

HIV IN SCHOOLS

A SUMMARY OF THE GOOD PRACTICE GUIDE

HIV in childhood is relatively rare in the UK. Around 2,500 young people are growing up living with HIV and most of these are older adolescents. However, many others who do not have HIV themselves live with a close family member who does. This means that children living with, and affected by, HIV are attending UK schools.

In January 2015, a survey of paediatric HIV health teams showed that in 89% of cases, schools had not been informed that they had a pupil living with HIV.

An Ipsos survey in 2014 showed that 80% of teachers were concerned about the pastoral care needs of pupils living with HIV, but there was a considerable amount of misunderstanding of how HIV is passed on.

For example, 52% cited spitting/biting as a route of transmission, and only 40% correctly identified the main ways children living with HIV in UK schools have acquired HIV.

Another survey looking at public knowledge and attitudes about HIV conducted by the National Aids Trust (NAT) in 2021 found that most of the public don't hear very much about HIV and that their knowledge is often outdated and patchy.

Most people surveyed mistakenly identified at least one way in which HIV cannot be acquired (NAT 2021).

HIV IS NOT A NOTIFIABLE DISEASE

'Notifiable diseases' are diseases that people are legally required to report.

HIV is a 'non-notifiable disease' because all people living with HIV, including pupils and staff in schools, present no risk of onward transmission through everyday contact.

APPLYING THE HIV IN SCHOOLS GUIDANCE

Following this guidance is simple, effective, and does not incur any costs for a school. Everything that a school needs to do to support children living with HIV already exists within established systems.

It involves understanding the realities of living with a highly stigmatised illness, working with children and families to meet their needs, and upholding the level of confidentiality that they want and that is legally afforded to them.

This guidance will help you meet your legal duties in various relevant areas:

- equality
- confidentiality
- health and safety
- bullying
- statutory duties to promote children and young people's wellbeing
- supporting pupils at school with medical conditions.

A CHILD (OR TEACHER) LIVING WITH HIV IN A SCHOOL:

- poses no risk
- presents no additional insurance issues
- requires no additional resources

STIGMA

The term stigma is often used when talking about HIV. Stigma refers to the devaluing, shaming, blaming, or punishment of particular individuals or groups. Stigma taps into existing prejudices and often further marginalises people.

For HIV, stigma comes from HIV being associated with sex, disease, and death, and with illegal or culturally taboo behaviours such as drug use.

Children living with HIV can face a high level of stigma, which can affect their wellbeing and can lead them to feel shame, guilt, and isolation.

It can also lead people or institutions to discriminate, causing direct harm or violating children's legal and human rights, such as by denying them services or entitlements.

WHAT SCHOOLS WANT TO DO

Schools want to be places where all children are safe and able to equally access education.

They are places where children's attitudes and understanding of the world are developed.

Therefore, schools should model an educated and calm response to HIV, as they would with any other health condition.

WHAT SCHOOLS HAVE TO DO (THE LAW)

Children living with HIV are legally defined as 'disabled' and are therefore protected against discrimination in education by the Equality Act 2010.

The Children and Families Act 2014 sets out in law a duty to support pupils with medical conditions in maintained schools, Academies, Free schools, and Pupil Referral Units (PRU).

WHAT SCHOOLS NEED TO DO

Those living with HIV may have related physical and mental health issues and take a strict daily regime of medication that may lead to side effects.

Children living with HIV have often faced bereavement and poverty, and can have additional caring responsibilities at home.

School needs to be a place where it is safe to be living with HIV without fear of discrimination, and where families feel safe to share this information.

Referencing HIV in policy documents and other relevant communications with families (alongside other health conditions) ensures that everyone in the school community is aware of the school's position in wanting to support a child living with, or affected by, HIV.

Examples of policies and statements that could be included, are in the full version of this guidance document:

WWW.CHIVA.ORG.UK/EDUCATION

KEY FACTS

The vast majority of children and young people living with HIV in education in the UK acquired HIV during pregnancy, birth, or breastfeeding (vertically).

There has never been a case identified of a child passing HIV to another child, teacher, or members of the school community at school.

WHAT SCHOOLS SHOULD DO WHEN A CHILD'S HIV STATUS IS SHARED

This model follows the format and statutory guidance provided by the DfE regarding children with medical conditions in schools.

Either the child/family tells a staff member, or the school is informed by a third person.

If informed by a third person, establish whether they have the family's consent. If not, inform the family and reassure them that this will be kept confidential.

The child/family are reassured and the headteacher is informed.

The headteacher designates a staff member to co-ordinate a meeting with the parent/carer, child (where appropriate), and an HIV health or social care practitioner, to discuss whether an Individual Health Care Plan (IHCP) is required. In most cases this will be appropriate.

Level of support required is identified and documented and must include details of confidential information storage and sharing, and dates to review this plan.

Consider the information or training needs of the designated staff member to improve their knowledge and understanding of HIV. This could be reading the full version of this guidance, a conversation with a healthcare professional who has HIV expertise, or Chiva.

If a child tells you that they or their parent/carer are living with HIV, reassure the child that this information will be kept confidentially amongst specific staff in the school.

Agree who will tell the parent/carer that this information has been shared. There is further information in the full guidance.

It is important that all staff discuss, and are aware of, the procedures to follow when the HIV status of a child is shared, before it happens. This presents the opportunity to:

- ensure that staff's HIV knowledge is up to date
- reassure staff by repeating information about routes of transmission
- firmly establish the need for confidentiality.

It may be helpful to get support from a local health promotion unit, health advisors from local sexual health clinics, or a local paediatric infectious diseases nurse or doctor.

KEY FACTS

There is no need for anyone, except the school headteacher and one other staff member, to know when a pupil is living with HIV.

Confidentiality is critical, due to the HIV stigma still present in society.

People living with HIV who are on effective treatment are able to live long, healthy lives. If their viral load is undetectable they cannot pass HIV on to their sexual partners.

CHECKLIST FOR DEVELOPING AN HIV FRIENDLY SCHOOL

To develop policies for supporting children living with or affected by HIV, start by asking the following questions:

- Is HIV mentioned in school policies? This includes policies for inclusion relationships and sex education (RSE) policies, and school documents such as the prospectus or mission statement.
- Are you following universal first aid procedures?
- Who are your named first aiders and when is their training review date?
- Do all staff, including teachers and support staff, have a basic understanding of HIV transmission and an awareness of the stigma faced by those living with, or affected by, the virus?
- Is HIV awareness part of your school development plan?
- Can opportunities be created in your school to promote HIV awareness across the school community?

These questions could be considered in a whole staff meeting or by governors as a way of raising awareness of the key issues for schools in becoming HIV friendly.

For the full guidance on supporting the needs of children living with and affected by HIV in UK schools, please visit: **WWW.CHIVA.ORG.UK/EDUCATION**.

For additional support please contact Chiva:

Telephone: 0117 9055149
Email: message@chiva.org.uk

