

UNIVERSITY OF EMBU

ORIENTATION MESSAGES

MESSAGE FROM THE CHAIRMAN, CUSTOMER RELATIONS AND COMPLAINT RESOLUTION COMMITTEE

University of Embu is committed to offering quality services efficiently and effectively while striving to meet and exceed the expectations of its interested parties.

The University has outlined its services on the Service Delivery Charters which are located strategically within its environs. Additionally, various channels have been provided where customers can conveniently post their feedback. These channels include:

- a) Suggestion boxes,
- b) Email: complaints@embuni.ac.ke,
- c) Mobile phone: 0705945412,
- d) Postal address: 6-60100, Embu,
- e) Online Forms, Registers and;
- f) Offices of the:
 - Customer Relations
 - Vice Chancellor
 - Deputy Vice-Chancellor (Academic, Research and Extension)
 - DVC (Planning, Administration and Finance)

A customer can request, suggest, compliment or complain against service failure, delay, inaction, inefficiency, discourtesy and unresponsiveness.

Upon receipt of a complaint, it is acknowledged, assessed, processed, investigated and responded to within 30 days. All complaints are resolved in a confidential manner. Follow ups are also done to ensure that the complaint does not reoccur. When complaints are resolved in proper way there are a number of benefits such as rights a wrong, improves on quality of service, upholds Citizens right to quality service, builds citizen support and loyalty, usually there are lessons learnt, and strengthens internal system, among others.

The University of Embu facilitates the access to information by disclosing the information held to the public. This information includes the particulars of the University, its functions, and the employees which can be accessed through the University's Website <u>www.embuni.ac.ke</u>. On request, a customer can be provided with information at a reasonable cost if any, and within feasible limits.

In conclusion, I take this opportunity to welcome to the University of Embu. We value your feedback.

PROF. KIPLAGAT KOTUT CHAIRMAN, CUSTOMER RELATIONS AND COMPLAINT RESOLUTION COMMITTEE



MESSAGE FROM THE GENDER MAINSTREAMING COMMITTEE

- 1. Welcome to the University of Embu (UoEm).
- 2. The University of Embu is committed to equity and equality.
- 3. Every student will be accorded **equal and fair treatment** irrespective of their faith, age, ethnicity, gender, and physical disability.
- 4. UoEm environment enables students to achieve their full potential.
- 5. When you get an opportunity such as **leadership** in student association, class representative or executive position in clubs and societies, embrace the opportunity.
- 6. Avoid engaging in activities that will make you not realize your full potential e.g. excess partying, drug abuse, cohabiting among other misconduct.
- 7. University doesn't tolerate any kind of harassment; physical (gender based violence beating up someone, pulling someone's hair etc.), discrimination, psychological, bullying, sexual harassment, shouting, domestic violence especially for those co-habiting), issuing threats, name-calling, stalking among other indiscipline which breeches the conduct and discipline of students.
- 8. Failure to adhere to the **rules and regulations governing the student conduct** would land the offender to the student disciplinary.
- 9. Gender based violence & sexual harassment is punishable under the Kenyan Sexual Offences Act of 2006.
- 10. Sexual harassment may consist of:
- Sexual jokes and insulting using sexual comments
- Assassinating the character of someone else
- Belittling comments on a person's anatomy
- Requesting for sexual favors in return for reward
- Telling lies or spreading rumors about a person's sex life with the purpose of
- Unwanted physical contact of any sort which is sexual in nature especially touching of any body parts
- Indecent exposure
- Transmitting offensive written telephone or electronic communications
- Indecent curiosity persistent unwanted brazen questioning into a person's sexual matters



Consequences of gender based violence

- Feeling stressed, anxious or depressed
- Withdrawing from social situations
- Losing confidence and self-esteem
- Having physical symptoms of stress, such as headaches, backaches or sleep problems
- Being less productive and unable to concentrate.

UNIVERSITIES POLICIES AND PROCEDURES

GENDER BASED VIOLENCE /SEXUAL HARASSMENT REPORTING MECHANISMS

- 1. Students who feel that they are **victims** of GBV and SH should **report** promptly. Do not shy away from reporting.
- Non-residents students should report to the police immediately.
- Resident students should report to the University security office immediately.
- Anyone reporting should ensure **accurate communication** of the allegations in the statement.
- All victims should **avoid verbal reporting** of all cases of gender based violence and sexual harassment.
- **Document everything that happened**, including when it occurred, the names of any people who saw what happened, and what you've done to try to stop it.
- Keep text messages, social media comments, notes and emails. This evidence can help if you make a complaint.
- 2. Seek for medical attention & counselling services.
- 3. The information is treated with utmost confidentiality.
- 4. Investigations done for fair treatment.

PIECES OF ADVICE

- 1. Avoid 'dark' hours.
- 2. Never walk alone in the evening especially in deserted areas.
- 3. Form networks with caring friends.
- 4. Everyone urged to **uphold dignity** while dealing with each other.
- 5. Learn to say 'no'.
- 6. Learn to accept 'no'.
- 7. Avoid co-habiting.
- 8. Never accept to be given lift by strangers.

For more information, check the Gender Mainstreaming and Sexual Harassment Prevention Policy at the University website.





MESSAGE FROM THE HIV PREVENTION COMMITTEE

COMPREHENSIVE HIV AND AIDS KNOWLEDGE

What is HIV (human immunodeficiency virus) is a virus that attacks cells that help the body fight infection, making a person more vulnerable to other infections and diseases.

There is currently no effective cure. Once people get HIV, they have it for life. But with proper medical care, HIV can be controlled. People with HIV who get effective HIV treatment can live long, healthy lives and protect their partners.

What is AIDS (Acquired Immunodeficiency Syndrome)? It's the most severe phase of HIV infection.

People with AIDS have such badly damaged immune systems that they get an increasing number of severe illnesses, called opportunistic infections. Their CD4 cell count drops below 200 cells/mm, have a high viral load and be very infectious.

Routes of transmission

There are four main routes of HIV transmission:

- 1. Sex unprotected vaginal or anal sex (oral sex carries a very small risk)
- 2. Sharing unsterilized injecting drug equipment
- 3. Mother-to-child in pregnancy, childbirth or breastfeeding
- 4. During transfusions, transplants or medical procedures. (Low risk)

Who's at risk? Anyone can become infected with HIV – it's not exclusive to particular groups or lifestyles. If fluids from an HIV-positive person enter your body, then you are at risk.

How do I know if I have HIV?

The only way to know for sure whether you have HIV is to **get tested.** Knowing your HIV status helps you make healthy decisions to prevent getting or transmitting HIV.

Are there symptoms?

Some people have flu-like symptoms within 2 to 4 weeks after infection (*acute HIV infection*). These symptoms may last for a few days or several weeks. Possible symptoms include

- Fever,
- Chills,
- Rash,
- Night sweats,
- Muscle aches,
- Sore throat,
- Fatigue,
- Swollen lymph nodes, and
- Mouth ulcers.

But some people may not feel sick during acute HIV infection. These symptoms don't mean you have HIV. Other illnesses can cause these same symptoms.



HIV PREVENTIVE INFORMATION:

- Abstinence is the only 100% effective way to prevent HIV
- Being faithful to one HIV free partner.
- Use a condom consistently and correctly every time you have sex.
- Take PrEP where available this is a course of HIV drugs which if taken consistently as advised by your healthcare professional prevents HIV infection through sex.
- Avoid sharing needles, syringes and other injecting equipment with anyone if you take drugs.
- Take HIV treatment if you're a new or expectant mother living with HIV, as this can dramatically reduce the risk of passing HIV to your baby during pregnancy, childbirth and breastfeeding.
- Ask your healthcare professional if the blood product you are receiving (blood transfusion, organ or tissue transplant) has been tested for HIV.
- Take precautions if you're a healthcare worker, such as wearing protection (like gloves and goggles), washing hands after contact with blood and other bodily fluids, and safely disposing of sharp equipment

ILLUSTRATION ON CONDOM USE AND HYGIENIC DISPOSAL

THE RIGHT WAY TO USE A MALE CONDOM

Condom Do's and Don'ts

DO use a condom every time you have sex.

DO put on a condom before having sex.

DO read the package and check the expiration date.

DO make sure there are no tears or defects.

DO store condoms in a cool, dry place.

DO use latex or polyurethane condoms.

DO use water-based or silicone-based lubricant to prevent breakage.

DON'T store condoms in your wallet as heat and friction can damage them.

DON'T use nonoxynol-9 (a spermicide), as this can cause irritation.

DON'T use oil-based products like baby oil, lotion, petroleum jelly, or cooking oil because they will cause the condom to break.

DON'T use more than one condom at a time.

DON'T reuse a condom.

How to Put on and Take Off a Male Condom



Carefully open and remove condom from wrapper.



Place condom on the head of the erect, hard penis. If uncircumcised, pull back the foreskin first.



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Pinch air out of the tip of the condom.



Unroll condom all the way down the penis.



After sex but before pulling out, hold the condom at the base. Then pull out, while holding the condom in place.



Carefully remove the condom and throw it in the trash.



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THE RIGHT WAY TO USE A FEMALE CONDOM

Female Condom Dos and Don'ts

- DO use a female condom from start to finish, every time you have vaginal sex.
- DO read the condom package insert and check the expiration date.
- DO make sure there are no tears or defects.
- DO use lubricant to help prevent the condom from slipping and tearing.
- DO store female condoms in a cool, dry place.

*Female condoms can also be used for anal sex.

- DON'T use a male condom with a female condom, as this can cause tearing.
- DON'T reuse a female condom.
- DON'T flush female condoms as they may clog the toilet.

HOW TO INSERT AND REMOVE A FEMALE CONDOM



Carefully open and remove female condom from package to prevent tearing.



Find a comfortable position. While holding outside of condom at closed end, squeeze sides of inner ring together with your thumb and forefinger and insert into vagina. It is similar to inserting a tampon.



The thick, inner ring with closed end is used for placing in the vagina and holds condom in place. The thin, outer ring remains outside of body, covering vaginal opening.



Using your finger, push inner ring as far up as it will go until it rests against cervix. The condom will expand naturally and you may not feel it.





Be sure condom is not twisted. The thin, outer ring should remain outside vagina.



Guide partner's penis into opening of female condom. Stop intercourse if you feel penis slip between condom and walls of vagina or if outer ring is pushed into vagina.



To remove, gently twist outer ring and pull female condom out of vagina.



Throw away female condom in trash after using it one time. Do not reuse.



Knowledge Transforms



ADHERENCE TO TREATMENT AND CARE LITERACY

Medication adherence is the "act of filling new prescriptions or refilling prescriptions on time." **Medication compliance** is the "act of taking **medication** on schedule or taking **medication** as prescribed.

Less youths are able to achieve viral suppression, about 6% in comparison to 30% of adults. Specific factors that lead to reduced adherence in young people include:

- A lack of support
- Behavioral and conduct problems
- Inconvenient/inconsistent social routines
- Forgetting medication doses
- Unstable housing
- Not being fully involved in treatment decision-making
- Substance abuse
- Psychological barriers including depression and anxiety

Other factors that can increase adherence in young people living with HIV are; Simplifying treatment regimes, using directly observed therapy and cell phone reminders.

STIGMA AND DISCRIMINATION

HIV-related stigma and discrimination refers to prejudice, negative attitudes and abuse directed at people living with HIV and AIDS.

Many of the people most vulnerable to HIV face stigma, prejudice and discrimination in their daily lives. This pushes them to the margins of society, where poverty and fear make accessing health care and HIV services difficult.

There is a cyclical relationship between stigma and HIV; people who experience stigma and discrimination are marginalized and made more vulnerable to HIV, while those living with HIV are more vulnerable to experiencing stigma and discrimination.

• Myths and misinformation increase the stigma and discrimination surrounding HIV and AIDS.

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- Roughly one in eight people living with HIV is being denied health services because of stigma and discrimination.
- Adopting a human rights approach to HIV and AIDS is in the best interests of public health and is key to eradicating stigma and discrimination.

Possible consequences of HIV-related stigma:

- Loss of income and livelihood
- Loss of marriage and childbearing options
- Poor care within the health sector
- Withdrawal of caregiving in the home
- Loss of hope and feelings of worthlessness
- Loss of reputation.

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TYPES OF STIGMA

1. Self-stigma/internalized stigma

This fear of discrimination breaks down confidence to seek help and medical care. Negative self-judgement resulting in shame, worthlessness and blame represents an important but neglected aspect of living with HIV.

2. Governmental stigma

A country's discriminatory laws, rules and policies regarding HIV can alienate and exclude people living with HIV, reinforcing the stigma surrounding HIV and AIDS. This can happen through;

- Criminalization of key affected populations.
- Restrictions on entry, travel and stay

3. Healthcare stigma

Health providers may minimize contact with, or care of, patients living with HIV, delay or deny treatment, demand additional payment for services and isolate people living with HIV from other patients.

4. Employment stigma

In the workplace, people living with HIV may suffer stigma from their co-workers and employers, such as social isolation and ridicule, or experience discriminatory practices, such as termination or refusal of employment.

5. Community and household level stigma

Community-level stigma and discrimination towards people living with HIV can force people to leave their home and change their daily activities.

ENDING HIV STIGMA AND DISCRIMINATION

Protect:	Use of anti-discrimination laws
	Decriminalization
	Challenging violence
Include:	Key populations in healthcare service design and implementation
	Include Stigma and discrimination reduction as a goal in national strategies
Empower:	The population to understand human rights
	To act on violations
Educate:	To address fears
	To change attitudes.





MESSAGE FROM THE MENTORSHIP COMMITTEE

Introduction

Mentorship is a relationship between a more experienced and knowledgeable person (mentor) with a person with less experience and knowledge (mentee). The mentor must have a certain area of expertise. The aim of mentoring is to promote positive change in a mentee while a building a healthy relationship with a mentor(s). The mentors assist the mentee in developing specific skills and knowledge that will enhance the mentee in personal growth and development. Therefore, University of Embu has promoted mentorship in order to brand the students to become productive members of the society. Mentorship is conducted in various departments at four levels: Level 1: Professional ethics, Level 2: Job Market Skills, Level 3: Leadership and governance, Level 4: Beyond you degree. These will help students to attain professional ethics. The students will attain soft skills and self-driven motivation which will be an added advantage in the job market and entrepreneurship. Through mentorship the students are helped to solve various challenges encountered during their period of study.

Objectives of Mentorship

- Create awareness among UoEm students on the need for diligence, decorum, respect, courtesy and dignity.
- Create awareness among UoEm students on academic integrity at the university.
- Create a platform for engagement between university students and job market.
- Create a platform to engage the students on how to solve various challenges in life

Targets of Mentorship

- Developing skills and knowledge that will enhance the mentee in personal growth and development
- Providing life skills to mentee going into the world of employment.
- Promoting soft skills which are not usually captured in the University curriculums.
- Preparing students to face a competitive world where everyone is competing for jobs.

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Role of Mentee

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- Select a mentor based on criteria relevant to your goals and expectations
- Inform your Mentor about your learning and communication preferences

- Being prepared, including providing agendas in advance of each meeting.
- Discuss your goals with your mentor and create a plan of how you will achieve milestones on the way to reaching your goals

Role of a Mentor

- Develop skills and knowledge that will enhance the mentee in personal growth and development
- Provide life skills to mentee going into the world of employment.
- Promote soft skills which are not usually captured in the University curriculums.
- Prepare students to face a competitive world where everyone is competing for jobs.

Dress Code: My Dress My University

UoEm recognizes the importance of the appearance of the University community in creating a positive and professional image that enhances the confidence of customers and employers. Dress code sets out the expectations of the University in relation to personal appearance, grooming, formal and professional wear. The dress code is necessary for the university community in order to:

- a) Promote professional standards
- b) Provide a positive and professional image of the university
- c) To minimize vulnerability to sexual harassment

Objectives of Dress Code

Dress Code aims at addressing UoEm community's needs and behavioural issues at the University by:

- i. Establishing a culture of professionalism through decency that will enhance distinctiveness.
- ii. Promoting a UoEm brand that will enhance marketability.
- iii. Promoting a conducive learning and working environment in which members of UoEm are able to perform to the best of their ability.
- iv. Creating an environment where members of UoEm remember their commitment to treat each other with courtesy, respect and dignity.
- v. Ensuring that members of UoEm behave within the standards set out in the University's dress code.





KEY DRESS CODE GUIDELINES

The following are the minimum guidelines of dress code, grooming and appearance that all members of the University community are to abide by. Members of the University

Community should ensure that their dress and appearance portrays a decent and professional image.

Inappropriate attire includes, but is not limited to, the following:

- i. Clothing that reveals too much of an individual's back, chest, stomach, thighs or innerwear.
- ii. Clothes that are very tight and display body outline.
- iii. Clothing that is intentionally ripped, rugged, torn or worn out.
- iv. Clothing with slogans or offensive language or images or promoting drugs or unlawful groups.
- v. Slippers, gumboots or any other unofficial sandals. Gumboots may be allowed in practical/areas where they are defined as protective gear.

See Annexure 1 of Dress Code guidelines on the University website

Regular Dress Code

UOEM dress code will help to maintain decency, professionalism, distinctiveness,

marketability as well as branding of the University image.

Female

- i. Skirts/dresses with hem lines at the knee or below.
- ii. Sweaters, fitting tops/dresses/skirts, trouser suits are acceptable
- iii. Wear blouses/tops with non-revealing necklines that do not reveal bare midriffs.
- iv. Wear clothing that does not reveal innerwear.
- v. Mini-skirts that are above the knee, necklines that are four inches below the shoulders to the front and to the back, see- me -through, bare-backs among many others should be avoided.
- vi. All offensive tattoos must be covered.
- vii. Ensure that clothes are not excessively creased.
- viii. Excessive Facial/body piercings is discouraged.
- ix. Excessive make up is discouraged.
- x. Hair should be clean, neat and tidy at all times.
- xi. Outrageous hair colour is discouraged.
- xii. Wearing of items arising from cultural or religious norms will be respected as long as provisions of the dress code are not compromised.



See Annexure 2 of Dress Code guidelines on the University website

Males

- i. Display of bare chest is not allowed
- ii. Earrings and studs are discouraged.
- iii. Baggy, sagging, worn out, unfinished or torn trousers are unacceptable
- iv. Beards and moustaches should be short and neatly trimmed and tidy.
- v. Outrageous Hair colour is discouraged.
- vi. Wearing of items arising from cultural or religious norms will be respected as long as provisions of the dress code are not compromised.

See Annexure 3 of Dress Code guidelines on the University website

KEY PERSONAL PRESENTATION AND GROOMING GUIDELINES

i. Smoking in the University is prohibited except in designated areas.

See Annexure 5 of give guidelines on acceptable dress code on the University website

PENALTIES

Non adherence to university dress code will be subject to laid down relevant disciplinary procedures for students and staff. Therefore, failure to adhere to these standards may constitute misconduct and result in formal disciplinary proceedings taken in line with the students' disciplinary procedure.

Knowledge Transforms

Prepared by:

Dr Milcah Nyaga CHAIRPERSON, MENTORSHIP COMMITTEE

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MESSAGE FROM THE COMMITTEE ON ENFORCEMENT OF HEALTH AND SAFETY GUIDELINES ON PREVENTING THE SPREAD OF COVID-19

Safety Tips on Prevention of Spread of Covid-19

Overview:

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus.

Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness.

Most common symptoms:

- fever
- dry cough
- tiredness

Less common symptoms:

- body aches and pains
- sore throat
- diarrhea
- conjunctivitis
- headache
- loss of taste or smell
- a rash on skin, or discoloration of fingers or toes

Serious symptoms:

- difficulty breathing or shortness of breath
- chest pain or pressure
- loss of speech or movement

The best way to prevent and slow down transmission is to be well informed about the COVID-19 virus, the disease it causes and how it spreads. Protect yourself and others from infection by washing your hands or using an alcohol based rub frequently and not touching your face.

The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes, so it's important that you also practice respiratory etiquette (for example, by coughing into a flexed elbow). If you develop symptoms kindly visit a health facility for assessment and care.

COVID- 19 Preventive Measures:

- 1. Wash your hands often with soap and water for at least 20seconds or use an alcohol based sanitizer.
- 2. Cover your mouth when you cough or sneeze with a tissue or inside of your elbow.
- 3. Avoid touching your eyes, nose or mouth with uncleaned hands. These are the points of entry for virus.



- 4. If you have flu-like symptoms, notify people around you and seek medical care.
- 5. Practice physical distancing by staying 1.5 metres from others.
- 6. Always wear a mask properly when in public and crowded places.
- 7. Clean and disinfect frequently touched surfaces and objects.
- 8. Keep rooms well ventilated with open windows and doors where necessary.
- 9. Get a Covid-19 vaccine when you are offered.



University Emergency Contacts:

Office of the Dean of Students: - 0115602495

Department of Health Services: - 0795188740

Note: Everyone accessing the University of Embu is required to properly don on a face mask.





MESSAGE FROM THE ROAD SAFETY COMMITTEE

What Is Road Safety?

Road safety refers to measures used to prevent road users from being killed or seriously injured.

Road users include:

- Pedestrians,
- Cyclists,
- Motorists,
- Vehicle passengers,
- Donkey carts users
- Passengers of on-road public transport (mainly buses and trams).
- Skateboarders
- Pillion passengers

Overview

Human error especially on the part of drivers and pedestrians is the leading cause of road accidents in Kenya. About 3000 Kenyans lose their lives in road traffic crashes every year, while another 6000 are left with permanent disabilities. Majority of these people are vulnerable road users- pedestrians, motorcyclists, and cyclists- many of whom are killed in unsafe forms of public transportation. (Data from NTSA 2019/2020)

Furthermore, research on road traffic accidents estimates that more than 50% of injuries/deaths emanating from road accident occur to age group (15-49years) which is considered the economically productive cohort. (Sapkota et al., 2016), (Macharia et al., 2009, June)

The University through the Department of Health Services, and Road Safety Monitoring Sub-Committee recorded a total of nine road traffic injuries on members of staff and students in the financial year 2020/2021. Some of the injuries were severe and needed critical care to support the survivors.

 The financial burden incurred by families of the affected was high as some had to undergo reconstructive surgery and spend more than 6 weeks in hospital.





- Some of the affected students had to call off studies hence missing on school work.
- All these accidents occurred along the Embu- Meru Highway adjacent to the University. These incidences were caused by both pedestrian and driver error i.e. drunk driving, walking on the wrong side of the road, use of earphones while using the road.
- Road Safety brings cheers while road accidents bring tears. Each one of us has a role to play to STOP accidents.

Contribution to fatalities

- Associated with days of the week: Lowest- Monday & Tuesday Highest – Friday & Saturday
- ii. Associated with time of the day: Lowest – 4:00 a.m.Spikes from 6:00a.m to 8: a.m.
- iii. By vehicle type: Commercial vehicles
 Private vehicles
 Motorcycles
 Public Service Vehicles
 Lowest contribution is the ambulance
- iv. Fatalities distribution by age:

25-39 Years- age bracket

v. Fatalities distribution by gender

83% Male- male are more at risk

17% female

vi. Fatalities distribution by month of the year

Lowest – January

Highest – December & April

NB: This is attributed by the holiday mood, drunk driving and hence an appeal for everyone to be extra vigilant during this period.

Road Traffic Tips for you as a Pedestrian

- > Always walk on sidewalks whenever they are available.
- > If there is no sidewalk, walk facing traffic and as far from traffic as possible.
- Be smart and alert at all times by avoiding using earphones or talking on cellphones on the road
- > Always observe traffic signs and signals
- ➢ Walk in a single file
- Be aware of motorbikes
- > Never assume drivers see you or will stop when they should. Walk defensively.





- Be visible at all times. Wear bright clothing during the night and on rainy and foggy days; or use a flashlight at night.
- > Avoid alcohol and drugs because they impair your abilities and your judgment.
- > Be alert to engine noise or reverse lights on cars in parking bays
- Make a practice of staying on one side of the path while walking rather than weaving randomly from side to side.
- > Choose a walking route frequented by other walkers, joggers, and bikers

Road Safety Tips for Pillion Passengers

- Be sure the rider is ready for you to get on the bike. Once on, sit still. A shift in your weight can lead to loss of balance, especially at a stop
- Always wear a helmet and strap it; it reduces the risk of head injuries, which have a high likelihood of being fatal. 75% of all trauma cases at the national referral hospital are as a result of boda boda accidents
- If you are helping your rider navigate, be sure to give directions soon enough so that your rider has plenty of time to maneuver
- Communicate. If you need to stop, let the rider know. If the rider is going too fast, tell him to slow down
- Avoid engaging riders in conversation; it can distract them from paying attention to the road
- Do not share a boda boda with someone else. Adding more than one passenger adds an extra load which can lead to loss of balance and makes braking much more challenging. For good reason, this is against the law and can result in a traffic offense and fine
- Always wait for the bike to come to a full stop before you mount or dismount. If you start to clamber on (or off) when the rider does not expect it, the sudden weight change might lead to loss of balance
- Always be alert when on a boda boda (i.e. do not text or answer phone calls). You can be an active participant in the ride by staying alert and being prepared. Help the rider look for potential danger and be prepared to hang on and hold yourself back if you anticipate a need for sudden braking
- > When it's time to get off the bike, only do so when the rider tells you it's okay.
- If the rider or the motorbike makes you feel uncomfortable, stop things before they get worse.

NB: Road Safety is a personal responsibility







Emergency Contacts

- Office of the Dean of Students 0115602495
- Department of Health Services 0795188740
- University Security Hotline No 0724343333
- Chief Security Officer 0724210693

