

Kwame Nkrumah University of Science and Technology, Kumasi

KNUST HIV/AIDS POLICY



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Second edition



KWAME NKUMAH UNIVERSITY OF SCIENCE
AND TECHNOLOGY, KUMASI-GHANA
**QUALITY ASSURANCE AND
PLANNING UNIT**

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FOREWORD

The epidemic caused by the **Human Immunodeficiency Virus** (HIV), often referred to as HIV/AIDS, was first recognized in the USA in the early 1980s and shortly afterwards throughout the world. Before effective treatment with highly active antiretroviral treatment (HAART) became available, HIV had devastating effects on the youth with profound social and economic effects that have impacted severely on society, and wreaked havoc on institutions, workers, students and their families.

It also had a detrimental effect on productivity in the workplace, because of its immediate impact on illness and eventual death of affected employees, thus adversely affecting staff morale and motivation.

Now with the availability of antiretroviral drugs majority of patients treated for HIV live successfully with the disease. As people living with HIV (PLWHA) age on antiretroviral therapy, they face a variety of health challenges including premature aging, increased risk of developing cardiovascular diseases and cancers among others. HIV infection thus continues to be a challenge. By the end of 2016 about 36.7 million people were living with the disease globally, with sub-Saharan Africa accounting for 25.5 million of the total, and people between the ages of 19 to 45 years being the hardest hit. Unfortunately, this age bracket includes the youth.

Notably, the fundamental rights of workers and students infected with HIV are compromised by having to experience pervasive discrimination resulting from stigmatization and ignorance.

It is in the light of such revelations, backed by a willingness to combat some of the negative effects that KNUST has come out with a policy as advocated by the **National Tripartite Committee** (NTC), in collaboration with the **Ghana AIDS Commission** (GAC). This is our

contribution to the fight against the spread of the disease and the stigmatization and discrimination of those living with the disease.

This policy document seeks to incorporate the following issues into the University system: peer counselling; blood safety; occupational health and safety; the impact of HIV infection on human resource capacity; and comprehensive treatment including antiretroviral therapy among others. The policy seeks to support the education and prevention efforts of the GAC.

This document is meant to enhance the knowledge of staff, students and the wider community of KNUST for their safety and protection. I therefore direct all heads of units in the university to ensure its absolute circulation and adoption.

PROFESSOR KWASI OBIRI-DANSO

VICE-CHANCELLOR

KNUST

AUGUST, 2018

PREFACE

The first edition of this policy was prepared in 2011 by a committee appointed by the Vice-Chancellor in consultation with the Dean of the Institute for Science and Technology in Africa (ISTA), KNUST. The Committee held consultations with individuals and organizations with expert knowledge on HIV/AIDS and attended a number of workshops within and outside Ghana to acquaint themselves with the efforts being made by other Universities and Employer groups especially in Ghana and other African countries. The initial draft of the policy was discussed with interested departments and bodies in the University, including representatives of the University Administration, KNUST Hospital, Students Representative Council, GRASAG, TEWU, and Senior Members at a Stakeholders' Forum.

This second edition has been necessitated by a number of changes and interventions initiated internally at KNUST and at the National level since the first policy was implemented in 2011, in keeping with current evidence for best practice. These include, but not limited to the following: new HIV country data; new country guidelines on HIV testing (provider-initiated testing and counseling); new country led interventions (such as test and treat all for life, option B+ for pregnant women, pre-exposure prophylaxis [PrEP]); and the 90-90-90 fast-track targets aimed at ensuring that 90% of persons living with HIV know their HIV status; 90% of persons living with HIV who know their HIV status are placed on sustained treatment; and 90% of persons living with HIV on sustained treatment achieve viral suppression by 2020. Key changes at the University level include; increase in the number of students including international students some of whom come from high HIV prevalence countries, establishment of HIV testing services (HTS) at KNUST Hospital, expansion of the University Counselling Centre and vibrant student associations supporting HIV/AIDS activities. These updates are critical to our efforts to attain the Sustainable Development Goals (SDGs), and in particular ensuring healthy lives and promoting wellbeing for all at all ages.

ACKNOWLEDGEMENT

The Quality Assurance and Planning Unit of the Vice-Chancellor's Office is grateful to the Vice-Chancellor for the opportunity to coordinate the publication of the second edition of the HIV/AIDS Policy for the University. We are extremely grateful to the Committee that drafted the first policy; Prof Peter Donkor, Pro Vice-Chancellor (Chairman of Committee); Prof Yaw Adu-Sarkodie, School of Medical Sciences (Member); Dr (Mrs.) Peggy Oti-Boateng, Technology Consultancy Centre (Member);

Dr Theophilus B. Kwofie, School of Medical Sciences (Member) and Mrs. Juliana Andoh, Assistant Registrar, School of Medical Sciences (Secretary); and Dr. (Mrs.) F. Dadson of the English Department who assisted with the editing of the final document.

Guided by the recommendations of Prof Yaw Adu-Sarkodie, Provost, College of Health Sciences, and current evidence in HIV prevention and control, this second edition was reviewed by: Dr Edward T. Dassah, School of Public Health; Dr Betty R. Norman, School of Medical Sciences and Dr Anthony K. Enimil, School of Medical Sciences. We extend our sincere gratitude to them for the good work done in reviewing this second edition.

We are also indebted to the entire University Community, especially those who made valuable inputs into the policy.

Lastly, we extend our appreciation to the University Printing Press (UPK) for printing the policy.

PROFESSOR CHRISTIAN AGYARE

HEAD

QUALITY ASSURANCE AND PLANNING UNIT

AUGUST, 2018

EXECUTIVE SUMMARY

HIV/AIDS poses a great risk to the economically active age group and the most productive age group aged 19-45 years in Africa, Ghana, and KNUST. Despite significant achievements in HIV/AIDS prevention and control, sub-Saharan Africa continues to lead in the grim statistics. The good news is that the prevalence of HIV/AIDS among the youth in Ghana is falling and the price of anti-retroviral drugs (ARVs) has become affordable in many developing countries, thereby making the treatment of HIV/AIDS relatively more available and sustainable. This document represents the HIV/AIDS policy (second edition) of the Kwame Nkrumah University of Science and Technology (KNUST), Kumasi, Ghana.

The bases for the revised policy are as follows:

- i. New national HIV data, testing guidelines, treatment protocols and interventions, as well as fast-track targets, based on current evidence.
- ii. Key changes within KNUST including: an increase in the number of both local and international students, establishment of HIV counseling and testing (HCT)/HTS and treatment for all affected members, expansion of the counselling centre and development of peer counselling programmes, capacity building and vibrant student associations supporting HIV/AIDS activities.
- iii. Strong commitment of the University to the core principles of non-discrimination and confidentiality with regard to HIV serostatus.
- iv. Implementation mechanisms in essential areas of education, through mainstreaming HIV/AIDS into the curriculum of the Colleges at KNUST.

There is evidence that investments in HIV/AIDS education, prevention and antiretroviral therapy (ART) offer socio-economic and financial benefits not only to the university but to the country in general.

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1.0 INTRODUCTION

Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) continue to ravage families and communities in sub-Saharan Africa with those between the ages of 19 and 45 years being the hardest hit group. This age group coincides with the most productive group in Africa especially in most African universities. The estimated national HIV prevalence among adults (15-49 years) in 2017 was 1.67%. Of the estimated 19,101 new adult infections that year, female adults were more than one and a half times (1.68) likely to be infected compared to male adults. There is also evidence to show that norms and practices pertaining to social and sexual life on university campuses is that of ambivalence about sexual experimentation, unprotected casual sex, multiple sexual partners and similar high-risk activities. These activities are not only dangerous but increase the risk of students to sexually transmitted infections (STIs) including HIV. Fortunately, universities are in a unique position in that through collaboration in research and sharing of strategies, information and experience of good practices, they have the potential to be a powerful influence for good, not only within the higher education sector but also within the community at large.

Due to the vulnerability of this productive population including students and staff of this university, this institutional policy is developed to focus on the prevention with mechanism for implementation of institutional programmes on HIV/AIDS.

The Kwame Nkrumah University of Science and Technology (KNUST) is the country's premier science and technological university producing over 80% of engineers, scientists and technologists who are vital for the technological and socio-economic development of Ghana, and must be protected. The need for a university-tailored policy on HIV/AIDS cannot be over emphasized. For such a policy to be successful, it

requires an institutional framework, innovative HIV/AIDS management and dynamic scaling-up strategies.

This policy document seeks to facilitate basic requirements of education and prevention, mainstreaming HIV/AIDS into university curriculum, peer counselling, blood safety and occupational health and safety, the impact of incidence of HIV/AIDS on the social and human resource capacity, comprehensive treatment including anti-retroviral therapy, post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP). The cost and benefits assessments, mechanisms of HIV infection prevalence and risk assessment and confidentiality management are also addressed.

This policy document further seeks to contribute towards the prevention of HIV transmission and mitigation against the socio-economic and health impact of HIV infection on society through innovative research, advocacy and participation in the prevention and control of HIV/AIDS in the society.

The University is committed to implementing this policy. The necessary actions including financial allocation would be made to meet the emerging challenges. It is therefore imperative to adequately resource the relevant agencies within the University to effectively coordinate HIV/AIDS activities on campus and its satellite communities.

1.1 BACKGROUND

Although awareness of HIV/AIDS is very high among students and staff, there is some level of ignorance surrounding the disease in totality, particularly among people who are not health professionals. There is also a lot of secrecy, silence, denial and fear of stigmatization and discrimination. To compound the problem, there is no reliable data on the level of infection among students and staff. Information on HIV-related deaths among academic and support staff is also patchy, partly because it is very seldom stated that a particular death was HIV related. This is also a manifestation of the silence and denial that tend to cloud the disease. The University has about 44,000 students; comprising 64% males and 36% females, and majority are between

the ages of 18 and 25 years. Among these are resident, non-resident and distant education students. The University also has about 1,100 teaching, administrative and professional staff. In addition, there are about 2,400 other supporting staff that directly or indirectly support the teaching and research goals of the University. Enrollment levels have tremendously increased in the recent past, particularly since the introduction of the collegiate system.

Environmental factors like urban life style, low social economic status, peer pressure and other social vices facilitate infection among university students and staff. The location of the University in the Ashanti Region, which has the second highest HIV infection rate in the entire country, also demands serious attention. As part of its core mandate of teaching, research and service to the community, the University is also engaged in activities that should promote dissemination and preservation of knowledge regarding HIV transmission, and the impact of HIV/AIDS on the university, the individual, the family and the community. Various measures and initiatives have been undertaken in this regard. In 2000, KNUST was the first University in Africa to establish the Health and Nutrition Coordinating Centre with the main objective of educating through counselling and the mainstreaming of HIV/AIDS into KNUST curriculum, offering nutrition advice to people living with HIV/AIDS (PLWHA), developing a draft institutional policy and also providing for a dispassionate dissemination of information about the disease.

Despite all these efforts, there is still a dearth of information about the magnitude of the HIV/AIDS epidemic in the university and its satellite communities. There is an HIV clinic at KNUST Hospital and the University Counselling Centre together with PPAG Young and Wise Centre offer HIV counseling and HIV testing services (HTS). Nonetheless existing HIV/AIDS activities appear not to be properly coordinated, monitored and evaluated. There is limited collaborative research on the disease in this university making it difficult to attract appreciable funding to undertake comprehensive interdisciplinary research work.

1.2 UNIQUE STRENGTH OF KNUST

The core business of KNUST is teaching, research and innovation and community service. In Ghana there is strong justification for universities to commit resources now to prevent the scourge of HIV/AIDS than wait to fight the disease when it assumes crisis proportions as is being experienced in other African countries. This University trains young people transforming them into highly skilled human resource in all sectors of the economy. HIV prevention strategies need to be centered on young people because they are the most vulnerable population of infected individuals. Providing this human resource with skills in HIV/AIDS prevention would not only protect them but would have a multiplier effect as they take these skills to their different work places.

For example Social Scientists with HIV/AIDS prevention skills would directly impact on lives in many communities. Pharmacists would produce drugs from local herbs to treat, prevent or slow down the progression of the disease. Mathematicians would develop models for HIV/AIDS education. Nutritionists would develop complementary high nutrient foods and innovative diets for PLWHA and engineers could develop infrastructure to improve the quality of life of PLWHA. Furthermore, researchers in agriculture would be challenged to develop high yielding varieties of food crops, high production and low resource input farming methods for communities that have severely curtailed manpower because of HIV/AIDS. This challenge is not only for students but also for staff of all categories. Thus this University initiative on an HIV/AIDS policy addresses the impact of HIV/AIDS on staff, students and the entire community.

1.3 JUSTIFICATION FOR KNUST HIV/AIDS POLICY

The KNUST has been the backbone for the social, micro and macro-economic development of this country. The country's industrialization, physical and development planning, architecture, agri-business, power generation, telecommunication, health management, scientific research and technological innovations, just to name a few, have depended solely on the expertise of KNUST graduates. All these would elude the

country if HIV/AIDS education and prevention are not seriously tackled at the institutional level. Ghana would lose the trainers and trainees who are the cream of society through sickness and death. The care and support currently being provided for PLWHA within the University need to be improved, coordinated and well publicized in order to have a greater impact.

If the University is adequately educated and motivated on HIV/AIDS issues, it can act as an enlightened pressure group and also play a catalytic role by providing the necessary technical support at all levels in implementing the National HIV/AIDS Strategic Plan. Several senior members, senior and junior staff and students are already engaged in HIV/AIDS research, policy formulation, training and capacity building, advocacy, monitoring and evaluation, so such a policy would increase their enthusiasm and participation.

Success in overcoming HIV/AIDS within the University demands exceptional human resource, budgetary and social commitment by all stakeholders. The human and financial resources needed to coordinate and implement this comprehensive policy in response to the disease must be mobilised. This is imperative and must be pursued.

2.0 POLICY GOALS & OBJECTIVES

The overall goal of the policy is to promote HIV/AIDS prevention, control, care and support in developing knowledge through high quality and relevant teaching, research, consultancy and service to community.

2.1 STRATEGIC GOALS

The strategic goals of the policy are as follows:

- a) Utilise efficiently and effectively both human and logistical resources to support and protect staff, students and the general public against HIV infection;
- b) Develop and promote non-discriminatory employment policy for people with HIV infection through problem-solving and leadership skills, and the values of commitment to quality, integrity and service to society;
- c) Serve society through transfer of intellectual products as an obligation in relation to prevention, counseling and research in HIV/AIDS so as to meet the changing needs of Ghana, Africa and humanity;
- d) Collaborate with others through planning, implementation, monitoring and evaluation of HIV/AIDS in the search for solutions and strategies for accelerated human development;
- e) Consolidate ongoing research within the University and develop policy on implementation of research findings.

2.2 SPECIFIC OBJECTIVES

The objectives of the policy are to:

- i. Provide an institutional framework for addressing HIV/AIDS by developing a strategic plan for prevention, control, treatment, care and support of HIV infected and affected persons;
- ii. Develop an effective strategy for the demystification and destigmatisation of HIV/AIDS;
- iii. Adopt and integrate employee-friendly workplace policies to facilitate care and support of individuals infected and affected by HIV/AIDS within the University;
- iv. Assess the functional risks of various work and learning activities and encourage the development of codes of conduct that reduce the risk of HIV infection to University staff and students;
- v. Encourage and facilitate fundamental and applied research on effective interventions against HIV infection within the university;
- vi. Strengthen and resource a co-ordination centre for HIV/AIDS activities in the University; to publicize services related to HIV prevention and control, work with JCRs, SRCs and PPAG among others, especially during events;
- vii. Build capacity to develop, implement, monitor and evaluate HIV/AIDS programmes;
- viii. Mainstream HIV/AIDS education into the University's curriculum;
- ix. Increase access to appropriate HIV infection preventive measures, care and support including providing free condom dispensers for students and staff;
- x. Resource KNUST Hospital to effectively manage, counsel and support staff and students living HIV as well as keep accurate up-to-date records;

- xi. Promote HTS by routinely offering provider-initiated (HIV) testing and counselling (PITC) for all populations especially key populations, and prevention of mother-to-child transmission (PMTCT) within the University;
- xii. Develop an HIV/AIDS database and management information system for the University community, that includes priority indicators such as those for the 90-90-90 targets (by 2020); and
- xiii. Develop marketable models for prevention and control of HIV infection.

3.0 GUIDING PRINCIPLES

The guiding principles of the Policy are derived from the Constitution of Ghana and other key principles developed by the International Labour Organization (ILO) and *the National Tripartite Committee in collaboration with Ghana AIDS Commission*. They are as stated below:

- a) No employee or student shall be discriminated against on the basis of their HIV serostatus.
- b) Employees and students will be encouraged to undergo HCT.
- c) An employee or student with HIV infection will not be dismissed purely on the basis of his/her status. Inability to work due to HIV related ailments shall be regarded like inability caused by any other illness. The person shall be allowed to work or study until declared unfit to do so by the Hospital Director in accordance with the University Regulations and Terms of Service.
- d) An employee or student with HIV infection will not be discriminated against under the University Health Services Scheme.
- e) The HIV status of an employee or student and their entire medical information shall be confidential. It shall be the responsibility of the Director of Health Services to ensure that confidentiality is maintained.
- f) The HIV serostatus of an employee or student shall not be disclosed provided he/she does not pose a risk to other persons.
- g) No Employee or student will be under any obligation to inform the employer/faculty about his/her HIV sero-positive status.

- h) HIV positive employees or students shall not be discriminated against in relation to:
 - i. Grading and job assignment
 - ii. Remuneration, employment benefits and terms and conditions of employment
 - iii. Training and development
 - iv. Performance and evaluation
 - v. Promotion and transfer
- i) The University shall undertake to provide awareness and training, as well as appropriate protective gear and supplies to employees and students at risk, and to institute appropriate HIV infection control measures and ensure compliance.
- j) The University shall undertake to provide counseling to staff and students who are infected, affected or living with HIV.
- k) The University shall endeavour through training, sensitization and practices to cultivate an environment that discourages discrimination and stigmatization of staff with HIV/AIDS.
- l) Unless medically justified, no staff or student may use a positive HIV serostatus as a reason for failing to perform work or study.
- m) The University shall provide PEP and PrEP against HIV infection, in accordance with national guidelines.

4.0 POLICY GUIDELINES

4.1 STAFF: EMPLOYMENT, JOB SECURITY AND NON-DISCLOSURE OF STATUS

The University management is committed to a policy of non-discrimination and non-disclosure in employment. In this regard:

- 1) Workers should not be stigmatized or discriminated against on the basis of their HIV serostatus.
- 2) Protection of staff will be enhanced through provision of education, training, information and sensitization on HIV/AIDS.
- 3) The University shall ensure that precautions are taken to reduce the risk of transmitting blood-borne infections including Hepatitis B and HIV through standard precautions in the occupational areas where such risk is high.
- 4) The University shall promote access of employees and their families to information and educational programmes on HIV and offer them HTS and treatment, as required.
- 5) The University shall provide drugs for the treatment of HIV-related diseases to employees and their family members.
- 6) The University shall provide anti-retroviral drugs and treat all HIV positive clients irrespective of their CD4 count or clinical stage, in accordance with national guidelines
- 7) The University shall ensure PMTCT among university employees and their families through P1TC and option B+ treatment protocol, in accordance with national guidelines.
- 8) The University shall prioritize elimination of mother-to-child transmission of HIV (eMTCT) among university employees and their families, in accordance with national guidelines.

4.2 STUDENTS (RESIDENT, NON-RESIDENT AND DISTANT)

The University recognizes that:

- 1) Students affected by HIV/AIDS may have financial difficulties.
- 2) Students may reveal their serostatus only when it is affecting their academic performance.
- 3) Students are encouraged to disclose their serostatus to the relevant health care providers and seek medical treatment before they develop serious health problems.

To address the above issues:

- a) No student applying for admission to the University shall be denied admission on the basis of his/her HIV serostatus.
- b) The University shall not use HIV serostatus in determining admission of students to the halls of residence.
- c) The University shall not use HIV serostatus to deny students bursaries or scholarships.
- d) The HIV serostatus of a student shall not be disclosed provided he/she does not pose a risk to other persons.
- e) Students living with HIV/AIDS will be provided with counseling services to realize their obligation to ensure that they behave in such a way as to pose no threat to other persons.
- f) Students shall have a right to a supportive and safe learning environment in which those living with HIV are not stigmatized and those without HIV infection are protected as much as possible.
- g) Every student shall be expected to exercise individual responsibility to protect her/him against HIV infection.
- h) The University shall endeavour to provide a learning environment in which the occupational exposure to HIV is minimized and will provide the necessary protective equipment and clothing.

- i) Every student will be encouraged to go for HCT and report their serostatus to the relevant officer of the University for the purposes of providing the necessary care and support.
- j) The University shall comply with principles enunciated by UNAIDS and the Ghana AIDS Commission.
- k) The results of HIV tests conducted at the University Hospital shall be confidential.
- l) Students shall have a responsibility not to discriminate or stigmatize those of the university community living with HIV infection.
- m) Unless medically justified, no students may use HIV positive serostatus as a reason for failing to perform work, complete assignments, attend lectures, undertake field trips or write examinations.
- n) Students will be encouraged to form HIV post-test groups and peer support groups.
- o) Student organizations should be resourced to undertake HIV/AIDS education and prevention programme.

4.3 OTHER PROPOSED MEASURES

- a) Strengthening the institution of Council of Hall Wardens and Masters, especially emphasizing the supportive function and role of the Hall Warden and Masters.
- b) Empowering the Student Representative Council (SRC) to open further channels of communication through peer education and counseling.
- c) Enhancing/creating recreational facilities within the halls and in the university for students to engage in extra-curricular activities such as sports, reading, debate, community work, voluntary engagement, religious activities etc. Setting up HIV stands during such activities to offer HCT, condoms, and information on HIV would be helpful.

- d) Mainstreaming HIV/AIDS studies into the curriculum by introducing subjects into the undergraduate courses, preferably in the first semester of study.
- e) Encouraging students' research projects on HIV/AIDS
- f) Establish student help lines at all units offering HCT or HTS as pertains at the KNUST Counselling Centre.

4.4 BENEFITS OF THE POLICY

a) Staff

Financial investment would result in reduced absenteeism, employees' retention, and productivity as the health of employees improves. Investments in HIV infection prevention, control and care have not only ethical and moral values, but also financial benefits in the work place. Active intervention in HIV/AIDS care, including Highly Active Antiretroviral Therapy (HAART) would reduce bed occupancy in hospitals. Furthermore, there would be a reduction in patient costs following early introduction of evidence based care and support, lifestyle changes and treatment. The institution should continue studying safety, efficacy and cost benefits of interventions.

b) Students

The early awareness creation prevention and education of HIV/AIDS in the university and an educational curriculum would reduce the incidence of the disease among students as well as preserve the human capital of the country. The mainstreaming of HIV/AIDS in the curriculum would equip them to be advocates for the prevention of the disease. It would reduce absenteeism from lectures and other academic activities and ensure timely graduation.

c) National

Overall, the policy will contribute to the attainment of current national targets for HIV prevention and control especially the 90-90-90 fast track targets, and the SDGs, and in particular, ensuring healthy lives and promoting wellbeing for all at all ages. A healthy population, especially the youth who are key in the productive sectors of the economy is required for the overall national development agenda.

5.0 NEEDED RESOURCES

The effective implementation of this policy requires human, financial and material resources. These include:

- a) Trained technical and administrative personnel;
- b) Professional counselling staff;
- c) Infrastructure such as a furnished secretariat conducive for effective work;
- d) Equipment for publication and communication;
- e) Sustained HIV/AIDS Funding;
- f) Facilities for diagnosis, treatment and research; and
- g) Transport for mobility.

6.0 CONCLUSION

KNUST is a major educational institution and employer in Ghana. Unless its transmission is checked, and early treatment initiated and sustained for those infected (as stipulated by current national protocols), HIV has the potential to undermine the long-term viability of the whole University community including students, staff, and their families. It is imperative that efforts are directed towards prevention and control of the disease, non-discrimination on the basis of HIV serostatus, ensuring security of staff employment and students' admission for those infected, confidentiality, and provision of treatment for infected individuals in accordance with national policy. The University has a further role in advocacy and research on HIV/AIDS.

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