be no discrimination on the grounds of HIV status, and states in Section 46 (g) that HIV and AIDS does not constitute a fair reason for dismissal or for imposition of disciplinary penalty on an employee.

4.1.4 Occupational Safety and Health Act No 15 of 2007(OSHA)

The Act provides for the safety, health and welfare of public servants and all persons lawfully present at workplaces and for matters connected therewith. It charges the employers with ensuring a safe and healthy work environment by ensuring all health risks and their associated hazards are closely monitored and managed.

Section16 (1) prohibits persons from engaging in any improper activity or behavior at the workplace, which might create or constitute a hazard to that person or any other person. The implication of this Act, concerning HIV, is that the employer must ensure the safety of the workplace so that employees are not at risk of infection at the workplace.

4.1.5 Work Injury Benefits Act No. 13 of 2007 (WIBA)

The relevant provisions of WIBA are as follows:

- i) Part VII of WIBA, section 45 (1) provides for workplace equipment and service for first aid to employees in case of accidents.
- ii) In Section 38 (i), it provides for compensation to employees for work related injuries and diseases contracted in the course of their employment. The interpretation of this section provides for post-exposure prophylaxis (PEP) to those who, in line of duty, accidentally come into contact with potentially infectious HIV contaminated materials.

4.1.6 Sexual Offences Act No. 3 (2006)

The Sexual Offences Act No. 3 of 2006 provides about sexual offences, their definition, prevention and protection of all persons from harm from unlawful sexual acts and for connected purposes. The relevant sections that expressly relate to this policy are 3, 4, 23-26.

4.1.7 Persons with Disability Act (2003)

Disability Act makes provisions for non-discrimination and non- stigmatization in respect to

access to services and opportunities.

4.1.8 The Labour Relations Act No. 14 (2007)

The Act protects the employee and prospective employee from discrimination based on their real or perceived HIV status (Part II Section 5a) ensuring equal rights to opportunities for the infected and affected in training, employment, promotions and other employment benefits.

4.1.9 The Labour Institutions Act, No.12 (2007)

The Act provides for workplace interventions by appropriating the responsibility of providing these services on the employer while the employee is charged with the responsibility of accessing them (Part V Section 37a).

4.1.10 Alcoholic Drinks Control Act of 2010

The Act addresses the harm reduction strategies related to alcohol and its role in HIV transmission. This is addressed in the Act in Part VII on education and information (Section 65-67).

4.1.11 Counselors and Psychologists Act of 2014

The Counselors and Psychologists Act 2014 outlines the qualifications of a professional counselor and regulates the counseling practice in line with set standards and code of ethics. Under this legislation, counselors providing counseling services to HIV and AIDS clients must meet the set standards.

4.1.12 Public Service Commission Act, 2017 and the Public Service Commission Regulations (2020)

The Public Service Commission Regulations (2020) prohibits discrimination in appointment, promotion and transfer of public servants. The regulations provide for the following:

- i) 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;
- ii) If a public officer is incapable by reason of any infirmity of mind or body of discharging the functions of 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; and
- iii) Any public servant who is ill shall seek and obtain permission as per existing regulations for absence from the workplace because of ill health.

4.1.13 Other Policy Guidelines

Other policy guidelines that informed the preparation of this Policy are:

- i) Guidelines for Mainstreaming GIPA in Kenya's National Response to HIV and AIDS 2008.
- ii) Kenya AIDS Strategic Framework 2020/21 - 2024/25.
- iii) National Guidelines for HIV Testing and Counseling in Kenya (2008).
- iv) National Condom Strategy 2018-2023.
- v) Public Service Human Resource Policy and Procedures Manual (HRP&PM).

4.2 International Conventions

This Policy is in conformity with the International Labour Standards, instruments and conventions to which Kenya is a signatory. These are:

4.2.1 International Labour Organization (ILO) Code of Practice on HIV and the World of Work 2001

The ILO Code of Practice on HIV and AIDS and the World of Work is committed to securing decent working conditions and social protection in the face of HIV and AIDS.

4.2.2 ILO Conventions, Recommendations and Guidelines

The 2011 United Nations General Assembly Meeting on AIDS adopted the Political Declaration on HIV and AIDS through commitment to mitigate the impact of the epidemic on workers and their dependents at the workplace.

4.2.3 ILO Discrimination (Employment and Occupation) Convention, 1958 (No. 111)

The Convention prohibits under:

- i) Section (a) Any distinction, exclusion or preference made on the basis of race, colour, sex, religion, political opinion, national extraction or social origin, which has the effect of nullifying or impairing equality of opportunity or treatment in employment or occupation;
- ii) Section (b) such other discrimination that has the effect of nullifying or impairing equality of opportunity or treatment in employment or occupation.

4.2.4 ILO Recommendation Concerning HIV and AIDS and the World of Work, 2010, No.200

The Recommendation No. 200 calls upon national governments, employers, trade and labour unions, employees and volunteers to eliminate stigma and discrimination, protect human rights and facilitate access to HIV prevention, treatment, care and support.

5.0 GUIDING PRINCIPLES

The principles that guide this Policy are in accordance with Kenya laws, policies, guidelines, regulations and international conventions. These principles include:

5.1 Recognition of HIV and AIDS as a Workplace Issue

HIV and AIDS is a workplace issue as it affects the workforce. The workplace therefore plays a vital role in limiting the spread and effects of the epidemic.

5.2 Non-Stigmatization and Non-Discrimination

Stigma and discrimination related to HIV undermines employees' welfare, safe healthy work environment and HIV prevention efforts, which depend on openness, trust and respect for fundamental human rights. The principle of non-discrimination extends to employment status, recognized dependents, and access to health insurance, pension funds and other employee entitlements.

5.3 Gender Equality and Equity

HIV and AIDS affect and impact on women and men, boys and girls differently due to their physical, biological, social, cultural, emotional and economic circumstances. It is, therefore, important that HIV programmes respond to the circumstances and needs of men and women separately, as well as together in terms of prevention and social protection to mitigate the impact of the epidemic.

5.4 Safe and Healthy Work Environment

The work environment should be healthy and safe. A healthy work environment facilitates adaptation of work to the capabilities of workers, in light of their physical and mental health, thereby mitigating the impact of AIDS on individual and the enterprise corporate level. However, presence of a person living with HIV at the workplace shall not be considered as a workplace hazard.

5.5 Social Dialogue

A successful HIV Programme needs cooperation and trust between management, employees, clients and key stakeholders. Consultation brings about concurrence and is achieved through building of trust, cooperation, willingness, communication, open discussions, dialogue and a common purpose between the management, employees and amongst themselves.

5.6 HIV Testing and Screening for Purpose of Employment

HIV testing or screening shall not be a requirement for recruitment, appointment, continuation of employment or promotion. HIV testing for employment purposes violates the right to confidentiality and is unnecessary. A negative test result is no guarantee that he or she will not become infected tomorrow, or next month. It should also be remembered that people with HIV may remain perfectly fit and healthy for many years. Testing for HIV at the workplace should be voluntary and confidential, and never used to screen job applicants or employees.

5.7 Continuation of Employment Relationship

HIV infection is not a cause for termination of employment. As with many other conditions, persons with HIV-related illnesses should be encouraged to work for as long as medically fit in available and appropriate work.

5.8 Disclosure and Confidentiality

HIV and AIDS is a complex and sensitive issue and disclosure of HIV status shall be on a voluntary basis and in line with the HIV and AIDS Prevention and Control Act (2006). Section 22 of the Act prohibits the disclosure of HIV status result of another person without his/her written consent.

5.9 Prevention of New HIV Infections

Prevention of all means of HIV transmission can be achieved through a variety of strategies and interventions. Prevention can be furthered through a combination of information, participatory education, personal risk assessment, life skills, and practical support for behavioral change and treatment for sexually transmitted infections.

5.10 HIV Treatment, Care and Support

HIV prevention without treatment, care and support for employees living with HIV is only partially effective. Employees are entitled to affordable healthcare services and to benefits from statutory and occupational schemes. Prevention, care and treatment should be a continuum, rather than separate elements, of a workplace programme.

5.11 Forging Strategic Partnerships

Strategic partnerships, networking and collaboration with relevant service providers and other key stakeholders is necessary for effective HIV programmes at the workplace.

5.12 Greater Involvement of People Living With HIV (GIPA)

GIPA aims to realise the rights and responsibilities of PLHIV including their right to self-determination and participation in decision-making processes that affect their lives. It also aims to enhance the quality and effectiveness of the HIV response.

6.0 POLICY STATEMENTS

6.1 Recognition of HIV and AIDS as a Workplace Issue

HIV and AIDS shall be treated like any other condition or illness that may affect employees at the workplace. The SDL will prioritize HIV and AIDS agenda and shall integrate provision of HIV information and services into their routine activities.

6.2 Non-Stigmatization and Non-Discrimination

There should be no discrimination or stigma against employees based on real or perceived HIV-positive status as casual contact at the workplace carries no risk of infection. To guarantee non-stigmatization and non-discrimination, the SDL shall ensure;

- i) protection of employees living with HIV against stigma, discrimination, victimization or harassment,
- ii) employees do not refuse to work or interact with fellow colleagues on basis of their actual, perceived or suspected HIV status and such refusal constitutes misconduct and
- iii) service regulations on disciplinary and grievance procedures apply equally to all employees except for where reasonable accommodation is granted.

6.3 Gender Equality and Equity

SDL recognizes gender dimensions of HIV Measure will be taken to reduce the transmission of HIV and alleviate its impact by:

- i) Ensuring gender equality, equity and empowerment of women and men, boys and girls,
- ii) Enforcing actions to prevent and prohibit sexual and gender based violence at the workplace as stipulated in existing laws and Human Resource Policies and Procedures Manual (HRP&PM),
- iii) Engagement of men and women, boys and girls in HIV response, and
- iv) Sensitization of women and men, boys and girls on their sexual and reproductive health and rights.

6.4 Safe and Healthy Work Environment

The SDL shall ensure a safe and healthy work environment in line with the Occupational Safety and Health Act No. 15 (2007) by;

- i) minimizing the risk of infections by adopting appropriate Universal Infection Standard Precautions at the workplace. These will include proper and consistent use of personal protective and first aid equipment (gloves, gowns and face shields), access to post exposure prophylaxis (PEP), hand and respiratory hygiene including cough and sneeze etiquette.
- ii) Training employees on accident prevention and management;

In addition, the employees shall:

- i) Ensure safety to themselves and others when performing their duties or when attending to their colleagues who have been injured; and
- ii) Ensure that they are safe from infections that may result from coming into contact with infected body fluids.

6.5 Social Dialogue

The SDL shall promote meaningful involvement of employees in planning, implementation, monitoring and evaluation of HIV interventions for successful implementation of workplace HIV programmes through open discussions, building of trust, consultations, negotiations, cooperation,

and a common purpose on HIV-related matters between the management, employees and amongst themselves.

6.6 HIV Testing and Screening

The SDL shall not require HIV testing as a prerequisite for recruitment, access to training and promotion. However, voluntary confidential HIV testing will be encouraged among the employees as per the HIV and AIDS Prevention and Control Act 2006 and HIV Testing Services Guidelines.

6.7 Disclosure and Confidentiality

The SDL shall continue to maintain a stigma free work environment in which employees will feel safe to disclose their status. Disclosure of HIV status shall be on a voluntary basis and handled in a discreet, private and confidential manner and in line with the prevailing legislations.

The SDL shall maintain strict confidentiality on disclosed cases and access to personal data including an employee's HIV status shall be strictly bound by the rules of confidentiality consistent with existing laws, regulations and relevant Codes of Practice. However, the SDL shall not take responsibility for personal disclosure to other members of the public.

6.8 Continuation of Employment Relationship

- Employees living with HIV shall be encouraged to work for as long as they are medically fit to work, with reasonable accommodation if needed, to enable them to carry out the tasks of their job in line with Human Resource Policy and Procedures Manual. Further, the SDL will take measures to reasonably accommodate employees affected with HIV.
- Reasonable accommodation to help employees continue in employment can include rearrangement of working time, relief services, special equipment, time-off for medical appointments, and additional/flexible sick leave days and opportunities for rest breaks.

6.9 Prevention of New HIV Infections

The SDL shall implement HIV prevention interventions targeting employees, their immediate family members and key stakeholders. HIV knowledge levels shall be enhanced through sensitization on modes of transmission, modes of prevention, personal protection, behaviour change and creation of a stigma-free and non-discriminatory environment.

6.10 Treatment, Care and Support

The SDL shall facilitate employees' access to affordable HIV treatment, care, psychosocial support and other related assistance services through;

- i) existing government supported medical insurance, referrals and other viable options,
- ii) linkages and referrals for continuous supportive counseling
- iii) provision of reasonable accommodation in duties and work schedules in response to changing health status;
- iv) re-deployment of employees significantly affected by HIV related illnesses to work in areas corresponding to their abilities. This can be achieved through re-training and return to work arrangements in line with the relevant national labour instruments;
- v) appropriate deployment of employees requiring access to family support and medical care.

6.11 Forging Strategic Partnerships

The SDL will initiate and sustain strategic partnerships, networking and collaboration with relevant HIV information and service providers for effective HIV programmes.

6.12 Greater Involvement of People Living With HIV (GIPA)

The SDL will involve PLHIV in decision-making, formulation and implementation of this Policy in line with GIPA principles and guidelines.

7.0 OPERATIONAL GUIDELINES

7.1 MANAGEMENT OF HUMAN RESOURCE

The SDL will examine and address the human resource issues posed by HIV and AIDS on the work force as follows:

7.1.1 Recruitment and Promotion

Recruitment, appointment, deployment, promotion, continued employment or pursuit of equal opportunities shall be on merit and actual, perceived or suspected HIV status shall not be used as a basis for discrimination. However, while fulfilling the requirement that all newly appointed persons undergo a medical examination for purposes of deployment; the provisions of the relevant legislations on medical examination shall apply.

7.1.2 Sick Leave

Sick leave will be provided for as stipulated in the HRP&PM. However, additional sick leave days will be considered for employees living with HIV as part of reasonable accommodation.

7.1.3 Working Hours

Official working hours will apply for all employees as stipulated in the HRP&PM. However, flexible working hours for employees infected or affected by HIV will be applied on voluntary confidential disclosure.

7.1.4 Guidance and Counseling Services

In recognition of psychological challenges that may face employees infected or affected by HIV, the SDL will facilitate guidance and counseling services as appropriate.

7.1.5 Medical Benefits

The HRP&PM provisions on medical benefits will continue to apply to all employees. The SDL will maintain workplace government support medical insurance cover that does not discriminate employees living with HIV such as National Hospital Insurance Fund.

7.1.6 Deployment and Transfers

The SDL shall ensure that cases that require reasonable accommodation in deployment and transfers are appropriately addressed in accordance with the HRP&PM.

7.1.7 Work Performance and Relief Services

Where an employee is temporarily unable to perform their current jobs due to ill health or care giving responsibility for an immediate family member, relief services, alternative work arrangements, time off, extended sick leave days and any other appropriate measure shall be provided.

7.1.8 Housing and Accommodation

Employees are eligible to house allowance applicable to their grades as stipulated in the HRP&PM and relevant Government Circulars issued from time to time regardless of their HIV status. Allocation of institutional houses to employees shall be based on merit irrespective of ones' HIV status.

7.1.9 Training and Development

The HRP&PM provision on training and development will apply to all employees. In addition, the SDL will ensure HIV-related training is integrated in the training plans and projections.

7.1.10 Sexual Gender Based Violence

There shall be zero tolerance to sexual harassment, sexual abuse and sexual exploitation as stipulated in existing laws and HRP&PM.

7.1.11 Retirement on Medical Grounds

The HRP& PM provision on retirement on medical grounds shall apply. Where the employee is medically unfit to continue working, the SDL will hasten the process of retirement for the benefit of the employee and with due regard to the relevant service regulations.

7.1.12 Terminal Benefits

The HRP& PM provision on payment of terminal benefits shall apply. The SDL will facilitate speedy processing of terminal benefits and the employee shall ensure that the next of kin records are updated as and when required.

7.1.13 Grievances, Concerns and Recourse

The SDL shall establish and maintain communication channels and fora for employees to raise discrimination related grievances and concerns. The HRP& PM provision of internal conflict resolution will apply for the aggrieved employees. The employees will be sensitised on the functions of the HIV Tribunal and encouraged to report unresolved cases of discrimination to the Tribunal.

7.2 HIV PREVENTION INTERVENTIONS

Implementation of interventions under this section will support attainment of Universal Health Coverage (UHC) commitments. This will be done through offering services for prevention of non-communicable diseases and wellness for employees, their family, interns, clients and targeted external stakeholders. The proposed prevention interventions are as follows:

7.2.1 Workplace Wellness Promotion

This will cover sensitization and screening for HIV and non-communicable diseases (NCDs). The provision of health screening package through the medical insurance or any other appropriate services provider will include HIV, Cancer, Cholesterol, Blood Pressure, Blood Sugar and BMI, among others.

The sensitization package for NCDs will include provision of comprehensive information on NCDs including cancers, diabetes, and hypertension, stroke and heart problems, stress management, nutrition and mental health. Other areas will include dimensions of wellness and adoption of healthy lifestyles.

7.2.2 Comprehensive Sensitization on HIV Prevention

This will include dissemination of HIV prevention information to employees, their immediate family members and key stakeholders in order to achieve comprehensive knowledge on HIV and AIDS. The package will include education and training on the modes of HIV transmission, and on the importance of confidentiality and maintaining a stigma and discrimination free workplace to support a culture of HIV prevention.

7.2.3 Condom Use Promotion

This will entail male and female condom distribution and sensitization of employees, their immediate family members, interns, clients and key stakeholders on proper and correct use and disposal.

7.2.4 Treatment, Care and Support

This entails referrals and linkages to wellness, psychosocial support and other employee assistance services for employees and their immediate family members. The comprehensive service package for HIV and AIDS, NCDs, sexual – gender based violence (SGBV), post- traumatic stress disorders (PTSD), alcohol, drugs and substance abuse (ADSA) and nutrition.

7.2.5 Interventions targeting clients and key external stakeholders

This will be implemented in line with the HIV Plan for the Agriculture Rural and Urban Development Sector. The programmes will address the plight of members of livestock farmers' stock traders and associations with special emphasis on those infected and affected by HIV. Specific activities will include but not limited to the following:

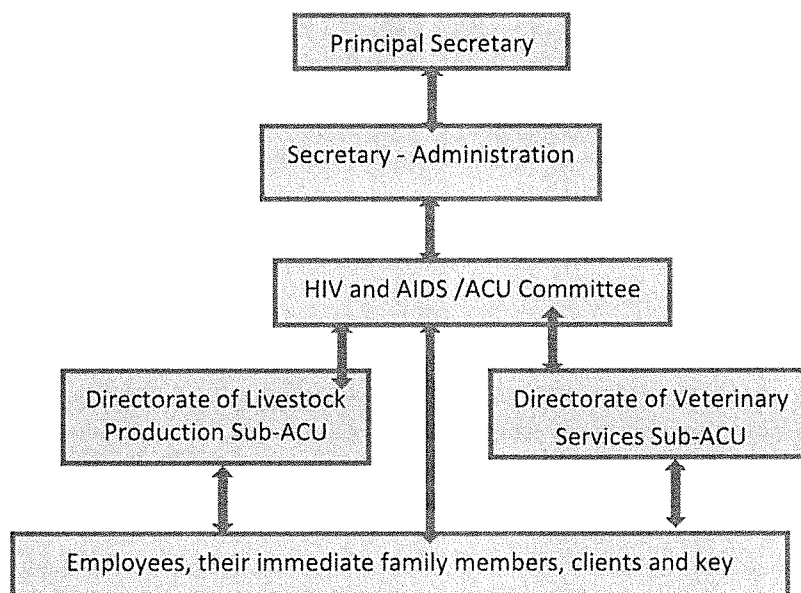
- Integration of HIV module into existing training curricular and conducting sensitizations in line with the module by all training institutions under SDL.
- Sensitization of key stakeholders on HIV prevention information package

8.0 IMPLEMENTATION OF THE POLICY

8.1 Implementation Framework

The responsibility of implementing this Policy rests with; The Principal Secretary, Head of Directorates, ACU Committee and all employees as detailed in Fig.1. Successful implementation of this Policy highly depends on high level support and strict adherence to specific functions, roles and responsibilities.

Fig 1: Implementation Framework



8.2 Functions, Roles and Responsibilities

8.2.1 Principal Secretary

The Principal Secretary will;

- i) provide high level leadership and support for implementation;

- ii) provide budgetary allocations and put in place structures to facilitate the implementation;
- iii) facilitate the development of appropriate capacities to respond to HIV issues at the workplace;
- iv) facilitate implementation and review of this Policy including establishing and operationalisation of a conducive environment;
- v) submit SDL annual work plans and quarterly reports to NACC in line with the Performance Contract Guidelines and
- vi) take immediate and appropriate corrective action when provisions of this Policy are violated.

8.2.2 Secretary Administration

The Secretary Administration shall;

- i) Chair the meetings of the HIV and AIDS Committee on behalf of the Principal Secretary;
- ii) Spearhead high level advocacy and representation for HIV and AIDS prevention;
- iii) Provide briefs to Principal Secretary on matters pertaining HIV and AIDS in the SDL; and
- iv) Oversee and facilitate the operations of the SDL ACU Committee.

8.2.3 HIV and AIDS Control Unit/ Committee

The SDL has established and operationalized HIV and AIDS Control Unit (ACU) Committee in accordance with the National AIDS Control Council (NACC) Guidelines. The Unit will comprise of representation from the four (4) Directorates. The members shall be formally appointed by the Principal Secretary and allowed to serve for at least 3 years for HIV programmes continuity purposes.

The ACU Committee will:

- i) Coordinate implementation and review of this Policy;
- ii) Monitor and evaluate the implementation of the Policy;
- iii) Receive annual work plans and quarterly reports from the Directorate sub-ACUs
- iv) Compile annual work plans and quarterly reports on the implementation of the Policy for SDL for onward submission to NACC as stipulated in the Public Service Performance Contract Guidelines;
- v) Make proposals for enhancing HIV and AIDS programmes in the State Department;
- vi) Train and commission peer educators to support the implementation of this Policy;
- vii) Collect and analyze data to inform HIV programming at SDL including proper record keeping for easy retrieval and use;
- viii) Develop and disseminate sector-specific HIV Information, Education and Communication (IEC) materials;
- ix) Ensure compliance with NACC reporting guidelines, and
- x) Carry out necessary measures to ensure that SDL achieves NACC MAISHA Certification.

8.2.4 Head of Directorate

The Head of Directorate shall:

- i) Formally appoint the sub-ACU membership and integrate coordination of HIV programmes into their job descriptions and performance appraisals;
- ii) Provide leadership and support for the implementation of this Policy at the Directorate level;
- iii) Provide budgetary allocations and put in place structures to facilitate the implementation of this Policy at the Directorate level;
- iv) Facilitate the development of appropriate capacities to respond to HIV issues at the workplace;
- v) Support the implementation of this Policy including integration of its implementation in their routine Directorate activities; and
- vi) Submit Work Plans and quarterly reports to SDL ACU Committee.

8.2.5 Directorate Sub-ACUs

The Directorate sub-ACUs shall;

- i) Be represented at the SDL ACU Committee;
- ii) Coordinate the dissemination and implementation of this policy at the directorate level including the affiliated institutions and development projects and programmes;
- iii) Collect and analyses data to inform HIV programming including proper record keeping for easy retrieval and use;
- iv) Integrate HIV messages in the Directorates' activities IEC materials;
- v) Monitor and evaluate the implementation of this Policy in collaboration with the SDL ACU; and
- vi) Prepare Annual Work Plans and quarterly reports on the implementation of this policy at the Directorate level and submit to the SDL ACU Committee.

8.2.6 Peer Educators

The Peer Educators will;

- i) disseminate information on prevention of HIV and NCDs;
- ii) engage with colleagues who have voluntarily disclosed their HIV status including referral as appropriate;
- iii) distribute condoms and train on their use and disposal; and
- iv) Submit monthly reports to respective Directorate sub- ACUs.

8.2.7 Employees

Employees will;

- i) be sensitised continuously on prevention of HIV and associated NCDs;
- ii) be obliged to comply with this Policy;
- iii) actively participate and support all workplace HIV and AIDS activities;
- iv) know their HIV status and act responsibly;
- v) maintain their preferred level of disclosure but may consider voluntary confidential disclosure of HIV status in the context of reasonable accommodation;
- vi) respect the HIV-related human rights of fellow employees and shall not draw unnecessary inferences on perceived or suspected HIV status of colleagues; and
- vii) utilise existing internal conflict resolution mechanisms when aggrieved and may consider reporting unresolved cases of discrimination to the HIV Tribunal.

8.2.8 Livestock Farmers and Associations

The Livestock Farmers and Associations will;

- i) mobilize funds for HIV Prevention activities;
- ii) conduct HIV awareness campaigns and sensitization of their members;
- iii) initiate and encourage effective uptake of HIV prevention and treatment services for their members including HIV testing and psycho-social support;
- iv) develop, acquire and disseminate Livestock Farmers and Associations specific HIV IEC materials;
- v) liaise with NACC for technical support and create partnerships for effective service delivery; and
- vi) participate in HIV awareness and advocacy forums such as World AIDS Day, International Condoms Day and Agricultural Society of Kenya shows.

9.0 MONITORING, EVALUATION, ACCOUNTABILITY AND COMPLIANCE

9.1 Monitoring and Evaluation

Monitoring the implementation of this Policy shall be conducted continuously through both primary and secondary data collection and record keeping tools. Mid-term and end-term evaluation shall be conducted as may be appropriate. The SDL shall generate and maintain a database on the implementation of this Policy.

9.2 Accountability and Compliance

Online Annual Work Plans and quarterly reports on the implementation of this Policy shall be submitted to NACC through the Maisha online reporting portal. Compliance and accountability shall be ensured through the commitment to sector development aspirations, the Public Service Performance Contracting mechanism and the NACC Maisha Certification System.

10.0 POLICY COMMUNICATION AND DISSEMINATION

The Policy shall be uploaded in the Ministry's website for access by employees and stakeholders.

11.0 POLICY REVIEW

The Policy will be reviewed after every five years or as need may arise to ensure it remains relevant to the needs of the SDL and in line with Kenya AIDS Strategic Framework and the relevant Sector HIV Plan.

12.0 EFFECTIVE DATE

This Policy comes into effect on this 28th day of May 2020.

Harry Kimtai, CBS
Principal Secretary