



**THE UNIVERSITY OF THE**

**WEST INDIES**

**POLICY**

**ON**

**HIV/AIDS**

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## **INTRODUCTION**

AIDS is currently present in every country in the world. It is projected that by the year 2010 there will be 45 million newly HIV infected persons worldwide. The Caribbean Region is second in the world in terms of HIV prevalence and incidence, next to Sub-Saharan Africa, with estimates of 2.4% of the population or 500,000 infected persons in the Region. The social, economic, and developmental implications of the rapid spread of this disease are many, and demand an urgent response.

HIV infection is spread primarily by sexual intercourse, infecting mostly young adults, often as they begin to engage in sexual activity. It is taking its toll among young adults, women and children, putting the region's economic, social and human development at risk. Persons infected with HIV are usually well and continue to function productively despite the fact that their immune system is gradually being weakened to become AIDS patients.

As with other communities, those in higher education must respond effectively to the epidemic of HIV infection. The University of the West Indies (UWI) accepts that HIV infection and AIDS can happen in any section of a community and that it is accountable to its community to do everything possible to prevent people from being infected and to limit the consequences of established infection.

The UWI is guided in the development and implementation of this policy by the available scientific and sociological information, and recognises that there are effective preventive and clinical strategies for controlling the disease.

## **THE POLICY**

### **1. General**

- 1.1 The UWI subscribes to the view that education should be the primary response to HIV infection and commits itself to on-going HIV/AIDS education within the University and the community it serves.
- 1.2 The University believes that appropriate information and assistance will help guarantee fair and compassionate treatment of people affected by HIV and encourages responsible behaviour by all persons, infected or not.
- 1.3 The policy aims to encourage people who may be infected to be diagnosed and get attention at the earliest opportunity. Interventions will aim to prevent the spread of HIV, reduce fear, ignorance, stigma and discrimination and increase the chances of survival of individuals who access available means of treatment.
- 1.4 The University aims to prevent the spread of HIV in the community it serves through the provision of appropriate education and counselling within the institution and the community and by ensuring there is easy access to prophylactics such as condoms.
- 1.5 All students and staff members will be informed of the University's policy, by its dissemination to all members of the university community.
- 1.6 This policy will be updated and renewed periodically.

### **2. Rights of Affected Persons**

- 2.1 The University policy is based on the protection and safeguarding of the human rights of all people infected with or affected by HIV. All persons shall be treated with respect and consideration for their intrinsic and fundamental rights and privileges as human beings.
- 2.2 HIV tests are not required of applicants for admission to or candidates for employment at the University of the West Indies. Consideration for admission or employment will not be denied individuals solely on the basis of a positive HIV test.

- 2.3 HIV infected persons will be entitled to have any problem that arises addressed in a humane fashion and, like any other person, they will be protected from arbitrary termination of their employment or student status.
- 2.4 Persons who have tested positive for HIV are entitled to the same level of respect and consideration as anyone with any other illness or disability. People who have tested positive for HIV will be entitled to work, study and pursue other normal university activities as long as their current medical status is such that they do not pose a health hazard to themselves or others.

### **3. Confidentiality**

- 3.1 University Health Services will provide information and counselling in strict confidence. No information about the HIV status of any person will be shared with the University administration or anyone else, without the explicit written permission of the affected person or where required by law. This policy applies to any information obtained about family members, associates of students or staff in the course of consultation or counselling in the health services or elsewhere within the university.
- 3.2 Members of the administrative or academic staff and staff of laboratories, who have access to private and confidential information about students or staff, are required to handle such information in strict confidence. If information is divulged without specific authority, the affected person has the right to legal redress.

### **4. Managing HIV/AIDS within the University**

The University will manage HIV/AIDS within the general framework of its health, work and social policies.

The following vaccines are highly recommended for students and staff working in University-affiliated medical institutions

Hepatitis B

Diphtheria, Pertussis and Tetanus combination

Booster doses of tetanus toxoid (every 10 years)

Polio

Measles, Mumps and Rubella combinations

Chicken Pox (for persons who have not had the disease)

#### **4.1 Treatment of Affected Persons**

4.1.1 The University aims to achieve, within the resources available, a best practice standard in all HIV/AIDS interventions. Its personnel will work with national, regional, and international authorities in its quest to achieve this end.

4.1.2 The UWI, through the University Health Services and in collaboration with relevant agencies and organizations, will facilitate and support access of persons living with HIV/AIDS in its community to appropriate care and treatment, including the procurement of antiretroviral therapy, where indicated.

4.1.3 Students with HIV/AIDS not to be restricted from recreational sports or competitive athletic participation. Students are encouraged to consult with their clinician for advice in regard to participation in sports of any kind.

#### **4.2 Education and Counselling**

4.2.1 All members of the university community shall have access to comprehensive information about HIV/AIDS and related issues to enable them to deal rationally, effectively, humanely and with empathy towards persons affected by HIV/AIDS in the university community or outside of it. Information and advice will be available to the university community from the University Health Services or any other source designated by the University.

4.2.2 The University's Health Services are responsible for organizing and/or conducting AIDS education programmes, and staff and students have a responsibility to avail themselves of such programmes in order to have a

clear understanding of the potential impact of HIV/AIDS on their own lives, the university and the community. These programmes will equip staff and students to be able to live and function in societies affected with HIV infection and AIDS.

- 4.2.3 Counselling on HIV/AIDS and related issues will be available to all students and staff. Support and referral services for staff and students living with HIV/AIDS will be provided within the resource capability of the counselling and general health services of the UWI. These services will include voluntary HIV testing with appropriate pre-and post-test counselling.
- 4.2.4 All records connected with the counselling and support services will be kept confidential.
- 4.2.5 The group mandated by the University to be responsible for the University's response to HIV/AIDS will ensure that appropriate training courses are conducted and that staff in supervisory positions are trained in the management of situations related to HIV/AIDS.

### **4.3 Employee Guidelines**

- 4.3.1 The University is committed to a policy in which sexual exploitation of staff and students is not tolerated and respect is given to the equality of all human beings, without consideration of gender, race, religion, or social status. By upholding these principles and practice of mutual respect, staff and students are exhorted to play their part in the effort to prevent the spread of sexually transmitted disease, including HIV.
- 4.3.2 No member of staff has the right to refuse to work with or alongside anyone else on the grounds that the other has HIV or AIDS. Any allegation and/or action intended to induce or commit an act of discrimination against a person affected by HIV/AIDS will be subject to investigation and disciplinary measures under the terms of the contract of employment.
- 4.3.3 Should an employee or student believe that he/she has been discriminated against on the basis of HIV status, he/she should seek to address this through the appropriate grievance procedures of the University.

4.3.4 Continued employment, including promotion and training opportunities, will not be affected by a staff member's HIV status, provided that the staff member is able to perform his/her duties satisfactorily. Should a staff member become too ill to perform the duties as set out in his/her conditions of employment, suitable alternative work may be offered, if available.

Staff members with HIV/AIDS are entitled to the standard allocations of sick leave as contained in their conditions of service. As with other illnesses, requests for additional sick leave would be applied for through the officer responsible for human resources.

4.3.5 Staff members with AIDS shall be treated and accorded the same privileges and courtesies as any other staff with a serious illness. Being affected with HIV/AIDS should neither prejudice nor give preference to anyone's entitlement to sick leave or other benefits. HIV/AIDS shall not be used more than any other illness as justification for non-performance. Should a staff member living with HIV/AIDS be performing below expectations, the normal assessment and disciplinary procedures shall be followed.

4.3.6 In the event that HIV positive employees become medically incapacitated and are advised to stop working, general university rules and relevant legislation governing retirement because of ill health will apply. Any decision regarding termination of employment of a member of staff who is ill will be made in full consultation with the staff member concerned and his/her medical practitioner, and with appropriate legal advice.

4.3.7 There is no justification (medical or otherwise) to deny or restrict access of persons with HIV infection or AIDS to classrooms, office buildings, residence halls, facilities, swimming pools, recreational facilities or other common areas within the University.

#### **4.4 Medical/Laboratory Environments**

4.4.1 Units whose academic, research, clinical and work programmes involve risk of exposure to HIV-contaminated blood, body fluids or viral preparations are required to follow the strict policies and procedures for safety as these relate to the specific areas involved. The director of each

unit will be responsible for providing relevant education, safety information, equipment and supplies for members of staff and students working in or visiting the unit. (See Appendix 1)

4.4.2 All staff and students in University-affiliated medical facilities shall receive specific training on the handling and disposal of sharps and other ways of preventing infection with HIV. Training for staff will be arranged by the group mandated by the University to be responsible for the University's response to HIV/AIDS at set intervals and will be done in collaboration with appropriate University personnel or units.

#### **4.5 Accidental Exposure to HIV**

4.5.1 Most injuries can be prevented by using techniques such as not recapping needles by hand and by always disposing of used needles in the sharps' disposal containers provided in work areas. Many exposures to the eyes, nose, mouth or skin can be prevented by using appropriate barriers (e.g. gloves, eye and face protection and gowns) when contact with blood or body fluids is expected. There is no evidence that exposure by a stick with a solid needle delivers enough of a viral load to become infected.

4.5.2 Where prophylactic anti-retroviral treatment is available, this should be started within hours of the exposure following the protocol of counselling and testing laid out by the institution.

4.5.3 Staff or students who visit and work in medical/laboratory facilities outside of the University should be trained and counselled before such visits and should be assisted in obtaining emergency medication to take with them in case of accidental exposure to HIV. See Appendix 1.

#### **5. Staff and Student Responsibilities**

5.1 Each individual has a responsibility to himself or herself to minimize his/her risk of HIV infection and transmission by taking appropriate precautions. Persons who know, or suspect, that they are infected with HIV are urged to seek medical advice in order to avail themselves of the available care.

5.2 Members of the University Community have a responsibility to obtain

education and to conduct themselves in accordance with the knowledge of the transmission of the disease so that they protect their partners in intimacy and where appropriate other members of the community

- 5.3 Members of the University Community are expected to respect the rights of other staff and students at all times and to refrain from words or deeds that demonstrate prejudicial or discriminatory attitudes towards people with HIV/AIDS. University staff should set the example in challenging manifestations of prejudice and discrimination within the University. All requests for information regarding the University's response to a given "incident" regarding HIV/AIDS should be directed to the designated University department or unit.

## **6. Gender-related Issues**

- 6.1 The University is committed to providing an environment in which the equality of men and women is respected, where neither sexist behaviour nor gender-based discrimination is countenanced and in which pro-active attention is given to protecting all students from coercive sex.
- 6.2 The University also recognizes its responsibility to provide its male and female students and staff with such gender-sensitive programmes as will ensure that they are aware not only of the rights and vulnerabilities of others, but also of the HIV/AIDS related implications of sexual abuse and violence, which affect women predominantly.
- 6.3 The University will seek to access appropriate medical and other therapy for any of its members who are subject to sexual violence.
- 6.4 The University will allow no barriers to men or women being able to obtain protection against the spread of HIV; this includes condoms or other materials.

## **7. Research**

- 7.1 The University will continue to foster medical, social and economic research intended to expand the pool of knowledge on the impact of the epidemic and to treat, plan for and ameliorate its effects.

- 7.2 It will encourage research into stigma, discrimination, and homophobia, which inhibit the ability of individuals and the community to deal with HIV/AIDS in a rational and effective manner.
- 7.3 The University will use various methods and media to disseminate the results of the research and undertake and support appropriate interventions to influence the reduction of stigma and discrimination and the social and economic impact of the epidemic.

**8. The Community**

- 8.1 The University will make available to the community that it serves appropriate courses related to the control and amelioration of the impact of HIV/AIDS.
- 8.2 The University will encourage its staff to continue to contribute to the efforts to control the epidemic through participation in the medical, education, social and economic sectors in the communities it serves.

## APPENDIX 1

### UNIVERSAL PRECAUTIONS

- 1.1 The basis for advocating the consistent application of universal precautions lies in the assumption that in situations of likely exposure to HIV, all persons are potentially infected and all blood should be treated as such. All blood, open wounds, sores, breaks in the skin, grazes and open skin lesions, as well as all body fluids and excretions which could be stained or contaminated with blood (for example tears, saliva, mucus, phlegm, urine, vomit, faeces, and pus) should therefore be treated as potentially infectious.
- a. Blood, especially in large spills such as from nosebleeds and old blood or blood stains, should be handled with extreme caution.
  - b. Skin exposed accidentally to blood should be washed immediately with soap and running water.
  - c. All bleeding wounds, sores, breaks in the skin, grazes and open skin lesions should ideally be cleaned immediately with running water and/or antiseptics.
  - d. If there is a biting or scratching incident where the skin is broken, the wound should be washed and cleansed under running water, dried, treated with antiseptic and covered with a waterproof dressing.
  - e. Blood splashes to the face (mucous membranes of eyes, nose or mouth) should be flushed with running water for at least three minutes.
  - f. Proper facilities should be made available for the disposal of infected waste.
- 1.2 All open wounds, sores, breaks in the skin, grazes and open skin lesions, should at all times be covered completely and securely with a non-porous or waterproof dressing or plaster so that there is no risk of exposure to blood.

- 1.3 Cleansing and washing should always be done with running water; the water should not be poured over the area to be cleansed. Areas without running water should keep a supply on hand specifically for use in emergencies, e.g., in a 25-litre drum. This water can be kept fresh for a long period of time by adding bleach.
- 1.4 All persons attending to blood spills, open wounds, sores, breaks in the skin, grazes and open skin lesions, body fluids and excretions should wear protective latex gloves or plastic bags over their hands to eliminate the risk of HIV transmission effectively. Bleeding can be managed by compression with material that will absorb the blood, e.g., a towel.
- 1.5 If a surface has been contaminated with body fluids and excretions which could be stained or contaminated with blood, for instance, tears, saliva, mucus, phlegm, urine, vomit, faeces and pus that surface should be cleaned with running water and fresh, clean household bleach (1.10 solution), paper, or disposable cloths. The person doing the cleaning must wear protective gloves or plastic bags.
- 1.6 Blood-contaminated material should be sealed in a plastic bag and incinerated. Tissues and toilet paper can readily be flushed down a toilet.
- 1.7 If instruments (for instance scissors) become contaminated with blood or other body fluids, they should be washed and placed in a strong household bleach solution for at least one hour before drying and re-using.
- 1.8 Needles and syringes should not be re-used, but should be safely destroyed.

Training in first aid for students and staff should be provided. First aid kits should be maintained at strategic locations and made available when necessary.

Gloves should be taken to every sporting event by the person in charge, as well as a fully equipped first aid kit on each vehicle transporting students.