

The study aimed at establishing the gender dynamics of HIV and AIDS pandemic at university level of education in Kenya in terms of the magnitude and factors underlying vulnerability. It also sought to establish the threats posed by the pandemic on university education. The target study population comprised students and staff in four universities; Maseno, Kenyatta, USIU and CUEA. The study reached a total of 843 respondents comprising 759 students from the four participating universities, 61 academic and administrative staff and 23 key informants. A stratified random sampling technique was used to select students participating in the study. Participating staff were selected through simple random sampling while key informants were selected purposively. Primary data were collected from respondents through questionnaires, semi structured interview guides, focus group discussions and fact sheets. Interviews were conducted with key informants who included deans of students, student counsellors, student leaders, Heads of AIDS Control Units, and heads of medical health units within the institutions. Secondary data were obtained using fact sheets. Quantifiable primary data were coded and entered into SPSS version 17 and excel databases for analysis. Qualitative data were analysed using content analysis technique based on a thematic approach.

Findings show that factors common to male and female students that are perceived to influence the spread of HIV and AIDS in universities included age of students, duration of sexual experience and poverty. Gender specific risk factors were alcohol and substance abuse for male students and quest for financial gain for females. Differences in perceived levels of HIV infection risk between students from private and public universities were significant ($\chi^2 = 17.487$, $df = 4$, $P = 0.002$). Students in public universities perceive themselves to be at a higher risk of HIV infection compared to their counterparts in private universities; H_01 was therefore rejected. The study fails to accept H_02 and accepts the alternative hypothesis that there are significant differences in perceived student risk levels of HIV infection between the religious and secular universities ($\chi^2 = 29.4236$, $df = 12$, $P = 0.004$). H_03 was accepted implying that no significant differences existed in student perceptions on the level of risk of HIV infection by gender and level of study ($\chi^2 = 8.018$, $df = 7$, $P = 0.331$).

The study rejects H_04 and accepts the alternative hypothesis that significant differences existed in student perceptions on their risk of HIV infection when categorised by gender and family income groups ($\chi^2 = 16.211$, $df = 5$, $P = 0.006$). Significant differences exist in student perceptions on perceived levels of student risk of HIV infection across gender when categorised by type of residence ($\chi^2 = 33.020$, $df = 7$, $P = 0.000$); the study therefore rejected H_05 . H_06 on differences in budgetary allocations to HIV and AIDS interventions and core functions between public and private universities could not be tested due to lack of data. Similarly, H_07 and H_08 on differences in HIV prevalence among students and staff, respectively, between public and private universities were not testable owing to lack of comprehensive data. Direct impacts of HIV and AIDS pandemic on university education include death of students and staff, inconsistent student participation in class work, poor academic performance, dropouts and momentary discontinuation of studies, shift in institutional budgetary allocations due to increase in non-core costs, decline in staff efficiency and productivity, and increased costs in institutional operation. Dropouts and discontinuation of education by prospective students at pre-university levels, loss of jobs and productivity by parents and sponsors of students, increased dependency on HELB funds, increase in health sector expenditure at the expense of education, and opportunity costs in national resource use, constituted the main indirect impacts of the HIV and AIDS pandemic on university education.

The study established that the HIV and AIDS interventions put in place by the universities are inadequate, vary by type of university and were not gender responsive. The low levels of awareness among staff and students on interventions by university to mitigate the impacts of HIV and AIDS pandemic are attributable to the social invisibility of the disease. Towards the development and implementation of policy, the study recommends; enhanced HIV and AIDS research in universities and the development of monitoring and evaluation frameworks for the disease, gender differentiation of interventions, increased

institutional budgetary allocations HIV and AIDS interventions, gender mainstreaming in institutional HIV and AIDS policies and the development of sector specific HIV and AIDS intervention policies.