HIV/AIDS POLICY
1. PREAMBLE

RECOGNIZING that NUST as a Community has not been spared the pains of living with and being affected by HIV/AIDS and striving as an institution of higher learning, to be socially engaged;

AND FURTHER ACKNOWLEDGING the relevant provisions of the Constitution of the Republic of Zimbabwe, the National Policy on HIV/AIDS, the National Gender Policy, the Labour Act, International standards such as the Human Rights Charter;

AND FURTHER RECOGNIZING that Higher Institutions of Learning have a unique role to play in complementing local, national, regional and global level efforts to combat the epidemic;

AND FURTHER ACCEPTING the importance of addressing stigma on the basis of HIV/AIDS and the need to promote a human rights based approach to HIV/AIDS;

AND FURTHER ACKNOWLEDGING that it is our responsibility as an Institution to do everything in our power to prevent new HIV infections within and around the University community and to look after those that have been affected or infected with a view to helping them to live positively and productively;

AND FURTHER ACCEPTING that the next generation of policy advisors, project designers, leaders, educators etc. which the University is producing, will have to come out with a critical mass of knowledge and skills on how to deal with the epidemic;

THEREFORE the University is committed to playing its full part within other sectional, national, regional and international partners in mitigating the impact of HIV/AIDS, both on its internal constituency of staff and students, the community surrounding it and on the Zimbabwean society.

The University will aim to achieve this by integrating HIV/AIDS into teaching, research and community service, the components of which are outlined in this policy.
2.0 DEFINITIONS

Throughout this policy, singular and plural are interchangeable and terms are defined as follows:

**NUST** – NUST is the acronym for “National University of Science and Technology”

**Student** – any person formally admitted to enroll for academic study within the ambit of academic programmes offered by the National University of Science and Technology.

**Member of staff** - any employee of the University, whether on an academic, administrative, or other basis. Employee shall have a corresponding meaning.

**Members of the University community** – employees and students of the University.

**Affected member of University Community** – a student or employee of the University who is affected in any way by HIV/AIDS, e.g. if they have a partner or a family member who is HIV positive.

**HIV** – HIV is the acronym for “human immune deficiency virus”. HIV is a virus, which attacks and may ultimately destroy the body’s natural immune system.

**AIDS** – AIDS is the acronym for “acquired immune deficiency syndrome”. AIDS is the clinical definition given to the onset of certain life-threatening infections in persons whose immune systems have ceased to function properly as a result of infection with HIV.

**HIV positive** – having tested positive for HIV infection.

**HIV testing** – taking a medical test to determine a person’s HIV status. This may include written or verbal questions inquiring about previous HIV tests; questions related to the assessment of “risk behaviour” (for example questions regarding sexual practices, the number of sexual partners or sexual orientation); and any other indirect methods designed to ascertain a person’s HIV status.

**Informed consent** – a process of obtaining consent from a person which ensures that the person fully understands the nature and implications of the test before giving his or her agreement to it.
3.0 INTRODUCTION

Zimbabwe is in the mature stage of a generalised HIV/AIDS epidemic although there are important age, gender and locality differences in HIV prevalence. The acceleration of the epidemic in Zimbabwe has been largely driven by heterosexual and vertical transmission. Despite one of the highest HIV/AIDS prevalence in the world, Zimbabwe's response to the epidemic has been relatively slow. In 2000, after a series of interim plans addressing short-term goals, parliament created the National AIDS Council, adopted the National Strategic Framework on HIV/AIDS and imposed a levy to help address the AIDS crisis. The National AIDS Council under the auspices of the Ministry of Health, includes representatives from the government, nongovernmental organisations, faith-based groups, the private sector and the media. The National Strategic Framework sets out national plan to address prevention, care and support. A 3% tax on personal and corporate income is currently levied to help purchase low-cost generic drugs and to address the needs of children affected by AIDS. The Zimbabwe National Policy on HIV and AIDS and the National Strategic Framework on HIV and AIDS for 2000-2004 have guided the country’s response since 1999. These are in the process of being reviewed and updated. This process commenced with the National Conference on HIV and AIDS in June 2004, which aimed to take stock of the epidemic and responses, and devise overall guidance for the coming years.

Recent national policies and guidelines on reproductive health, orphan care, youth, home-based care, gender, and anti-retroviral treatment are in place, although not yet integrated under a national strategic framework. Whereas there seems to be consensus on the way ahead regarding care, treatment and mitigation aspects of the response to the pandemic, no clear and generally recognised approach to prevention has so far been agreed upon. Prevention incorporates a number of programme areas including blood safety, prevention of mother-to-child transmission (PMTCT), provision of sexual and reproductive health services (SRH), prevention of nosocomial infection and behaviour change relating to sexually transmitted infections.

HIV testing in Zimbabwe is provided within the context of voluntary testing and counselling, diagnostic testing (preventing PMTCT, opportunistic infections and antiretroviral therapy) and blood safety. In 2002, the government declared HIV/AIDS and the lack of antiretroviral therapy as an emergency. Zimbabwe follows WHO-recommended treatment guidelines for antiretroviral therapy and the government intends to provide access to treatment to everyone in need. Services for preventing PMTCT are delivered at a number of sites throughout the country. Laboratory support is available with two laboratories (Harare and Mpilo) capable of performing CD4 +T cell counts. Most hospitals can carry out rapid HIV tests as well as full blood counts and chemistry. However, additional laboratory especially with regard to equipment and reagents is still required. Improved methods of HIV/AIDS surveillance were introduced in 2000, which incorporated expanded coverage, particularly in rural settings, more consistent site selection and field procedures, and detailed documentation of the procedures used. A national network of high quality voluntary counselling and testing “New Start” centres was established by Population Service International (PSI), in association with the Zimbabwe Ministry of Health and Child Welfare, between 2000 and 2004. These centers are largely located in urban areas with some being free standing and others being integrated into health service facilities.
Despite a 1998 effort (‘Beyond Awareness’ initiative) to draft a national HIV behaviour change strategy, there is currently none in place. Within the new overall National Strategic Framework, the National AIDS Council, relevant line ministries, and the United Nations intend to collaborate on developing a distinct national HIV prevention strategy, with the overall goal of reducing the number of new HIV infections.

4.0 NUST AND THE HIV/AIDS EPIDEMIC

The National University of Science and Technology (NUST) was established by an Act of Parliament in 1991 with a mandate to have a science and technology bias. NUST is the second largest of the six residential state Universities in Zimbabwe. NUST campus is located on 160 ha of land south east of Bulawayo but currently does not provide on-campus housing for its staff and provides a limited number of students with accommodation. The primary mission of NUST is to serve the people of Zimbabwe through provision of educational opportunities, supplying research services and outreach activities with a bias towards Science and Technology. In achieving its mission NUST is guided by the principle of being a community-centred and people-sensitive institution.


The University is governed by a Council that has executive authority on policy-making and governance of NUST and a Senate, which has oversight on academic policy and its operation. The day-to-day management of NUST is carried out by the Vice Chancellor assisted by a Pro-Vice Chancellor together with a Registrar (Chief Administrator), a Bursar (Chief Financial Officer) and a Librarian. NUST operates on a Committee system that ensures full participation of all its staff members and students. Faculties are managed by appointed Deans and Departments are headed by Chairpersons appointed by the Vice Chancellor in consultation with the Academic Members of staff of the Department concerned and the relevant Dean.

NUST has not carried out an overt study on the impact of HIV/AIDS on its institutional functions and one of aims of this policy formulation is to have an institutional policy that mandates carrying out such studies on an on-going basis. Whilst there has been absences by both staff and students that could be due to personal sickness or sickness within the extended family due to HIV/AIDS, there are no data from which to draw meaningful conclusions on the impact. It is believed that HIV/AIDS could be having the following impacts on NUST:

1. **Direct effects** – both academic and non-academic staff and students are affected by HIV/AIDS leading to losses of trained/skilled, competent personnel especially those who would have served the university for a long time. Their skills which are an integral part of the development of the Institution are thus lost. It is necessary for the
Institution to try as much as possible to ensure that affected individuals are able to continue working for as long as possible before succumbing to the debilitating effects of the illness.

2. **Indirect impacts** – during the primary HIV infection period, affected members of staff and students tend to be off-sick, on and off, for several months. Their performance while at work or in their studies is grossly compromised by the illness. Without supportive services their condition deteriorates and their productivity becomes minimal. Usually the affected individuals are breadwinners hence the implications on their families makes it even more difficult for them to work competently. Eventually they succumb to HIV/AIDS at the terminal stage and go off work/studies permanently until their death.

3. **Impact on colleagues** – stigma and HIV/AIDS are connected, each feeding on the other’s strength. HIV/AIDS has reinforced deepest fears of others, of death, of disease and strengthened the sense of shame and guilt. Thus because of the stigma attached to HIV/AIDS, there is usually secrecy about the disease; consequently there is little support from colleagues. This leads to stress of the affected individual, which reduces work performance and creates isolationist tendencies.

4. **Costs** - Direct costs in terms of funerals and terminal benefits and recruitment of replacement personnel.

NUST’s vision is to become a centre of excellence recognized nationally, regionally and internationally for its teaching and research. To achieve this vision it is imperative that NUST retains as much of its staff as possible and continues to recruit and train very bright young people who will contribute to the scientific and technological development of the country. Hence it needs to formulate policies that lead towards the prevention of further infection and provide for appropriate care and support for those already infected or affected by HIV/AIDS. The NUST strategic plan for the period 2001 – 2005 lists AIDS as one of the major threats to the attainment of the objectives set out for that period and thus the institution is geared towards ameliorating the adverse impacts of the pandemic. However a coherent policy on how to do that is not yet in place.

NUST is cognisant of its role as a change maker in the country and within communities and believes it has a responsibility to provide leadership in dealing with HIV/AIDS through well-thought out policies and responsible research and information dissemination. There have been previous efforts on dissemination of information on Campus and setting up educational programmes for students and employees on HIV/AIDS but these efforts were not buttressed by a pervasive policy that mainstreams HIV/AIDS into all aspects of university life.

NUST has set itself an objective of being a community-centred and people sensitive institution and as HIV/AIDS is undoubtedly the greatest challenge facing the communities within and around NUST, the need to develop sound institutional policies
that are founded on human dignity for all and address the whole range of implications of HIV/AIDS is urgent.

Research on HIV/AIDS that has been carried out at NUST has mainly been from a quantitative and biological/medical perspective and there is a desire to broaden the scope and include socio-economic and technological issues on how to cope with the disease.

5.0 OBJECTIVES

The objectives and scope of policy formulation are based on the following general commitments:

1. To treat HIV/AIDS in all respects like other life-threatening conditions.
2. To create a caring, supportive and non-discriminatory environment for members of the University community infected or affected by HIV/AIDS.
3. To sustain equal opportunities for employees and students with or perceived to have HIV/AIDS.
4. To create an environment conducive to people with HIV/AIDS revealing their status and seeking appropriate support and counseling.
5. To respect and uphold the right to confidentiality of employees and students regarding their HIV/AIDS status, as well as others affected by this status, in so far as the law permits.
6. To equip students and staff to be able to live and work in societies with increasing rates of HIV infection and AIDS.
7. To provide programmes for all employees and students on how to prevent HIV/AIDS infection and how to care for and support those infected or affected with HIV/AIDS.
8. To encourage all employees and students to recognize their responsibility to develop a personal lifestyle in which they will not put themselves or others at risk of infection.
9. To encourage staff and students who are living with HIV to recognize their special obligation to live in such a way as to pose no threat of infection to any other person.
10. To involve, where possible representatives of all sectors of the University community, including those with HIV/AIDS, in the development of all prevention, intervention and care strategies.
11. To aim to achieve best practice standards in all HIV/AIDS interventions.
12. To view HIV/AIDS education, prevention and care in a broad social context.
13. To provide an environment in which the equality of women is respected, and where neither sexist behaviour nor gender-based discrimination is tolerated.
14. To give proactive attention to protecting women and men from coercive sex and rap.
15. To encourage gender-sensitive programmes that will help staff and students become aware of the rights and vulnerabilities of women, as well as the HIV/AIDS-related implications of sexual abuse and violence.
6.0 Policy components

The University shall be guided by the following four principle policy components with respect to HIV/AIDS prevention, care and support, research and mitigation impact:

1. Rights and responsibilities of staff and students affected and infected by HIV/AIDS.
2. Integration of HIV/AIDS into teaching research and service activities of all University faculties, centers and units.
3. To provide preventive measures, care and support to staff and students affected and infected with HIV/AIDS to alleviate fear, stigma, and discrimination surrounding HIV/AIDS.
4. Policy implementation: structures, procedures, monitoring and review.

6.1 Rights and responsibilities of staff and students affected and infected by HIV/AIDS

6.1.1 Rights of Staff

1. Employees or applicants for employment at the University will not be required to undergo an HIV test, or disclose their HIV/AIDS status.
2. The University will not use HIV/AIDS status as an indicator of fitness for employment. The University will not use HIV/AIDS status to deny an employment contract or refuse to renew a contract.
3. HIV/AIDS status will not be used as a criterion in human resource development, including promotion and training.
4. No employment will be terminated on the grounds of HIV/AIDS status. HIV/AIDS status will not be used to influence retrenchment or retirement decisions on grounds of ill health, unless a member of staff is no longer physically or mentally fit to continue his/her work.
5. HIV/AIDS status will not be reflected in the personal files of employees.
6. The HIV/AIDS status of employees shall not be disclosed without the informed consent of the employee concerned.
7. While the University practices non-discrimination with respect to its employees’ HIV/AIDS status, it recognizes that the practices of parties external to the University (i.e., medical schemes, provident and pension funds) are not entirely within its control. The University, however, will endeavour to negotiate with benefit providers for equal and non-discriminatory benefits.
8. Employees have a right to a supportive and safe working environment in which persons with HIV/AIDS are accepted and not stigmatized.
9. Employees have a right to know of possible risks of occupational exposure to HIV in their working environments.
The University provides a working environment in which the occupational exposure to HIV is minimised, and will provide the necessary protective equipment. In addition to providing the necessary protective equipment, staff will be taught how to use it and will be educated in general on the use of universal precautions.

6.1.2 Rights of Students

1. Prospective students at the University will not be required to undergo an HIV test, or disclose their HIV/AIDS status prior to admission.
2. Students at the University will not be required to undergo an HIV test, or disclose their HIV/AIDS status.
3. The University will not use HIV/AIDS status in considering the granting of loans, bursaries and scholarships.
4. HIV/AIDS status will not be used in determining admission to residence on campus.
5. Students’ registration will not be terminated on the grounds of HIV/AIDS status, unless the student is no longer physically or mentally fit to continue his/her studies.
6. HIV/AIDS status of a student will not be disclosed without the informed consent of the student.
7. Students have a right to a supportive and safe learning and working environment in which persons with HIV/AIDS are accepted and not stigmatized.
8. The University will provide a working environment in which the occupational exposure to HIV is minimised, and protective equipment will be provided where necessary.

6.1.3 Responsibilities of Staff and Students

1. All members of the University Community have the responsibility to protect themselves and others from HIV infection through all means possible. They have a responsibility to become informed about all aspects of HIV/AIDS prevention measures, care and support, and alleviation of impact.
2. Members of the University Community living with HIV and AIDS are ethically, morally and legally obliged to behave in such a way as to pose no threat of infection to others. They are urged to seek medical advice to ensure as healthy and productive a life as possible.
3. No student may use their HIV/AIDS status as an excuse for absence from scheduled classes, assignments and tests, examinations, study/course requirements or other academic activities, unless medically justified. Likewise no member of staff shall use their HIV/AIDS status as an excuse for failing to come to work or complete duties.
4. Departments or units whose academic and research programs involve risk of exposure to HIV contaminated blood and body fluids are responsible for the education and training of those potentially at risk.
5. Disciplinary action will be taken against any student or staff member who willfully undermines the safety, privacy and dignity of another person on the basis of their known or perceived HIV status.

6.2 Integration of HIV/AIDS into teaching, research and service activities of all University faculties, centers and units.

6.2.1 Teaching

1. University education programme will include a course on HIV/AIDS, thus providing for all students, irrespective of their field of study, the opportunity to raise their awareness of HIV/AIDS issues.

2. Support will be provided to departments and staff to develop and implement plans to integrate HIV/AIDS issues into their specific curricula.

3. The University will offer non-credit courses, workshops and seminars for members of the University Community on a wide range of topics related to HIV/AIDS to provide an in-depth understanding of the social context of HIV/AIDS prevention, care and support and impact alleviation.

6.2.2 Research

6.2.2.1 The University will establish a standing research advisory group to be tasked with identifying national research and monitoring priorities relating to behavioural change. Such a group should also advocate for strategies to disseminate research findings and reviews of research in particular areas.

6.2.2.2 The University will provide programmes of research on new interventions and their repercussions: e.g. the impact of ART on VCT provision and uptake; knowledge of PEP; understanding of diffusion of new innovations.

6.2.2.3 Behavioural factors that influence service demand, access and provision.

6.2.2.4 Influence of social policies, strategies and practices on prevention behaviour and use of services.

6.2.2.5 Operational research on development of integrated systems of prevention programmes with care and support, most importantly for HIV-positive people will be conducted.

6.2.2.6 The University shall work collaboratively with other stakeholders in promoting and conducting research in the field of HIV/AIDS.
6.3 Community Service

The University commits itself to collaborate with the community in training and research on HIV/AIDS. It is essential that there is full community participation in the HIV/AIDS programme and that there is a good flow of support between the University and various communities and community structures.

6.3.1 Provision of University prevention and support services for HIV/AIDS

6.3.1.1 Awareness and Prevention

All staff and students will be kept informed of HIV/AIDS issues and will be involved in initiatives to promote awareness and prevention.

1. All new students and employees will be provided with current and comprehensive information on HIV/AIDS through seminars, workshops and written material organized by the different sectors of the University.
2. All student and staff groups interested in incorporating HIV/AIDS into their activities shall be assisted through the HIV/AIDS Committee.
3. Male and female condoms will be freely accessible through multiple channels and condom bins placed strategically across campus.
4. The HIV/AIDS committee will periodically hold public debates and discussions on gender and sexuality, sexual violence and other social issues relating to HIV/AIDS.
5. The University will continue to collaborate with other local, national and international organisations in educating the University community about issues relating to HIV/AIDS.
6. The University will maintain, as part of its website, information on HIV/AIDS activities, and links to local and international organizations.

6.3.2 Counselling, care and support

1. All staff and students will have access to free confidential counseling services on campus and off-campus, and the University encourages staff and students to know their HIV status.
2. The University will facilitate the setting up of support groups for affected and/or infected persons on campus and in the community.
7.0 Policy implementation and review

The overall responsibility for implementing this HIV/AIDS Policy lies with the senior management of the University. This includes the Vice Chancellor, Pro-Vice Chancellors, and members of the management advisory committee, deans of faculties, centre directors, heads of departments and units, the Student Representative Council (SRC), and the University HIV/AIDS Task Force. The committee’s functions will include:

- Disseminating and coordinating the HIV/AIDS policy throughout the University,
- Organizing regular consultative meetings with the University community about matters related to HIV/AIDS,
- Establishing and implementing a system of policy monitoring and evaluation,
- Collaborating with the community and other tertiary institutions and stakeholders.

The University will establish an appropriate budget line for the implementation of this policy. A strategic work plan will guide the implementation of this policy. This policy will be subjected to regular review and appraisal.