



NATIONAL CRIME RESEARCH CENTRE

NCRC HIV AND AIDS POLICY

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ABBREVIATIONS

ACU	Aids Control Unit
AIDS	Acquired Immune Deficiency Syndrome
ADA	Alcohol and Drug Abuse
ARVs	Anti-RetroVirals
BCCGs	Behaviour Change Communication Groups
CBO	Community Based Organization
CCC	Comprehensive Care Clinic
FBO	Faith Based Organization
FM	Frequency Modulation
HBTC	Home Based Testing and Counselling
HIV	Human Immunodeficiency Virus
HTS	HIV Testing and Services
IEC	Information Education and Communication
KAIS	Kenya Aids Indicators Survey
KNASP	Kenya National HIV/AIDS Strategic Plan
M & E	Monitoring and Evaluation
NACC	National Aids Control Council
NCRC	National Crime Research Centre
NGO	Non Governmental Organization
PEP	Post Exposure Prophylaxis
PLWHA	People Living with HIV and AIDS
PMTCT	Prevention of Mother to Child Transmission
UNAIDS	United Nations Joint Programme on AIDS
SUD	Substance Use Disorder
NCDs	Non- Communicable Diseases
ILO	International Labour Organization
VCT	Voluntary Counselling and Testing

DEFINITION OF TERMS

Affected: A person who is feeling the impact of HIV & AIDS through sickness or loss of relatives, friends or colleagues or a person whose life has changed in any way by HIV & AIDS due to the broader impact of the epidemic.

Aids: Acquired Immunity Deficiency Syndrome is the latter phase of HIV infection associated with a cluster of medical conditions often referred to as opportunistic infections.

Comprehensive care: A variety of services given to HIV positive persons that includes treatment, clinical, physical, nutritional and psychosocial support.

Community: People living and working within the National Crime Research Centre and its surroundings.

Confidentiality: The right of every person to have his/her medical information including HIV status kept secret.

Discrimination: Any direct or indirect discrimination against anyone; on the basis of their HIV status and/or one or more, but not exclusive to race, gender, sex, pregnancy, marital status, ethnic or social origin, colour, sexual orientation, age, disability, religion, conscience, belief, culture, language and birth”.

Employer: National Crime Research Centre.

Employee: Any person engaged by NCRC to perform any task with the goal of earning a wage/salary.

Informed consent: Giving permission without coercion by an individual with full knowledge and understanding of the implications of giving such permission.

PEP: The administration of antiretroviral medication to a person who has been exposed to HIV or risk of, to prevent transmission of the disease.

Policy: National Crime Research Centre HIV/AIDS Policy.

Prevention with Positives: Any intervention that addresses the specific prevention needs of HIV-positive persons. HIV positive people should be involved in the planning and implementation of all prevention with positive programs.

Staff member: All those appointed on College Conditions of Service. (It excludes external contractors, visitors and honorary appointments).

VCT: Testing an individual for HIV voluntarily with the individual's permission, where such testing includes counseling before and after the test.

1.0 INTRODUCTION

Mandate and functions of National Crime Research Centre

The National Crime Research Centre (NCRC) is established by an Act of parliament, The National Crime Research Centre Act, No. 4 of 1997.

The mandate of the Centre is to carry out research into the causes of crime and its prevention and to disseminate the research findings and recommendations to Government Agencies concerned with the administration of criminal justice and other stakeholders.

The functions of NCRC as provided for under Section 5 of the National Crime Research Centre Act, No. 4 of 1997 are to:

- i. Carry out coordinated research into, and evaluate the impact of, programmes pursued by the agencies responsible for the administration of criminal justice,
- ii. Collate all crime related data,
- iii. Carry out research into deviations from the criminal justice system with a view to increasing the awareness and responsibility of the community in the rehabilitation of criminal offenders,
- iv. Carry out research into the efficacy and adequacy of criminal investigation and prosecution agencies, the penal system and the treatment of criminal offenders.
- v. Disseminate research findings through publications, seminars, workshops, etc.
- vi. Liaise with any other research bodies within or outside Kenya engaged in the pursuit of similar or related research.

In carrying out its mandate and functions, the Centre is guided by the following:

Vision

To be a World Class Crime Research Institution.

Mission

To provide quality and authentic research into crime, causes of crime and its prevention with a

view to achieving a crime free society.

Core Values

The Centre will conduct its business guided by core values including:

- i. Public safety
- ii. Integrity
- iii. Professionalism
- iv. Transparency and accountability
- v. Research confidentiality
- vi. Collaboration and Partnership
- vii. Creativity and innovation
- viii. Inclusivity and public participation

2.0 HIV AND AIDS POLICY

2.1 Background

The Government of Kenya recognizes HIV/AIDS as a major development and social issue posing severe threat to the economy, with major social and economic impact on the society. The epidemic has adversely affected national development by destabilizing families, workplaces and the society by increasing the health burden, increasing poverty, lowering productivity. As a result of the negative impact of HIV and AIDS in the workplace, the Centre has an obligation to provide a guide for the prevention, treatment, care and support of the infected and affected at the workplace. The Policy aims at providing guidance to the management of employees and other stakeholders who are infected and affected by HIV and AIDS and prevention of further infections.

2.2 Rationale

NCRC aims to mitigate the impact of HIV/AIDS within the Centre and the community by harnessing its strengths, core competencies and societal values.

The Policy provides an M&E framework to drive annual program reviews that conforms to the new KNASP and the Kenya Country Performance Contracting M&E frameworks. Furthermore, the Policy will take into consideration related institutional policies such as the Policy on Gender-Based Violence and Sexual Assault, Policy on Alcohol and Drug Abuse, other relevant national policies and the education sector policy on HIV/AIDS.

The Policy will be the Centre's commitment to the development of a working environment that is free of discrimination, stigmatization of HIV, and where people living with HIV/AIDS are assured of their rights being upheld and protected. NCRC takes a comprehensive approach to HIV/AIDS, with educational and preventive interventions as the foundational activities to safeguard the interests of its staff and community. The policy is expected to demonstrate the Centre's commitment to effective and sustainable programming and align the efforts with the national long term strategy as defined by Kenya's Vision 2030.

3.0 LEGAL AND REGULATORY FRAMEWORK

NCRC recognizes the existing legislation within Kenya which applies to HIV/AIDS, and in terms of which this Policy shall be applied.

This national legislation includes, but not limited to:

- i. The Constitution of Kenya, 2010
- ii. Sessional paper No.4 of 1997 on HIV
- iii. HIV and AIDS Prevention and Control Act, 2006
- iv. The Employment Act 2007
- v. The Occupational Safety and Health Act, 2007
- vi. Persons with Disabilities Act 2003
- vii. Public Officers Ethics Act 2003
- viii. Sexual Offences Act 2006
- ix. Data Protection Act 2019

International instruments including, but not limited to:

- i. International Convention on Civil and Political Rights

- ii. Convention to Eliminate all Forms of Discrimination Against Women
- iii. Convention on the Rights of the Child
- iv. The Universal Declaration of Human Rights
- v. The Human Rights Charter
- vi. The African Charter of Human and Peoples' Rights

3.1 Goal and Objectives

Goal

The goal of this Policy is to provide a framework for the holistic and comprehensive management of HIV/AIDS at the work environment.

Objectives

The objectives of this Policy are to:

- i. Provide sustained support in the national efforts towards the reduction of new HIV infections.
- ii. Provide appropriate care and support for the infected and affected.
- iii. Promote progressive and non-discriminatory working environment that is free of stigma and has respect for individual human rights.
- iv. Promote positive behaviour change.
- v. Empower the NCRC staff and the stakeholders on issues of HIV/AIDS through Awareness creation.

3.2 Scope

This Policy provides guidelines and sets the standards for preventing and managing HIV/AIDS at NCRC. It applies to staff, their family members and NCRC stakeholders.

3.3 Institutional Frame work

The Centre's Governing Council and Management will oversee the implementation of this policy and development of appropriate HIV/AIDS programmes, policies and regulations. They shall also take immediate and appropriate corrective action when provisions of this policy are violated.

3.4 Role of the Governing Council

The Governing council will Provide Policy direction and **mobilize** resources to support HIV/AIDS related programmes.

3.5 Role of Director/CEO

The role of the Director/CEO will be to;

- i. Appoint and provide support to the Centre's HIV/AIDS Prevention Committee;
- ii. Facilitate capacity building on HIV/AIDS for staff;
- iii. Allocate resources and oversee the implementation of the Centre's HIV/AIDS Policy;
- iv. Monitor and evaluate the HIV/AIDS Policy;
- v. Strengthen commitment at all levels of the organization on HIV/AIDS;
- vi. Submit quarterly reports to the NACC.

3.6 Role of the Centre's HIV/AIDS Prevention and Management Committee/ ACU Unit

The HIV/AIDS Prevention and Management Committee will be responsible to the CEO for the implementation of this Policy.

The Committee functions will be to:

- i. Coordinate the implementation of this Policy;
- ii. Ensure that HIV and AIDS is mainstreamed into the core activities;
- iii. Provide information necessary for planning and budgeting for HIV and AIDS programs;
- iv. Facilitate provision and linkage of support services for management of HIV and AIDS including counseling, nutrition and care for PLHIV who have voluntarily disclosed their status;
- v. Develop and adopt work plans for the use of allocated resources for HIV and AIDS activities;
- vi. Make proposals for resource mobilization to enhance HIV and AIDS Policy implementation;
- vii. Conduct periodical surveys and present results for use by Management;

- viii. Liaise with other ACUs, National AIDS Control Council (NACC), State Department of Public Service (SDPS), HIV and AIDS Secretariat and other fora for information sharing and best practices in the implementation of this Policy;
- ix. Introduce strategies to deal with the dynamics of HIV and AIDS, ADA, SUD, mental health, and NCDs and related issues;
- x. Develop and disseminate HIV and AIDS Information, Education and Communication (IEC) materials on prevention, care, support and treatment;
- xi. Ensure the Centre facilities have been replenished with male and female condoms;
- xii. Identify training needs for members of the ACU and recommend capacity building;
- xiii. Advise the Centre on Human Resource issues related to HIV and AIDS; and
- xiv. Undertake review of HIV and AIDS Policy.

4.0 Guiding Principles and Programmes on HIV/AIDS Prevention and Management in the Workplace

HIV/AIDS Prevention and Management will form part of an integral dimension in the design, implementation, monitoring and evaluation of policies, programmes, actions and projects at all levels at the Centre.

HIV/AIDS Prevention and Management will be focused on the following areas at the Centre:

4.1 Recognition of HIV and AIDS as a Workplace Issue

HIV and AIDS is a workplace issue and will 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.

4.2 Women Empowerment

Gender dimensions of HIV and AIDS will 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. Therefore, equal gender relations and the

empowerment of women will be vital to successful prevention of the spread of HIV infection and enabling the infected to cope with HIV and AIDS.

4.3 Persons living with Disabilities

Persons living with Disabilities working for the Centre will be accorded equal treatment with other employees without disabilities. They will be facilitated to work beyond the mandatory retirement age of sixty five (65) years as provided for in circular Ref. NO. MSPS/HRM/2/2/2/II/21 dated 29th May, 2012.

4.4 Social Dialogue

Social dialogue will be prioritized because a successful HIV/AIDS prevention and management requires co-operation, willingness and trust between management, employees and their families.

4.5 Recruitment and Promotion

HIV and AIDS screening will not be required by 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

4.6 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 Director/CEO.

4.7 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.

4.8 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.

4.9 Medical Privileges, Care and Support

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.
- Provision of Post-Exposure Prophylaxis (PEP) in cases where an employee is accidentally exposed to HIV in the course of duties.
- Provision of comprehensive medical cover.

4.10 Deployment, Transfers and Field assignments

Where possible, spouses should not be separated to minimize vulnerability, Employees should 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.

4.11 Housing and Accommodation

The prevailing Government policy on housing will continue to apply to all employees of the Centre regardless of their HIV status.

4.12 Training and Development

NCRC will educate and train all its employees on HIV and AIDS related issues, monitor and evaluate the impact of the same.

4.13 Sexual Harassment, Abuse and Exploitation

There shall be zero tolerance to sexual harassment, abuse and exploitation at the Centre to reduce the risk of transmission.

4.14 Retirement on Medical Grounds

HIV and AIDS is not a cause for termination of employment. Therefore persons with HIV-related illnesses will continue to work as long as they are medically fit or until declared unfit to work by a Medical Board. Where an employee is medically unfit to continue working, NCRC will facilitate the retirement process.

4.15 Terminal Benefits

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

4.16 Discrimination and Stigma

All NCRC 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.

4.17 Confidentiality and disclosure

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

4.18 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.

4.19 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 at the Centre.

5.0 Partnerships

NCRC will initiate effective partnerships to enhance the success of the policy implementation.

6.0 Monitoring and Evaluation

This Policy will be monitored and evaluated for effective planning, implementation and review of HIV/AIDS- related programmes.

7.0 Policy Review

This Policy will be reviewed after every three (3) years or as may be deemed necessary. The Policy is available to all NCRC staff members and on the Centre's website for the information of stakeholders.



DIRECTOR/CEO
NATIONAL CRIME RESEARCH CENTRE