HIV and AIDS mainstreaming in Uganda’s higher education sector strategic direction: A case of Uganda Management Institute

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Received 2 January, 2020; Accepted 12 February, 2020

HIV and AIDS mainstreaming in the development arena has been a point of emphasis globally over the years. The higher education sector has also put emphasis on the campaign to have HIV and AIDS issues mainstreamed for in all strategies and operations. The purpose of this study is to investigate how HIV and AIDS mainstreaming has been considered in Uganda Management Institute (UMI) strategic direction. The study deployed a triangulation of cross-sectional and case study research designs where interview, Focus Group Discussions and Document review methods were deployed. The study deployed a two-level narrative analysis in order to identify patterns and plots with in participants’ stories and experiences. The study made reference to the model for mainstreaming HIV/AIDS in the education sector. The study found out that HIV and AIDS was scantily mainstreamed in UMI strategic plans and during monitoring. The mainstreaming for HIV and AIDS in the higher education sector was remodeled to capture the core mandate at UMI and to include the structures and systems relevant for the Institute. It was concluded that it is not enough to merely draw strategic plans, policies and other frameworks on HIV and AIDS initiatives, but more aspects like structures and resource allocation, among others have to be considered. The study recommends that a thorough analysis for HIV and AIDS issues, as well as mitigation measures should be properly addressed during strategic and annual planning processes to allow easy planning and budgeting, implementation and follow up of the issues.

Key words: HIV and AIDS, mainstreaming, higher education sector, strategic planning, strategy implementation, monitoring, evaluation.

INTRODUCTION

Nzioka (2014) and Rugalema and Khanye (2001) advance that higher education institutions must acknowledge that HIV and AIDS endemic affects their functioning and operations. UNESCO (2006) emphasized that HIV and AIDS have a significant impact in the pursuance of development. This therefore implies that there is dire need for the higher education sector to mainstream for HIV and AIDS so that activities are not negatively affected. Rugalema and Khanye (2001) define mainstreaming HIV and AIDS in education as an attempt to systemically integrate HIV and AIDS issues in education policies, programmes, and projects to ensure

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that the endemic does not impact on education delivery and quality.

Since 1992 the Uganda AIDS Commission (UAC) has had the remit for promoting a multi-sectoral response to HIV and AIDS. This puts Uganda as the first country to acknowledge the all-pervasive nature of HIV and AIDS; and the need for a far-reaching response from every sector, not just the health sector (Elsey et al., 2003). The National HIV and AIDS Strategic Plan 2015/2016 – 2019/2020 advances that as part of its international commitment, Uganda as a member of the international community is committed to implementing several decisions and resolutions from various conventions. Such decisions include those that were reached at the 2011 United Nations High Level Meeting on AIDS, where Member States adopted a Political Declaration on AIDS, providing a roadmap towards achieving the vision of Zero new HIV infections, Zero discrimination and Zero AIDS-related deaths (UAC, 2015). The National HIV and AIDS Strategic Plan 2015/2016 – 2019/2020 notes that one of the key challenges in implementation of the previous 2010/2011 – 2014/2015 National HIV and AIDS Strategic Plan was lack of a comprehensive national reporting mechanism that captures biomedical and behavioral/structural data (non-biomedical) on HIV and AIDS interventions from all actors. This may also reflect the fact that cascading of these strategic plans to lower levels was not at all sufficient, leading to non-implementation by Ministries, Departments and Agencies (MDAs), where Uganda Management Institute (UMI) is one. However, according to Avert (2018), HIV and AIDS prevalence in Uganda still stood at 5.7% among adults of 15-49 years, implying that the efforts towards curbing the scourge have not yielded sufficient results.

The Uganda National HIV Prevention Strategy 2011-2015 highlights roles of line ministries in the prevention of HIV and AIDS. The Ministry of Education and Sports’ role is to support HIV prevention in educational institutions. One of the ministry’s strategies in this regard is to support designing curricular and extra-curricular HIV prevention interventions for all levels, provide guidelines for peer education for youth-in-school, and implement HIV workplace programs in the sector (UAC, 2011). Relatedly, the Ministry of Education and Sports, in its HIV and AIDS workplace policy of 2007, highlighted that the purpose of the workplace policy is to ensure a consequent and equitable approach to the prevention of HIV and AIDS amongst the sector employees and to the comprehensive management of the complications of HIV and AIDS, including care and support for employees living with HIV and AIDS (Uganda Ministry of Education and Sports [MoES], 2007).

According to Elsey et al. (2003), a key player within the policy environment for HIV and AIDS mainstreaming is the World Bank; since 2000 the World Bank has funded the Uganda AIDS Control Programme. This programme is managed through the Uganda AIDS Commission in order to work with all the sector ministries to develop sector specific plans. Uganda has been developing sector wide approaches (SWAs) since 1998; these are now becoming well established in the key sectors of health, education and agriculture. World Bank funding through Uganda AIDS Control Program (UACP) was seen by some as a contradiction to the SWAs environment, as UACP funds are not pooled with the main sector budgets but remain earmarked for HIV and AIDS work (Elsey, et al, 2003). This controversial decision not to pool the funds with main sector budgets was justified by the fact that HIV and AIDS and its impacts can be seen as an emergency situation in need of an immediate response and therefore cannot wait for the longer-term improvements promised by sector wide approaches.

Asnakech (2014) in his study on the Status of HIV and AIDS mainstreaming in integrated Functional Adult Education came up with several recommendations on mainstreaming HIV and AIDS. These include: the need to strengthen the monitoring and evaluation system for the proper implementation of the HIV and AIDS; to implement HIV and AIDS mainstreaming into programs; and allocating budget and human power for implementing, and establishing relevant HIV and AIDS interventions. Other recommendations were that the campaigns towards protection from HIV/AIDS and how to solve community problems using systematic knowledge and skill independently and collectively. Asnakech (2014) argues that both government and non-government organizations plan and conduct relevant training and workshops on HIV and AIDS education. Curriculum should be revised and need to consider time, relevance and content of HIV/AIDS educations.

The Ministry of Gender, Labour and Social Development (MoGLSD) of Uganda, in its National Policy on HIV/AIDS and the world of work indicates that Uganda was one of the first African countries to be confronted by the HIV and AIDS epidemic, as early as 1982 when the first case was identified and reported from Koki, Rakai district (Uganda MoGLSD, 2007). In its Guidelines for Mainstreaming HIV/AIDS in Sectoral Development Plans, Programmes and Project of 2005, the MoGLSD highlights that plans, programmes and projects should have to purposefully seek to address the challenge of containing the HIV and AIDS epidemic and preventing new infections through advocacy, information and education campaigns, behavioral change, communication and condom distribution programmes among other interventions (Uganda, 2005).

Uganda Management Institute (UMI), being one of the Ministries, Departments and Agencies (MDAs) of government, are expected to mainstream HIV and AIDS in its Strategic Plans. In its earlier Human Resource Manual of 2011 section 8.8, UMI pronounced itself on management of staff with HIV/AIDS that they shall continue to work under normal conditions in the course of
their employment for as long as they are medically fit. The manual was later in 2016 harmonized to drop the section in favour of developing a fully-fledged HIV and AIDS Work Place Policy. UMI has over the years attempted to mainstream HIV and AIDS in its operations especially focusing on the employees in its attempt to implement the policy under the Human Resource Manual of 2011. Whereas UMI has attempted to mainstream for HIV and AIDS, there were no traces of actualizing the consideration of HIV and AIDS mitigation measures. This also justified undertaking the study so as to capture lived experiences of staff members who are not only beneficiaries under these strategies, but also the implementers of these strategies. The study therefore made conclusions and recommendations which may be paramount towards combating the HIV and AIDS scourge.

Problem statement

Literature indicates that mainstreaming for HIV and AIDS in development is a going concern the world over. This arose from the fact that HIV and AIDS may easily negatively affect pursuance of development initiatives. Most of the studies accessed dwell on the general point of view on mainstreaming for cross-cutting issues including gender and equity, environment, HIV and AIDS, as well as human right in the pursuance of development. Some studies attempt to investigate the phenomenon of mainstreaming for HIV and AIDS at sector level in different countries. However, scanty literature was accessed putting special focus on mainstreaming for HIV and AIDS in Management Development Institutes, Uganda Management Institute inclusive. For instance, several studies have investigated mainstreaming for HIV and AIDS by public, private and Non-governmental Organisations interventions in the health and education sectors. This study therefore attempts to cover the gap in literature where it captures how HIV and AIDS issues are mainstreamed during planning and budgeting processes, specifically at Uganda Management Institute; during implementation of strategic directions of UMI; and during monitoring and evaluation activities undertaking.

Study questions

The research study was guided by the following research questions:

(i) How does UMI mainstream HIV and AIDS during its planning and budgeting process?
(ii) How are HIV and AIDS mitigation measures implemented in UMI 2017-2020 Aligned Strategic Plan? and
(iii) How do Monitoring and Evaluation (M&E) activities consider HIV and AIDS mitigation measures at UMI?

METHODOLOGY

A cross-sectional survey design was used in this research study because of its ability to study a given phenomenon at the same point in time. A case study design was also deployed because of its flexibility with an allowance of retaining holistic characters of real life events adopting an in depth investigation. The study employed mainly qualitative approaches in order to capture perceptions and stories on mainstreaming for HIV and AIDS in UMI’s development initiatives. The target population under the study was staff members at UMI because they are the ones mainly targeted by the HIV and AIDS workplace policy unlike students who mainly pursue one-year courses. The study deployed face to face interview method and it involved the Directors, the Human Resource Manager, Deans, and Branch Managers. Focus Group Discussions were also held with participants including Cleaners, Askaris, Drivers, Office Assistants, Logistics Assistants, and Consultants. Document review method was also deployed to capture more data from the documents including the UMI strategic plan, the Monitoring and Evaluation System Guide, periodic reports, UMI policies, quality assurance reports and others. Validity of data was ensured by deploying a triangulation of methods, capturing data from different categories of people on the same phenomenon. This also allowed for trustworthiness – conformance, dependability, credibility and transferability of the findings. The study deployed narrative analysis where narratives were presented followed by analysis of narratives in order to identify patterns and plots within participants’ stories and experiences. This allowed deriving meanings and understandings about mainstreaming for HIV and AIDS in UMI’s strategic direction.

RESULTS AND DISCUSSION

Results are presented with the following headings;

(i) Mainstreaming HIV and AIDS in UMI’s planning and budgeting process,
(ii) Implementation of HIV and AIDS mitigation measures in UMI’s 2017-2020 Aligned Strategic Plan, and
(iii) Consideration of HIV and AIDS mitigation measures at UMI.

Mainstreaming HIV and AIDS in UMI’s planning and budgeting process. From a review of documents including strategic plans, policy compendium and periodic reports at UMI the study found out various gaps regarding mainstreaming for HIV and AIDS during planning and budgeting processes. It was found out that the UMI 2017-2020 aligned strategic plan does not vividly commit the Institute on analyzing for HIV and AIDS issues and actually capturing strategic actions, performance measures and targets on their mitigation (UMI, 2017). The general statement on the Institute’s commitment to mainstream for cross-cutting issues including HIV and AIDS is not backed by strategic actions and performance indicators.

From the interview and focus group discussion findings, it is anticipated that due to non-commitment of the strategic plan to mainstream HIV and AIDS in the Institute’s strategies and operations, not much effort has been put on mainstreaming for HIV and AIDS in the annual...
planning and budgeting processes (UMI, 2016). One of the Directors observed: “the situation of HIV and AIDS at the Institute is not alarming. That is why there has not been much focus on planning for interventions”. The response indicates that focus on mainstreaming for HIV and AIDS is presumed to be in instances where there is evidence of people infected and/or affected by the pandemic, unlike also focusing on HIV and AIDS prevention for both employees and clients. This is against Nzioka (2014)’s submission that higher education institutions should mainstream for HIV and AIDS in their activities if the endemic is not to affect their functioning and operation.

Planning and budgeting for HIV and AIDS may also be hampered by the fact that there was non-disclosure on part of people actually infected or those affected by the pandemic. Another Director observed: “it is very hard to know the people infected by HIV and AIDS due to non-disclosure”. This implies that without the infected and affected people actually disclosing their predicament, institutions in the higher education sector, like UMI may find it difficult to plan and budget for mitigation measures since on a general observation, it may look not to be a very big problem. One of the five interviewees did not agree with the idea of peer counseling while the four were passionately supportive. One of the drivers in a focus group discussion noted that: “fear of disclosure may be due to the fact that there is a strong culture of rumor mongering and pin-pointing on less sensitive issues and that it would worsen if it comes to HIV and AIDS”. Meanings from the engagement of key informants are that without clear data on the extent of the HIV and AIDS problem at UMI, planning and budgeting for mitigation measures becomes very difficult. Yet HIV and AIDS issues have a potential impact on teaching and learning, research, as well as staff recruitment and retention (Nzioka, 2014). At UMI, the nature of participants on Institute programmes also affects HIV and AIDS mainstreaming since the majority are working class and thus, appear mainly when they have running sessions. A consultant noted;

The nature of UMI’s clientele is the working class, who only get contact with the institute when their classes are running, mainly during the evenings and over the weekend. This thus allows little time to engage them in the HIV and AIDS programmes.

The particular fact on the nature of UMI’s business may make it difficult to plan and budget for mitigation measures that may target the students who study on a part-time basis. Relatedly, another consultant also noted: “participants are mainly of the working class and as such may be catered for from their respective work places, which may also be having HIV and AIDS workplace policies”. Participants in the study indicated that there may be no need to plan for sensitization on HIV and AIDS at the Institute since the caliber of staff and clients are well informed. A member top management noted: “staff are aware about HIV and AIDS given the widespread government messages and HIV and AIDS is talked about a lot”. This and more presumptions about HIV and AIDS lead to attaching less importance on planning and budgeting for mainstreaming HIV and AIDS issues at the Institute. However it is also believed that the Institute plays a key role towards the Political Declaration on AIDS; “providing a roadmap towards achieving the vision of Zero new HIV infections, Zero discrimination and Zero AIDS-related deaths” (Uganda, 2015b).

The study found out that there is no major focus drawn on ensuring that employees at the Institute were encouraged to disclose their sero-status, making it very hard for the Institute to draw strategies for mitigation of the HIV and AIDS issues. A study participant explained: “We have not been compelling staff to reveal their HIV status since it is a very sensitive issue”. This accordingly implies that in the running strategic planning period, mitigation measures for HIV and AIDS issues at the Institute have not effectively been implemented.

Implementation of HIV and AIDS mitigation measures in UMI’s 2017-2020 aligned strategic plan

From the study, it was observed that since the strategic plan of UMI never catered for sufficient mainstreaming of HIV and AIDS, implementation of mitigation measures is also very scant, if at all it is being undertaken.

The Institute has over the years not focused on HIV and AIDS sensitization strategies as put across by a top management member who noted: “there is no deliberate effort to make people aware about HIV and AIDS”. The participant also indicated that not much mitigation measures were being implemented at the Institute due to insufficient knowledge especially on those that may require support. The top management member said: “there is limited support towards HIV and AIDS mitigation measures which is usually adhoc and rare due to non-disclosure”. This further confirms that not much focus has been put at drawing strategies for mainstreaming HIV and AIDS in the Institute’s strategies and operations. Relatedly, in a study conducted on HIV and AIDS initiatives in Africa’s education sector, strategies were either new or limited while the few undertaken initiatives could not effectively address the impact of the endemic (UNESCO, 2006). Like the case for the University of Eldoret, UMI HIV and AIDS Policy advances that counseling services are key components of the endemic’s mainstreaming in University strategies (UMI, 2017; University of Eldoret, 2014). Counseling is one of the leading interventions that would have been implemented at the Institute, however study participants indicated that there were no specialized counseling services at the Institute to support the HIV and AIDS control campaign. Another consultant noted:
“Today no specialized counseling services are available at UMI save for some isolated adhoc intervention by the HRM department and probably individual course managers and facilitators”.

Consideration of HIV and AIDS mitigation measures in monitoring and evaluation activities at UMI

Integration of monitoring and evaluation of HIV and AIDS mitigation measures needs to be done earlier in time if objectives are to be met (Republic of Namibia, 2008; UMI, 2017). However, on review of the Uganda Management Institute Monitoring and Evaluation System Guide of 2015, the study found out that there is no specific focus on monitoring and evaluating cross-cutting issues like HIV and AIDS at the Institute. This may be due to fact that during its development, the Institute 2013-2018 five-year strategic plan did not mainstream for HIV and AIDS.

However, the 2017-2020 Aligned strategic plan made an attempt to mainstream for HIV and AIDS with strategies that include promotion of student and staff counseling services, wellness programmes for staff living with HIV and AIDS, establishing a structure to manage HIV and AIDS, operationalizing the HIV and AIDS policy, as well as development of a deliberate policy on HIV and AIDS disclosure (UMI, 2017). However, during the financial years 2017/18 and 2018/19, there is no evidence on implementation of the suggested HIV and AIDS mitigation measures (UMI, 2018). However, with funding from the African Development Bank – Higher Education Science and Technology project, managed by the Ministry of Education and Sports, UMI secured funding towards mainstreaming for cross-cutting issues, among which HIV and AIDS issues would be mitigated. The Institute allocated funding towards trainings, Information Education and Communication materials, like erecting an HIV and AIDS awareness bill board, as well as procurement of condoms and condom dispensers (UMI – AfDB, 2019). However, activities were expected to be undertaken in the fourth quarter of the financial year 2018/2019. A head of department observed;

Though there is no much evidence towards undertaking HIV and AIDS initiatives at the Institute, the AfDB project funded some activities including creation of awareness. These are expected to be shared among staff and students with the objective of combating the spread of HIV.

Study participants also confirmed that since monitoring and evaluation focuses indicators drawn by the strategic plan objectives, actions and indicators, it becomes hard to bring out issues to do with HIV and AIDS mainstreaming if they were actually not focused on. Another staff member during focus group discussions noted; The author is not certain whether there is keen interest to follow up HIV and AIDS mainstreaming during monitoring and evaluation activities. He does not remember any one inquiring about them at the Institute.

The statement indicates that focus on mainstreaming for HIV and AIDS during monitoring and evaluation activities is insufficient. Understandings from the argument are that HIV and AIDS issues are at a big risk of being not focussed on during the implementation of UMI strategic direction.

UNESCO (2006) attests to the fact that it is general lack of accurate data on HIV and AIDS in the higher education sector. This is also evident from UMI periodic reports where there is scanty reporting on implementation of HIV and AIDS mitigation measure. From the UMI periodic reports reviewed, there was no deliberate effort to capture data and information on HIV and AIDS. The Institute self-assessment report did not draw any information on HIV and AIDS (UMI, 2019). This further confirms that monitoring and evaluation of the HIV and AIDS mitigation measures is not effectively undertaken.

Remodeling HIV and AIDS mainstreaming in Higher Education Institutes

The study was also underpinned by the model for mainstreaming HIV and AIDS in the education sector as advanced by Rugalema and Khanye (2001). The study findings and interpretation allowed the remodeling of this model to lay focus on the mandate, structures and systems in the higher education sector. Elsey et al. (2003) argue that whereas institutions may put in place a conducive environment for HIV and AIDS mainstreaming, they may still be faced by a challenge of clearly defining what the concept of mainstreaming is all about. Relatedly, Rugalema and Khanye (2001) argue that formulation of strategic plans and programmes are not the only requirement for mainstreaming of HIV and AIDS in the higher education sector. Mainstreaming for HIV and AIDS would require specific focus on the structures and allocation of resources towards the mitigation measures (Rugalema and Khanye, 2001). The argument implies that by just analyzing for HIV and AIDS issues and suggesting mitigation measures, UMI would not have ensured mainstreaming for the issues. It would require setting up HIV and AIDS structures at the Institute, as well as ensuring that mitigation measures are allocated resources that would enable their implementation. Since it is not only about having a conducive environment for HIV and AIDS initiatives, the study made reference to the model for mainstreaming HIV/AIDS in the education sector as advanced by Rugalema and Khanye (2001) to come up with ideas in the context of higher education institutions. However, from analysis of findings, the study came up with a remodeling of this model in order to put arguments into the context of higher education institutions. This allowed getting meanings and understandings on
the practice of these institutions when it comes to mainstreaming for HIV and AIDS during planning and budgeting, implementation, as well as monitoring and evaluation. Figure 1 shows a modification of the model in order to put HIV and AIDS mainstreaming in the context of higher education institutions.

Figure 1 presents a model for mainstreaming HIV and AIDS in higher education institutions as modified from the model for mainstreaming HIV/AIDS in the education sector (Rugalema and Khanye, 2001). The model shows that mainstreaming for HIV and AIDS in higher education institutions is rather complex and as such would require a lot of attention. It starts with getting a clear understanding of the institution’s core business; and putting in place guiding principles on HIV and AIDS mainstreaming. The model emphasizes need to put in place structures and allocation of resources towards implementing mitigation measures. The institution should then set up a Management Information System to ease data capture, storage and dissemination. This informs mainstreaming for HIV and AIDS among the learners, teaching and non-teaching staff. Data collected and disseminated facilitates feedback sharing among the key stakeholders of the institute, which further allows effective decision making and policy changes. Such feedback may in the end also inform changes in teaching, research, consultancies and social responsibility mandate for higher education institutions.

Conclusion

Whereas the study found out that UMI has frameworks for HIV and AIDS mainstreaming, it is barely mainstreamed in the planning and budgeting process, implementation and during monitoring and evaluation processes. The study concludes that without the institute mainstreaming for HIV and AIDS during the strategic planning process, no major interventions in form of strategies can subsequently be drawn towards making a contribution in the fight against the HIV and AIDS scourge.

The study further found out that implementation of HIV and AIDS mitigation measures was also scanty at the Institute. In conclusion therefore, the study deduces that it is not enough to merely draw strategic plans, policies
and other frameworks on HIV and AIDS initiatives, but more aspects like structures and resource allocation, among others have to be considered. This is well illustrated by the model for mainstreaming HIV and AIDS in higher education institutions in Figure 1. The monitoring and evaluation activities at the Institute have not catered for HIV and AIDS issues. All reviewed performance reports and other Institute reports have not presented information on HIV and AIDS issues. The study concludes that feedback from the mainstreaming process is very crucial to inform re-focusing of higher education institutions core mandate for more effectiveness. The model for mainstreaming HIV and AIDS in higher education institutions (Figure 1) clearly illustrates that it is from the mainstreaming feedback that their core mandate may be informed through results of the HIV and AIDS mainstreaming processes periodically.

Recommendations

The Institute needs to ensure that a thorough analysis for HIV and AIDS issues, as well as mitigation measures is carried out during strategic and annual planning processes. Secondly, while drawing institutional budgets, suggested mitigation measures need to be allocated funds for implementation. Thirdly, there is need for UMI to ensure that during planning, structures for HIV and AIDS mainstreaming are actually allocated operational funding. The Institute needs to ensure that proposed strategies for mitigation are actually implemented. This can be through ensuring that the drawn and approved annual plans and budgets (which are deemed to include mitigation measures) are actually followed. Capacity of key stakeholders including the implementers of HIV and AIDS mitigation measures should also be built to enable effective implementation, as well as adequate monitoring and evaluation activities.

ACKNOWLEDGEMENT

The study was one of the Institutional Intelligence Research studies that Uganda Management Institute is now promoting. Both authors being part of the staff structure of the Institute would utilize the publication for any career development opportunities where it may be required. However, this never derailed objectivity during the study. The authors therefore confirm that the findings present the objective picture of mainstreaming for HIV and AIDS in Institute strategic planning, implementation and during monitoring and evaluation activities.

CONFLICT OF INTERESTS

The authors have not declared any conflict of interests.

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