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Acknowledgements

The realisation of the KIST HIV/AIDS Policy is a concerted effort of many individuals, both within and outside KIST. Special thanks go to the KIST students and staff who participated actively in the policy formulation process; both in workshops and as individuals forwarding their ideas to the Technical team of the HIV/AIDS Steering Committee.

The members of the HIV/AIDS Steering Committee also deserve credit for coordinating all activities towards the policy formulation. In spite of their heavy workload, they were always ready to meet, even at a moment's notice, whenever necessary to review the progress.

The contribution by members of staff living with HIV/AIDS to this policy can not be underscored, and it our belief that they will have a prominent role in the implementation process; that they will be a sounding board of how appropriate our interventions are.

Throughout the policy formulation process, a number of individuals outside KIST made their contributions; the Executive Director of the National Commission on AIDS (CNLS), The Director of the National Referral Laboratory for Retro-Viruses, and Heads of sister institutions in the country. Special thanks also go to Ms. Carol Coombe of the Mobile Task Team for her continued encouragement in the fight against HIV/AIDS.

Lastly, our special appreciation goes to the Working Group for Higher Education (WGHE) of the Association for the Development of Education in Africa (ADEA) who provided funds for the preparation of this policy.

Foreword

The Kigali Institute of Science, Technology and Management (KIST) is a young institution with the mandate of training highly skilled professionals in the fields of science, technology and management. Its proximity to the heart of the city of Kigali makes it highly susceptible to HIV/AIDS; its community comprises of students and staff who fall within the most productive age group, which is also the most sexually active and vulnerable age group of 14 – 49 years.

KIST acknowledges the impact that HIV/ AIDS can have on its performance and mission. It has therefore been involved in a number of activities towards the fight against HIV/ AIDS but largely in an uncoordinated manner. Hence our momentum has not been sustained. HIV infection is a life threatening disease with social, economic and human rights implications that require careful planning to ensure continuity and a stable learning environment. The formulation of an Institute Policy on HIV/AIDS was therefore imperative. This policy is our statement of commitment that we are rising up to the challenges of the pandemic. The policy will help us to ensure employment and learning equity, protect the human rights and dignity of the affected and infected employees and students, and to integrate the HIV/ AIDS education in the curriculum.

The policy formulation process has been participatory in nature, involving consultations with staff, students and stakeholders. The commitment and diligence of the KIST community in formulating this policy is commendable, and gives hope that the task at hand in implementing the policy will meet with the same determination.

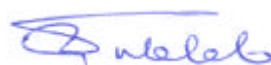
This policy seeks to highlight the role to be played by all parties; the students, KIST Management, and staff. It also tackles issues of stigma and discrimination with respect to HIV/AIDS. Throughout the process of policy formulation, a number of individuals living with HIV/AIDS offered their ideas. They helped shape the policy, but will not be given their due recognition because they prefer to remain anonymous. It our hope that this policy will enlighten our community and give confidence to such individuals to freely talk about their HIV status without fear of stigma or discrimination.

The HIV pandemic and it impact goes beyond the boundaries of KIST and its environment. KIST will seek and strengthen collaboration with all partners in the struggle against the scourge. It is imperative for the institute to be pro active and take on HIV/ AIDS with the seriousness it deserves.

Let us echo the words of a great statesman, Nelson Mandela, who said, “Be faithful to one partner and use a condom. Let us take precautionary measures. Give a child love, laughter and peace, not AIDS.” My appeal to the KIST community is to follow Mandela’s advice. Let us educate our community, give hope, compassion and care, as together, we strive towards a brighter future.



Mr. Alfred KALISA
Chairman of KIST Council



Prof Silas Lwakabamba
Rector

Chapter One

1 Background

1.1 National HIV/ AIDS Situation

The devastating impact of HIV infection and AIDS related deaths on all aspects of social and economic activity is a major contributor to increased poverty in Sub-Saharan Africa. Rwanda has been vulnerable to HIV/AIDS due to its geographical location and the effects of social and physical dislocation and dispersal brought about by the civil war and genocide in 1994. At the moment the HIV prevalence rate is estimated to be about 13.5 %, although there are indications of a declining trend.

1.2 Tertiary Institutions and HIV/AIDS

Tertiary Institutions in their privileged position of knowledge have the potential to analyse any emerging challenges to society through research and to devise strategies to deal with those challenges, yet their involvement has largely been limited to those Institutions with medical schools that are mainly involved in treatment related research. Most of the Institutions are silent about the disease and yet they are often confronted with sensitive decisions regarding their students and staff whose productivity has been adversely affected by HIV infection. The apparent low level of commitment for tertiary Institutions is that the impact of HIV/AIDS on the education sector is not altogether straightforward, and for most Institutions, there are no systems in place to monitor this impact.

1.3 The HIV/AIDS Situation at KIST

To date no study has been carried out to determine the prevalence and impact of HIV /AIDS on the Institute community. However various effects of the epidemic are observable. These effects can be looked at under the following subtopics:

- i. *Reduction in the availability of qualified, experienced staff and increased costs of replacement*

HIV related illness and death affects the supply and quality of education. Before one dies from AIDS, there is a protracted period of illness during which an individual is not able to perform efficiently. With respect to teachers/lecturers this means long absences from classes, and altered quality of classes delivered during this period.

At the moment KIST relies heavily on expatriate staff as a result of the tragic events of 1994, which depleted Rwanda of qualified staff. The pool of experienced staff is small and replacement of sick staff is not just expensive, it may even be impossible depending on experience and skills required.

ii. *Depression, stress and chronic anxiety among Staff and Students*

Recurrent illnesses of staff and students, trauma of infection and death often cause a sense of depression and stress. There is consequent inability to concentrate by both students and staff, leading to reduced performance.

iii. *Absenteeism and Deaths among the Institute students*

The cause of student absenteeism and drop-out is usually lack of fees owing to the sickness or death of the benefactor. In some cases it may be due to personal illness from opportunist infections. As students repeatedly fall sick from HIV related illness, their academic performance is adversely affected.

iv. *Strain on the Institute financial resources*

HIV/AIDS impacts on the financial situation of an institute by increasing costs, reducing productivity, and causing diversion of resources. Absenteeism and subsequent staff replacement, accounts for the largest share of the costs arising from HIV/AIDS. Significant costs are also incurred in providing for funerals, while the death of staff represents a threefold loss for the Institute: the loss of well qualified individuals, the loss of training investments, and the funeral costs.

The rate of drop-out by students due to sickness, deaths or inability of guardian or sponsor to pay tuition can affect the Institute's income, as most institutions depend on school fees for their running costs.

Long medical leave in the case of staff means recruitment of part-time replacements. Again for some Institutions, retirement benefits in case of early retirement and Gratuity can cripple an Institution financially, if all this is not considered in the planning / budgeting phase.

v. *Reduction of demand for education*

According to the Study of Impact of HIV/AIDS on the Education Sector in Rwanda¹, HIV is not at the moment the main determinant of education delivery. Other problems affecting orphans and Other Vulnerable Children (OVC) predominate. There is however evidence that much as enrollment is improving, the dropout rate is still high especially among female students, as they take up the care for sick parents, guardians or siblings.

Studies available from the region² predict a likely decline in the quality of teaching and learning unless urgent measures are put in place to plan, manage and implement policies and programmes aimed at controlling new infections and taking care of those infected/affected by HIV/AIDS.

¹ Dr Kinghorn et al, 2003, Assessment of the Impact of HIV/AIDS on the education sector in Rwanda.

² UNAIDS Report on the Global HIV/AIDS Epidemic, June 2000

1.4 The Policy Formulation Process

The policy formulation processes involved the following distinctive stages to ensure maximum participation of stakeholders:

- i. Conceptualisation and conception
- ii. Establishing the steering committee
- iii. Collection of ideas from various constituents
- iv. Synthesizing the ideas
- v. Preparing Draft Policy
- vi. Launching of the Policy

1.4.1 Conceptualisation and Conception

The idea of an institute policy on HIV/AIDS was initiated by the Rector, Prof Silas Lwakabamba way back in 2001, after realizing that some members of staff were battling with HIV related infections and were not able to undertake their full workloads.

Like other activities related to HIV/AIDS on the campus, the process was slow, and constrained by lack of resources. However in 2003 when the call from the WGHE/ADEA was made, KIST took it as an opportunity not to be missed, and made a proposal that was accepted for funding.

1.4.2 Establishing of the HIV/AIDS Steering Committee

A Steering Committee was formed by the KIST Management Committee to oversee the whole policy formulation process. This committee comprised of representative members from the academic and administrative departments of KIST, with two rotating seats for the Students' Guild. The list of members comprising the Steering committee can be found in the Appendix.

1.4.3 Collection of ideas from various constituents

The Steering Committee mandated a technical team to consult with stakeholders who included students, staff, and other organisations involved in HIV management and control. Following several consultative meeting, the technical team of the steering committee drafted a working document for the stakeholders' workshops.

1.4.4 Synthesizing the ideas

Two workshops were organised separately for students and KIST staff. A number of staff belonging to two organisations of people living with HIV/AIDS participated in the staff workshop. The working document was then presented for discussion. For each workshop a set of questions were deliberated on in groups and recommendations

were discussed in the plenary. The different questions for the two workshops are found in the Appendix.

1.4.5 Preparing a Draft Policy

The Steering Committee Technical Team used recommendations and ideas from the workshops to produce a draft HIV/AIDS policy. A special “expanded” management committee was then convened to consider and approve the draft policy. The recommendations from the workshops will also be used to put up an action plan for the policy implementation and monitoring. The policy will still have to be presented to the KIST council for final approval

1.4.6 Launching of the Policy

The approved KIST HIV/AIDS Policy is due to be launched on August 3, 2004. The launching ceremony is yet again an opportunity to sensitise the community on the major components of the policy.

Chapter Two

2 The Policy

4.1 Policy Statement

KIST is committed to contributing to the development of the Rwandan community by producing highly skilled professional, and acknowledges the threat posed by HIV/AIDS to its mission. The institute therefore commits itself to the following:

- i. Reducing the risk of transmission of HIV/AIDS within its community.
- ii. Improving the care for people infected with or affected by HIV/AIDS in its community.

2.2 Objectives of the Policy

2.2.1 To enhance the KIST capacity to

- i. Confront HIV/AIDS issues: monitoring the prevalence and impact on the Institution and developing appropriate interventions.
- ii. Develop communication strategies aimed at scaling up the desired behaviour change.

2.2.2 To put in place HIV/AIDS sensitive procedures and practices in regard to:

- i. Student admissions and academic regulations
- ii. Staff Recruitment and promotion

2.2.3 To participate in the fight against HIV/AIDS through activities such as:

- i. Improving health care for HIV/AIDS infected members of KIST and support to those affected by the disease
- ii. Collaborating and Networking with the neighbouring community in fighting HIV/AIDS
- iii. Educating of the Institute community on HIV/AIDS/ STDs
- iv. Promoting Voluntary Counseling and Testing for HIV and other STDs (VCT).
- v. Promoting safer sex.

2.2.4 To support the national and sectoral efforts to develop and communicate HIV prevention, Care and Advocacy messages among the youth in KIST and the neighbouring community.

2.2.5 To promote research related to HIV/AIDS.

2.3 Policy Components

The KIST HIV/AIDS Policy is comprised of the following key components:

- i. Rights and responsibilities of staff and students infected with or affected by HIV/AIDS;**
- ii. Provision of preventive, care and support services and education on campus;**
- iii. Integration of HIV/AIDS issues into teaching, research and other KIST activities;**
- iv. Advocacy, networking and collaboration with other organizations and the community;**
- v. Implementing structures, procedures, monitoring and research.**

2.3.1 Rights and responsibilities of staff and students infected with or affected by HIV/AIDS

KIST recognises the role of people living with HIV/AIDS in breaking the transmission chain. For them to play their rightful roles in the struggle against the epidemic, they need to feel accepted and valued by the KIST community; in the work place, in their place of worship, study or residence. They need the assurance that disclosing their HIV positive status will not lead to either loss of their dignity, or loss of opportunity at the Institute. They need an assurance that the Institute will not discriminate against them, shun them or ridicule them.

To enhance this, KIST will pursue the following policies regarding student admissions, staff recruitment and promotion.

i. Student admissions:

- There will be no pre- admission HIV testing requirement for students into KIST. Students however will be sensitized on the importance of taking an HIV test.
- No student for this reason may be denied academic admission, access to the institutes programs, facilities, and bursary services or any benefits provided to students, based on his/her HIV/AIDS status.

ii. Staff recruitment

- There will be no pre- recruitment HIV/AIDS testing requirement for KIST staff. Staff will however be sensitized on the importance of taking a voluntary HIV test.
- No staff member for this reason may be denied employment, access to institutes facilities, events or any benefits provided to the institute's employees, based on his/her HIV/AIDS status. Employees with HIV/AIDS will be governed by the same contractual obligations as all other employees in accordance with the institute's conditions of service.

iii. Staff development

- No staff member may be denied the opportunity to be promoted or to pursue further studies on account of his/her HIV/AIDS status.

iv. Participation in KIST activities

- Staff/student members living with HIV/AIDS are expected to participate in any of the institute's activities for as long as they are able to function effectively and as long as they pose no medically significant risk to members of the Institute's community.
- If and when staff/students with HIV/AIDS become incapacitated through the illness, or pose a medically significant risk to others at the Institute, the relevant administrative or academic staff should as practically as possible consider alternative arrangements that will allow the staff or student to continue with his/her studies or responsibilities.

v. Examination for academic progress

- Students with HIV/AIDS status are expected to attend classes, tests and examinations in accordance with KIST's Academic Rules and Regulations for as long they are able to do so effectively.
- A student whose performance is adversely affected by HIV related illness has a right to appeal to the Director of Academic services. Should the need arise for certain considerations to be made, the Director of Academic Services, together with the KIST Medical Officer will be consulted in pursuit for the most appropriate solution.

vi. Confidentiality

- No student or employee of KIST is under the obligation to inform management of his or her HIV status. Disclosure of the HIV/AIDS status should be welcomed but on a voluntary basis on the part of the staff or student. An enabling environment will be cultivated by the Institute administration in which the confidentiality of this information is ensured.
- The Institute shall not disclose specific information relating to the known or perceived HIV/AIDS status of a student or member of staff without their informed consent.

vii. Responsibility of Staff and Students

- Staff and students have a responsibility to become informed about HIV/AIDS, and to develop a lifestyle in which they will not put themselves or others at risk of infection.

- Staff and students who are living with HIV/AIDS have a special obligation to ensure that they behave in such a way so as not to pose threat of infection to any person.
- Staff and students must respect the rights of other staff and students at all times. No discriminatory attitudes or behaviour towards people living with HIV/AIDS will be tolerated.
- No staff and student should refuse to work, study with or be housed with other employees or students living with HIV/AIDS.
- Staff and students who have been proven to discriminate colleagues living with HIV/ AIDS will be counseled in the first instance, but if the discriminatory behaviour persists, formal disciplinary procedures will be effected.
- Unless justified through the proper channels, no student may use HIV/AIDS as a reason for failing to perform work, complete assignments, attend lectures, perform fieldwork or write examinations.

2.3.2 Provision of preventive, care and support services and education at campus

The majority of KIST community falls within the most sexually active age group of 15-49 years. This coupled with the fact that the Institute is within the City of Kigali implies a lot of movement of people, goods and money- makes the community vulnerable to HIV.

The policy will provide for the following:

i. HIV/AIDS prevention

- The Institute will ensure that all students and members of staff are educated and trained in all aspects of HIV/AIDS.
- Skills on abstinence and general education on values and morals will be provided. The KIST Counselling Centre will be a major outlet for the provision of information regarding HIV/AIDS. Counselling and education for the promotion of low-risk lifestyles and life-skills will be provided.
- Safer sex methods will be promoted on the campus. The Institute will endeavor to provide condoms freely, and widely distribute them through multiple channels on the campus and in student hostels, for better access.

ii. Comprehensive Health Services

Health Services for Students

- The KIST medical staff will be trained in the comprehensive management of HIV/AIDS and other STDs. The Institute will endeavor to provide ARVs to its students or collaborate with other public facilities that offer free ARVs, for the improved access to treatment for the students.
- Referral networks with other health facilities will be improved for quality care of students living with HIV/AIDS.
- The KIST Counseling Centre will be properly facilitated to ensure comprehensive support services to those infected or affected by HIV, and to ensure that students have access to confidential counselling on campus.

Health Services for Staff

- Confidential counselling services will be availed to staff on campus. The Institute will strive to ensure that the working hours of the KIST Counseling Centre are convenient for the staff.
- Currently all local staff at KIST receive health care under the RAMA medical scheme, which does not provide ARVs as yet. KIST will promote improved access to anti-retroviral treatment for its staff. KIST will hence enter into direct negotiation with RAMA and other partners to the realization of this goal. The KIST administration and staff have expressed a willingness to contribute towards ARVs.
- The KIST medical staff who while executing their normal duties will come into contact with HIV contaminated blood, body fluids or media, will be accorded post-exposure prophylactic therapy in accordance with the perceived risk in accordance with regimens prevailing in the country.

iii. Sensitisation

- Appropriate information on all aspects of preventing and coping with HIV/AIDS will be made widely accessible to staff, students and the community.
- Peer education programmes will be developed and implemented on the campus.
- Regular sensitisation workshops will be conducted on the campus for both students and staff, to raise the awareness of HIV/AIDS within the KIST community and the neighbourhood.
- The Institute newsletter will carry information on HIV/AIDS/STDs and KIST website will establish a link on HIV/AIDS/STD issues.
- KIST will pursue communication options that make the sensitization process appealing. In as much as is possible HIV/AIDS/STD messages will be

communicated whenever there is a public event at the Institute. Relevant materials and information will be posted at the various places on campus.

2.3.3 Integration of HIV/AIDS into teaching, research and other KIST activities

Having realized that HIV/AIDS is a long-term challenge and is not about to go away, KIST will elaborate and pursue the following policies regarding the incorporation of HIV/AIDS into teaching and research:

Teaching

- HIV/AIDS education will be incorporated into the curriculum of all faculties and it will be a compulsory course.
- Support will be provided to the Faculties to develop and implement plans to integrate HIV/AIDS into the curricula.
- Education programmes regarding HIV/ AIDS will, where possible be made available to all staff and students.

Research

- KIST commits itself to contribute towards mitigating the impact of HIV/ AIDS on the Rwandan society. To this regard relevant research will be undertaken in the various disciplines.
- The Directorate of Research and Consultancy will develop a policy to establish a variety of incentives and forums to promote research on HIV/ AIDS within and across faculties and at inter Institutional level.
- HIV/AIDS will be an option for students' research projects.
- One Public Lecture per semester should feature HIV/AIDS. The lecture will be published and stored in the library for reference. Public lectures on HIV related research findings will be encouraged.

2.3.4 Advocacy, networking and collaboration with other organizations and the community.

The causal factors of HIV/AIDS go beyond what the KIST community can handle alone. Therefore the Institute will actively pursue the following policies on Advocacy and Networking with the community and other organizations.

Advocacy

Advocacy is a set of targeted actions directed at decision makers in support of a specific policy issue.

Advocacy will include creating awareness of the magnitude and seriousness of the HIV/AIDS problem, diminishing discriminatory practices and removing barriers to prevention and care activities, and campaigning for effective and sustainable action.

Advocacy will help the Institute in a number of ways:

- i. Raise awareness, knowledge and understanding among the general population about HIV/AIDS
- ii. Encourage the mobilisation of resources and commitment for the implementation of the HIV/ AIDS policy
- iii. Initiate and support programmes for making ARV drugs available and cheap
- iv. Reducing the stigmatisation of the HIV/ AIDS affected people.
- v. Upholding the rights of the HIV positive people
- vi. Involving people living with HIV/ AIDS in education and prevention, where they have a key role to play.

Networking and collaboration

- KIST will support and strengthen the existing community-based approaches to prevention, care and support among those infected with and affected by, or vulnerable to, HIV/AIDS. This will involve identifying and strengthening identified good practices.
- KIST will support the development of innovative models and pilot programmes with potential for learning, replication and scaling up. Through all this work KIST will seek to tackle those attitudes and beliefs that reduce the risk of transmission of the HIV/AIDS pandemic.
- Wherever possible, KIST will encourage its partners and stakeholders to develop all their HIV/AIDS programme activities in partnership with local communities and people living with HIV/AIDS, in order to ensure that they reflect the local situation and are sensitive to the particular needs and aspirations of people infected or affected by HIV/AIDS.
- KIST will harness both in-house and external expertise capable of demonstrating effective work on HIV/AIDS, forge new partnerships where appropriate, and assist the community to access resources for this work wherever possible.

2.3.5 Implementing structures, procedures, monitoring and research.

The success of this policy will depend on a strong and effective implementation structure. KIST is keen to ensure that the policy document is not safely stacked and forgotten on the shelves and in the archives.

- The senior executive of the Institute will support and champion this policy. These shall include the Rector, Vice Rectors, Deans, Directors, Coordinators, Heads of department, the students' leadership and all other sectors of KIST leadership.
- A Standing Committee, 'HIV/ AIDS Committee' will be set up and will be reporting to the KIST Management Committee. This Committee will be provided the overall guidance on the implementation of this policy. The Committee meetings will be scheduled as per the programme for all other KIST Standing Committees.

The HIV/ AIDS Committee will comprise of the following:

1. The Rector (Chairperson)
2. The Director of Academic Services
3. The Director of Administration
4. The Dean of Students
5. All Faculty Deans
6. The Students' Guild (KISTAS)
7. Head, Guidance and Counseling Centre
8. Director of Research
9. Coordinator of Centre for continuing Education (CCE)
10. Staff representative to council
11. KIST Medical Officer
12. HIV/ AIDS Program Coordinator (Secretary)

KIST will appoint a Coordinator who shall oversee the implementation, monitoring and evaluation of this policy. The coordinator will report directly to the Rector. The Coordinator will be the secretary of the KIST HIV/AIDS Committee.

The duties of the coordinator shall include:

- i. Preparing an action plan for the policy implementation
- ii. Prepare budgets and mobilising resources for the policy implementation.
- iii. Put in place an effective policy monitoring and evaluation mechanism
- iv. Coordinate all HIV/AIDS related activities on campus
- v. Provide the link between KIST, the Community and other partners on issues relating to HIV/AIDS

Notwithstanding the roles of the coordinator above, all deans, directors, coordinators and heads of department will be responsible for the policy implementation in their specific areas of responsibility. These include:

- i. Ensuring that all staff are aware of their rights and responsibilities as stipulated in the KIST HIV/AIDS Policy.
- ii. Ensuring that students are aware of their rights and responsibilities as stipulated in the KIST HIV/AIDS Policy.
- iii. Ensuring preparation of HIV/AIDS course materials and integration of HIV/AIDS in research.
- iv. Raising awareness of available services regarding HIV/AIDS/STDs

The office of the Director of Academic Service, the KIST Clinic and Counselling Centre will work closely with the office of the coordinator of the HIV/AIDS programme to ensure effective implementation of the policy.

2.3.6 Policy Review

The KIST HIV/AIDS policy will be reviewed annually by the HIV/AIDS standing committee and recommendations submitted to the KIST Management Committee for approval.

3 Bibliography

1. UNAM HIV/AIDS policy, 2001
2. Nkumba University HIV/AIDS Policy, December 2002.
3. Strategic Framework for HIV/AIDS Control, 2002-2006 (National AIDS Control Commission, May 2002)
4. HIV/AIDS in the Rwandan Education Sector, March 2003 (HIV/AIDS Unit Draft Policy Documents)
5. HIV/AIDS and Education, UNESCO (Nairobi Office, 2003)
6. Kinghorn et al, 2003: Assessment of the Impact of HIV/AIDS on the Education Sector in Rwanda.
7. Kelly M. J (2000)-Planning for Education in the Context of HIV/AIDS. Fundamentals of Education Planning Series, No.66. UNESCO/IIEP, Paris
8. M.J Kelly, et al, 2001 Challenging the Challenger, Understanding and Expanding the Responses of Universities in Africa to HIV/AIDS (WGHE/ADEA).
9. Institutionalising the Response to HIV/AIDS in the South African University Sector: A SAVCA Analysis, Dhianaraj Chetty, December 2000.
10. Institutional Policies for Managing HIV/AIDS in Africa, Barnabas Otaala, University of Namibia, September 2003.
11. Draft HIV/AIDS and Education Policy and Strategic Planning Framework, 2002-2006. MINEDUC, January 2002.
12. HIV/AIDS and Education in Africa, Debra Meyer, Rand Africaans University, AWSE, July 2003.
13. Assessing the Impact of HIV/AIDS on Education: Towards a Response Evaluation and Research Framework for UB, Bagele Chalisa.
14. Ad hoc Expert Group Meeting on the impact of HIV/AIDS on the Education Sector in Africa: Sub Regional Outlook and Best Practices (Eastern and Southern Africa), Case of Rwanda, September 2000.

4 Appendices

4.1 Appendix 1: Questions for Students Workshop

1. How can the impact of HIV/AIDS be monitored at KIST?
2. How can HIV/AIDS education be scaled up at KIST?
3. How best can HIV/AIDS education be integrated in the curriculum?
4. Ensuring that admission regulations do not discriminate against people living with HIV/AIDS.
5. How can examination regulations be modified to accommodate failure to sit Exams in time, due to HIV related illnesses without compromising standards.
6. Care for people living with HIV/AIDS – Treatment and Support Services. How can access to ARVs be made possible?
7. Design the KIST HIV/AIDS policy implementation strategy.

4.2 Appendix 11: Questions for Staff Workshop

1. How can the impact of HIV/AIDS be monitored at KIST (statistics, performance, etc)?
2. Prevention still remains the mainstay of HIV/AIDS control. How can measures towards the reduction towards HIV transmission be strengthened (Information, Safer Sex Practices, Voluntary Testing for HIV, Counselling, etc)?
3. How best can HIV/AIDS education be integrated in the curriculum? How can research on HIV/AIDS be promoted at KIST?
4. How can we ensure the rights of a KIST Member of staff infected or affected?
5. What are the Institute responsibilities towards staff living with HIV/AIDS
6. What are the responsibilities of HIV infected or affected staff?
7. What are the institute responsibilities towards members of staff who contract HIV during the course of executing their duty?
8. How can the KIST recruitment and staff development procedures reflect non-discrimination of HIV positive staff?
9. How can examination regulations be modified to accommodate failure to sit Exams in time, due to HIV related illnesses without compromising standards?
10. Regarding treatment and care of people living with HIV/AIDS, how can access to Anti-Retro-Viral (ARVs) drugs be made possible? What support services can be put in place?
11. How can KIST collaborate and network with other Institutions/organisations/communities involved in HIV/AIDS issues?
12. How can KIST improve on Advocacy for HIV/AIDS? What strategies?
13. HIV/AIDS policy implementation strategy. What structures should we have in place for the implementation of the policy? What are the reporting modalities?

4.3 Appendix 111: The HIV/AIDS Steering Committee

- 2 Ms. Eugenie Mukanoheli Counsellor and Lecturer- Member
- 3 Ms. Coletha Ruhanya, Lecture, Faculty of Technology - Member
- 4 Ms. Odethe Mukantagara, Lecturer, School of Languages - Member
- 5 Mr. Alouis ter Haar, GTZ Consultant on Technical Education- Member
- 6 Mr. Aloys Kabagema, Lecturer, Faculty of Science - Member
- 7 Pro. Eliphazi Bisanda, Director of Academic Service, Member
- 8 Mr. Charles Sebaruma., Lecturer, Faculty of Management- Technical Team member
- 9 Dr. Mary Kabanyana-Zigira, Medical Officer, Technical Team member and coordinator