



HIV/AIDS and Child Care

HIV (Human Immunodeficiency Virus), the virus that leads to AIDS (Acquired Immune Deficiency Syndrome), is not transmitted through everyday contact. HIV is a fragile virus, and no cases of transmission through casual contact have been reported in a child care setting anywhere in the world.

HIV is *not* transmitted by:

- touching, hugging or kissing
- sharing food, dishes, drinking glasses or cutlery
- being coughed, sneezed or cried on
- sharing toys, even those that have been mouthed
- diapers or toilet seats
- urine, stool, vomit, saliva, mucus or sweat (as long as untainted by blood)

HIV is transmitted from one person to another by sperm, vaginal secretions, breast milk, blood, and body fluids containing blood, usually through unprotected sexual intercourse or the sharing of contaminated needles. It is also transmitted from mother to child during pregnancy, delivery or by breastfeeding. Simple contact between blood and intact skin is not enough to transmit HIV.

Three conditions are necessary for transmission:

- The blood must be fresh.
- There must be sufficient quantity.
- It must have a route of entry into the bloodstream of the uninfected person.

Biting often concerns parents, but there has never been a confirmed case of transmission by biting. To risk transmission, a child infected with HIV would have to have fresh blood in his mouth and break the skin of an uninfected child. An uninfected biter would have a theoretical risk of exposure only if he broke the skin of a child infected with HIV and drew blood into his mouth. Such events are very unlikely.

Parents also worry about accidents and fights, but fresh blood-to-blood contact among children is extremely unusual.

Children infected with HIV have the same right to attend child care as other children. HIV is considered a disability, and, by law, discrimination on the basis of disability is not allowed. Staff also cannot be discriminated against, fired or non-renewed because of their HIV status.

Child care plays an important role in the lives of children infected with HIV, offering them peers, stimulation, stability and the chance to learn new skills. A child's parents, physician and social worker will decide whether child care is suitable and will monitor the child's progress.

Child care staff probably will not know if a child is infected with HIV. Many children have no symptoms, and if no one in the

family has been diagnosed as HIV-positive, the family may not even suspect that the child has the virus.

If the parents know, they have no obligation to tell the centre. They may keep the information to themselves because they fear discrimination. If they decide to tell an educator, he or she has an ethical obligation to keep the information confidential. There is no need for the parents of other children to know since a child with HIV poses no danger.

It is important for child care centres to develop a health policy that respects the rights of all children and staff to privacy and confidentiality. For everyone's protection, the policy should include the use of universal precautions, proper hygiene, procedures for informing parents about contagious diseases, and procedures for excluding sick children and children with serious behaviour problems.

UNIVERSAL PRECAUTIONS Adapted for Child Care Settings

The best way to control the spread of any infection is to practise proper hygiene. When blood is involved, it is also important to use universal precautions, the measures developed to deal with blood-borne diseases like HIV and hepatitis B and C. Never delay emergency action because you can't apply universal precautions. The risk of transmission of blood-borne diseases is too small to justify endangering a child.

Cover Cuts: If you have cuts or open sores on your skin, cover them with a plastic bandage.

Wear Gloves: If there is any risk of coming into contact with blood or other body fluids, wear latex gloves. Gloves should only be worn once and disposed of in a plastic garbage bag.

Wash Hands: Wash your hands with soap and hot water for at least 20 seconds after you have had contact with blood or other body fluids, after going to the bathroom, before preparing or eating food, and after removing latex gloves. Use hand lotion to help keep your hands from becoming chapped or irritated. Intact skin is your first defense against infection.

Clean Up: Spills of blood or other body fluids should be cleaned up with undiluted household bleach. Paper towels should be used and disposed of in a plastic garbage bag. Wear latex gloves during clean-up.

Discard Garbage: Use caution when disposing of garbage and other waste that may contain infected materials or used needles. Discard soiled material in a sealed plastic bag.

Wash Clothes: Soiled items should be stored in sealed plastic bags. Wash soiled clothing separately in hot soapy water and dry in a hot dryer, or have clothes dry-cleaned.