

## HIV/AIDS PREVENTION EDUCATION

Objective: 6.7 The student will become aware of community, state, and national health-care and safety agencies and their functions.

This objective relates to: FLE 6.9; Health SOL 5.4, 6.6, 7.13; NHES 1 & 4

### Content

General and specific agencies and organizations available within a community/state/nation:

- Hospital
- Physician
- Nurse
- Police
- Rescue squad
- Health department
- Fire department
- Religious organizations
- Child abuse prevention services
- Substance abuse prevention services
- Mental health counseling
- Teenage pregnancy prevention counseling
- Family planning counseling
- Prenatal care services
- Suicide prevention counseling
- Services for prevention/treatment of sexually transmitted diseases, including HIV infection

Specific health resources at the state and national levels

- Virginia STD/AIDS Hotline (1-800-533-4148)
- Virginia Department of Health, STDs/AIDS Office (804-786-0877)
- AIDS service organizations
- Centers for Disease Control and Prevention  
*General:* <http://www.cdc.gov>  
*HIV/AIDS:* <http://www.cdcnpin.org/>  
*School Health Guidelines and YRBS (Youth Risk Behavior Surveillance):*  
<http://www.cdc.gov/nccdphp/dash>

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### Teaching/Learning Strategies

Discuss the importance of every family member's knowing about community agencies, organizations, and support groups that are available in times of need. It is important that students know of general health-care and safety services available within the community as well as in the state and in the nation.

Have students use a phone book to make a list of health-care and safety agencies, the services they provide, and phone numbers to take home and share as a "Family Health-Care and Safety Resource List."

Discuss ways to evaluate resources and which sources of information about health issues are the most accurate:

- Qualifications of the writer/speaker
- Source of information
- Currency of information
- How the information compares with other information

Invite a guest speaker from one of the agencies in your community to explain the services offered by that agency. Post a state and national list of specific local health resources in an accessible location. This might alleviate students' concerns about confidentiality and many more students may feel comfortable picking up brochures and calling hotlines.

Conduct a teen health fair.

## HIV/AIDS PREVENTION EDUCATION

Objective: 6.7 continued

### Content

### Teaching/Learning Strategies

- National Institute for Health  
<http://www.nih.gov/index.html>
- Food and Drug Administration:  
<http://www.fda.gov/>
- National AIDS Information Line  
(1-800-342-AIDS)
- STD National Hotline  
(1-800-227-8922)
- National HIV/AIDS Teen Hotline  
(1-800-440-TEEN)
- American Red Cross  
<http://www.redcross.org/hss/HIVAIDS/basic/prevskil.html>  
<http://www.redcross.org/hss/HIVAIDS/youth/index.html>  
<http://www.redcross.org/hss/HIVAIDS/afam/dfs.html>  
<http://www.redcross.org/hss/HIVAIDS/hispanic/index.html>  
<http://www.redcross.org/hss/HIVAIDS/index.html>
- March of Dimes, Teen Tip Line (Richmond)  
804-355-9583
- Teen Tip Line  
<http://www.med.virginia.edu/medcntr/depts/patient-ed/resdir/tollfree.html>  
1-888-332-7788
- American Cancer Society  
<http://www.cancer.org/>
- American Heart Association  
<http://www.amhrt.org/>
- American Lung Association of Virginia  
<http://www.lungusa.org/virginia/index.html>  
(804) 355-3295  
1-800-LUNG-USA

## HIV/AIDS PREVENTION EDUCATION

Objective: 7.1 The student will compare sexually transmitted diseases and HIV/AIDS.

This objective relates to: FLE 5.4, 6.5, 7.11; Health SOL 7.6, 7.8; NHES 1, 2 & 7

### Content

Definitions of terms

- STD (sexually transmitted disease)--any number of diseases that can be transmitted through various forms of sexual contact
- HIV (human immunodeficiency virus) --a virus which damages the body's immune system, making it susceptible to a wide range of serious diseases.
- AIDS (acquired immune-deficiency syndrome). The stage of HIV infection when the body's immune system is severely damaged.

Types of common STDs

- Chlamydia
- Genital warts
- Gonorrhea
- Genital herpes
- Syphilis
- Trichomoniasis
- HIV infection
- Hepatitis B
- PID (pelvic inflammatory disease)
- NGU (non-gonococcal urethritis)

Possible results of STDs

- Emotional effects (fear, shame, guilt)
- Sterility in both males and females
- Damage to heart, brain, joints, and other organs
- Birth defects
- Still births
- Cervical cancer
- Death

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### Teaching/Learning Strategies

Explain to students that American teenagers and young adults are currently at risk due to an epidemic of sexually transmitted diseases. STDs are types of infectious diseases that are usually passed from person to person during intimate sexual contact. Most STDs are curable with the exception of HIV/AIDS and herpes, which has no known cure. All STDs, including HIV/AIDS, are preventable.

Put students in small groups and have them use health books or library health resources to fill out charts which will help them see the comparison of the various STDs, including HIV/AIDS. The charts may contain the following headings:

- Type of STD
- Symptoms
- Transmission
- Treatment
- Prognosis

When students have finished their charts, involve the class in drawing conclusions about the differences and similarities between STDs and HIV/AIDS.

- Similarities
- Under certain circumstances anyone can contract HIV or an STD. Anyone at risk for STDs is also at risk for HIV.
- There is a certain amount of social stigma attached to having HIV/AIDS as well as having an STD.

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## HIV/AIDS PREVENTION EDUCATION

Objective: 7.1 continued

### Content

- Comparison of HIV/AIDS to other STDs
- Transmission
- Treatment
- Prognosis

### Teaching/Learning Strategies

- Both HIV infection and STDs have an asymptomatic state during which an infected person may look and feel healthy but still transmit the disease.
- Both HIV and STDs can be prevented.
- Like STDs, HIV is often transmitted through sexual intercourse. A person cannot become infected with HIV by casual contact or from cups, toilets, telephones, towels. However, some STDs (genital herpes, trichomoniasis) may be contracted from toilets and by sharing towels.
- Differences
  - There is no known cure for HIV infection whereas most STDs can be cured.
  - HIV infection may lead to the development of AIDS, which is usually a fatal disease.
  - HIV/AIDS gets more attention from the media than other STDs.
  - People are more afraid of HIV/AIDS than of STDs.
  - Many people who might agree they have a risk for STDs would not consider themselves at risk for HIV.
  - There is more discrimination involving HIV/AIDS than STDs. (e.g., health insurance, life insurance, immigration laws, etc.).

## HIV/AIDS PREVENTION EDUCATION

Objective: 7.2 The student will explain behaviors that reduce risks for sexually transmitted diseases and HIV infection.

This objective relates to: FLE 7.4, 7.6, 7.11, 8.14; Health SOL 7.5, 7.6; NHES 2, 3 & 5

### Content

Behaviors that reduce risks for STDs and HIV infection

- Abstinence from sexual intercourse (oral, anal, vaginal)
- Mutually monogamous relationships with an uninfected person (neither has another sexual partner)
- Abstinence from injectable drug use
- Avoidance of needle-sharing (drug, body-piercing, and tattoo needles)
- Avoidance of blood-to-blood contact (becoming "blood brothers" or giving first aid without gloves)
- Using latex condoms and/or latex barriers lubricated with spermicides

### Teaching/Learning Strategies

Based on what students learned about sexually transmitted diseases and HIV/AIDS in objective 7.1, have them brainstorm behaviors that are necessary to reduce the risks for STDs and HIV.

Make certain students understand that sexual abstinence means that there is no direct contact of another person's penis, vagina, anus, mouth, or their fluids with one's own sex organs or other mucous membranes.

The only sure ways to avoid STDs and HIV are to avoid injectable drug use and needle-sharing and to practice sexual abstinence. Condoms may provide "safer" sex, but they by no means make sex "safe." Most condom failures are the result of improper usage.

## HIV/AIDS PREVENTION EDUCATION

Objective: 7.3 The student will differentiate between being pressured by peers and pressuring peers to behave in risky ways and know how to resist peer pressure.

This objective relates to: FLE 7.4, 8.7; Health SOL 8.6; NHES 3, 4, 5 & 6

### Content

Definitions of terms

--Peer pressure--the strong influence that people of the same age group sometimes have on one another, both positively and negatively

Examples of positive peer pressure

--Getting someone to join a club  
--Encouraging someone to get good grades  
--Refusing to participate in teasing others

Examples of negative peer pressure

--Drinking  
--Taking drugs  
--Having sexual intercourse (oral, anal, vaginal)  
--Having many sexual partners  
--Sharing needles (injectable drug, tattoo, and body-piercing)  
--Doing something illegal

Ways to resist negative peer pressure

--Find out if you are risking getting into trouble. Ask questions. (e.g., "What are we going to do at the store? Do you have any money?")  
--Tell the other person what kind of trouble you are risking. (e.g., "That's theft, That's burglary.")

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### Teaching/Learning Strategies

Ask students to brainstorm ways they have been influenced by peers (people their own age) in the past week. Write responses on the chalkboard or chart paper. Point out that people can influence us in both positive and negative ways. Discuss examples of each from students' responses.

Make sure students are aware of unspoken peer pressure and how it affects them. For example, say to students: "Look at your feet. How many of you are wearing the same brand of tennis shoes? How many of you are wearing jeans? What brand? What about your hairstyles? Are they the same?" Explain that many times people are pressured to conform without realizing it.

Discuss ways of refusing/saying "no" to peer pressure. Explain that even in refusing or saying "no" to your peers, it is still possible to keep your friends, have fun, and stay out of trouble.

Divide the class into small groups. Pass pieces of scratch paper to each student and have students write down something they may be asked to do that could lead to trouble. Have one student collect all ideas and put them in a container for each group member to draw out and read.

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## HIV/AIDS PREVENTION EDUCATION

Objective: 7.3 continued

### Content

- Tell the other person what you stand to lose—the consequences. (e.g., "I could be suspended, grounded, arrested, etc.")
- Suggest something else to do. (e.g., "Let's go to my house and watch TV. Let's get pizza; I'll buy.")
- Leave the scene, but do invite the person to join you later if he/she changes his/her mind. (e.g., "If you change your mind, I'll be at my house.")
- Say "no" over and over again like a broken record.
- Make parents the bad guys; (e.g., "They're coming to pick me up soon" or "They watch me like a hawk").
- Say "no" by praising a person for his or her respect and open mindedness in letting you do what you feel comfortable doing (e.g., "I'm glad you don't make me feel bad for not wanting to...").
- Say "no" by reversing the situation (e.g., "If you were my friend, you wouldn't ask me to...").
- Seek assistance from a trusted adult.

### Results of pressuring others

- Feeling in control
- Feeling responsible for others
- Validating your own behavior

### Results of being pressured

- Loss of self-image
- Loss of control of your life
- Loss of respect (from self and others)
- Loss of freedom (when you get in trouble with the law)

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### Teaching/Learning Strategies

Ask the group to work together to identify the troubles in the situation, think of the consequences, and a way to resist. After each group has finished, have them trade containers of situations with another group.

Example: "I get asked to skip school. That's truancy. If I get caught, I could be kicked out of school for a week, and my parents would probably put me on restriction. Plus, I might get into more trouble while I'm not at school. No, I won't do it. Let's go to school. We can play ball after school is out."

Ask two students to volunteer to leave the room. Then tell the class to pretend that they are at a party and to try to pressure the two volunteers to take a drink when they return to the room. Tell the two volunteers to resist the class's pressure. After the role-play, ask students to identify the following:

- Ways the class pressured the volunteers to drink
- Ways the volunteers said "no"
- Feelings of the class as they pressured
- Feelings of the volunteers as they were pressured

Have each student design a cartoon and write the words that will illustrate one of the following situations:

- Saying "no" to drugs
- Saying "no" to tobacco
- Saying "no" to alcohol
- Saying "no" to sexual intercourse

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## HIV/AIDS PREVENTION EDUCATION

Objective: 7.3 continued

### Content

Reasons to enjoy making your own decisions and sticking to them

- To be in control of your life
- To help get what you want
- To help avoid misunderstandings
- To gain respect from others for sticking up for what you believe in
- To help you create a better self-image

### Teaching/Learning Strategies

Discuss how the media (soap operas, MTV, movies) use teenagers to influence the views of other teenagers concerning sex and risky behaviors.

Discuss with students the positive aspects of making your own decisions and sticking to them.

## HIV/AIDS PREVENTION EDUCATION

Objective: 7.4 The student will summarize local resources for HIV/AIDS information.

This objective relates to: FLE 7.11; Health SOL 6.6; NHES 1, 2 & 7

<b>Content</b>	<b>Teaching/Learning Strategies</b>
Hospital	Divide the class into small groups to make a class book or bulletin board display entitled "HIV/AIDS Aids." Each group is responsible for gathering information, pamphlets, etc., about a particular local resource for HIV/AIDS information and including it in the book or on the bulletin board along with the following information: --Name of the resource --Phone number --Location --Hours --Type of service provided --Cost --Contact person
Health Department	
Hotlines	
--National AIDS Information Line 1-800-342-AIDS	
--STD National Hotline 1-800-227-8922	
--Virginia STD/AIDS Hotline 1-800-533-4148	
--Teen AIDS Hotline 1-800-234-TEEN	
AIDS service organizations	
March of Dimes	
American Red Cross	
Community organizations	This objective provides an excellent opportunity for you to invite a speaker from one of the local HIV/AIDS information services to speak to the class to provide the latest information on AIDS and to describe the services of his or her particular organization.
Substance abuse services	
Support groups for persons living with HIV/AIDS and their families, partners, friends	
College or university health center or health education department	
Religious organizations	
Local hemophilia chapter	
HIV Antibody testing centers	
Mental health centers	
Hospices	



## HIV/AIDS PREVENTION EDUCATION

Objective: 8.1 The student will describe the stages of HIV infection and AIDS.

This objective relates to: Health SOL 7.6, 7.8; NHES 1, 2 & 3

### Content

Definitions of the acronyms HIV and AIDS  
(See Teaching/Learning Strategies)

Identification of the stages of HIV infection and AIDS

--Acute infection--HIV enters/infects the body perinatally (prior to and 28 days after birth) or from someone else's blood, vaginal fluid, or semen

--Asymptomatic HIV-positive--a person is infected with HIV but shows no signs or symptoms; however the person is capable of transmitting the virus

--Symptomatic HIV-positive--a person is infected with HIV and developing some of the nonspecific chronic signs and symptoms (fever, fatigue, swollen glands, cough, unexplained weight loss, severe, and persistent diarrhea)

--AIDS--a person is infected with HIV and opportunistic diseases are present (such as tuberculosis, PCP (pneumocystis carinii pneumonia), a rare type of pneumonia, and Kaposi's sarcoma, a rare skin cancer) or the T-4 cell count is very low (<200)

--Opportunities infections—an infection that takes the opportunity of a weak immune system to make a person sick. Usually they are not contagious diseases.

--Death usually follows the onset of AIDS; but with recent advances in treatment, people with AIDS may live for many years.

### Teaching/Learning Strategies

Have students in small groups brainstorm what the acronyms HIV and AIDS mean. After five minutes, ask them to report their definitions to the class. Write all responses on the chalkboard or chart paper. With students, arrive at the meaning of each letter in the acronyms.

**H** = Human--refers to a virus whose host is a person

**I** = Immunodeficiency--decreasing the function of the immune system in a person

**V** = Virus--a germ that infects and destroys human cells

**A** = Acquired--something we get after we are conceived (when egg and sperm meet), not inherited as in hair and eye color

**I** = Immune--relating to our body's defense system against disease (like an army defending a country)

**D** = Deficiency--A lack of something—our immune system does not work (because the soldiers [white blood cells] are too weak or too few to fight)

**S** = Syndrome--a group of symptoms, any or all which may be present when a person has a disease

Explain that AIDS is caused by a virus--the human immunodeficiency virus (HIV). HIV is not hereditary, but it is an infectious disease; therefore, we can get the disease from someone else.

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## HIV/AIDS PREVENTION EDUCATION

Objective: 8.1 continued

### **Content**

### **Teaching/Learning Strategies**

List for students and describe the stages of the HIV disease. Some individuals develop no symptoms at all and appear to be healthy. These asymptomatic HIV-positive persons, however, can transmit the virus to someone else.

Have students use the library to find an article by or about a person infected with HIV. Look for articles in magazines and books that describe the personal perspective of the progression of the disease, not just facts and statistics.

Show a media presentation such as "The Ryan White Story" or other story of a young HIV-infected individual to enhance the impact of this objective.

## HIV/AIDS PREVENTION EDUCATION

Objective: 8.2 Explain how a healthy immune system functions and what happens when the immune system is invaded by HIV.

This objective relates to: FLE 7.6, 7.11, 8.14, 9.12; Health SOL 7.6, 7.8; NHES 1, 2 & 3

### Content

The body's natural lines of defense

- Skin
- Hair (nose hair and eyelashes)
- Mucus
- Saliva
- Stomach acids
- White blood cells
- Antibodies
- T-helper cells

How a healthy immune system works

- White blood cells engulf bacteria or produce poisons to kill parasites.
- B-lymphocytes (a type of white cell) make antibodies which attach to and help kill infecting microorganisms (pathogens) like viruses and bacteria.
- These antibodies produce immunity and the ability to prevent re-infection by the same pathogen.
- T-lymphocytes (white cells), produced by the thymus and called T-helper cells (T4, CD4), control the activity of other white blood cells and help to activate the B-lymphocytes when infection is present and help to deactivate them when the infection is controlled.

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### Teaching/Learning Strategies

Review by brainstorming with students the function of the body's natural lines of defense that were discussed previously in objective 6.2. These defenses range from the skin, nose hair, eyelashes, mucus, and saliva, which prevent germs from entering the body, to the immune system, whose antibodies and T-helper cells prevent infection and reduce the severity of disease when infection occurs.

Emphasize that the HIV attacks the body's immune system, causing it to break down. Therefore, the body is unable to resist or reduce the severity of infections, such as pneumonia, and certain cancers. These infections and diseases often kill a person.

Make a two-column chart on the chalkboard or overhead. In one column have students list what happens in a healthy immune system when a germ (bacterium or virus) enters the body. In the other column, have students list what happens when HIV enters the body (see objective 6.2, p. 95 for detailed description).

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## HIV/AIDS PREVENTION EDUCATION

Objective: 8.2 continued

### Content

What happens when the HIV enters the immune system

- Viruses are parasites; therefore, the HIV virus attaches itself to a T-helper cell and releases its nucleic acid into the host cell.
- After infecting a T-helper cell, HIV may remain dormant for a period (10-12 years, possibly more).
- The virus reactivates, begins reproducing, and kills the T-helper cells.
- If enough T-helper cells are killed, the person's ability to activate the immune system is diminished or lost. He/she may be unable to fight off infections/cancers.
- The immune system contains the lymphatic system, whose lymph carries white blood cells (lymphocytes) to infected areas.
- When the immune system cannot function to kill infections or control abnormal cell growth (cancer), even relatively harmless microorganisms that normally exist in the human body can kill a person.

### Teaching/Learning Strategies

Ask students, working in small groups, to create an analogy of the immune system, its function, and what happens when HIV enters the system. Some examples might be comparing the immune system to a fort, sentinels, and invading soldiers or to an orchestra and its conductor. Have students creatively present their analogies through diagrams, cartoons, role-playing, etc. Praise all efforts. The point is to get students thinking about the immune system, its importance to one's health, and the dangers of HIV to the immune system.

## HIV/AIDS PREVENTION EDUCATION

Objective: 8.3 The student will review sexual and nonsexual high-risk behaviors and steps to take to reduce these risks.

This objective relates to: FLE 8.11, 8.14, 9.7; Health SOL 7.6, 9.3;7.8; NHES 3, 5, 6 & 7

### Content

Definitions of terms

- Risk--a chance of encountering damage or harm
- Positive risk-taking behavior--low-risk decisions involving feelings, disappointment, etc.
- Negative risk-taking behavior--high-risk decisions involving physical harm or long-term problems
- High-risk behavior--behavior that threatens a person's health and well-being because it sets up the body for the possible invasion of an infectious agent

High-risk behaviors for contracting HIV

- Sexual behaviors
  - Having sexual intercourse (oral, anal, or vaginal) with an infected person
  - Having multiple sexual partners (i.e., the more partners, the greater the risk)
  - Having sexual contact with a prostitute
- Nonsexual behaviors
  - Using injectable drugs
  - Sharing needles or syringes, (ear-piercing, tattoo, drug and steroid)
  - Exchanging blood ("blood brother" rituals or giving first aid without gloves)
  - Using other drugs, including alcohol (can impair a person's judgment in making a responsible decision about risky behaviors)
  - Piercing the body

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### Teaching/Learning Strategies

Discuss the concept of risk. Explain that any decision involving the unknown involves a risk. Point out that all of life involves some amount of risk-taking. Some risk-taking behaviors are positive and others are more negative. Positive risk-taking behaviors are low-risk decisions, such as trying out for a team, asking someone for a date, applying for a job, etc. Their only real risk involves feelings (disappointment, rejection, disapproval, etc.). We all have to take these risks to learn, grow, and succeed. Negative risk-taking behaviors, on the other hand, are high-risk decisions, such as fighting, shoplifting, taking drugs, etc. These risks involve accidents, physical harm to self or others, or long-term problems that affect the quality of life. Explain that some people are naturally more likely to take risks than others.

Have all students play the "Risk Game" to assess their own risk-taking behavior. Label each corner of the room with a sign saying either "ALWAYS," "NEVER," "SOMETIMES," and "NEUTRAL." Ask all students to stand in the "NEUTRAL" corner. Then tell them that as you read out a behavior, they are to move to the corner where the sign best describes how often they have engaged in the behavior you just read. Tell them they always have the right to pass and stay in the neutral corner. Suggested behaviors to read aloud:

- Wearing a seat belt
- Jaywalking (crossing against a red light)

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## HIV/AIDS PREVENTION EDUCATION

Objective: 8.3 continued

### Content

Ways to reduce risks

- Make responsible decisions
- Don't have sexual intercourse--oral, anal, or vaginal (to be 100% safe).
- Seek a monogamous relationship with one uninfected partner.
- Limit the number of sexual partners.
- Don't have intercourse with someone who has had many sexual partners.
- If you have intercourse, use a lubricated latex condom with spermicide.
- Practice alternatives to intercourse
  - Hugging
  - Kissing
  - Listening to joys, hurts
  - Doing special things together
  - Talking on the phone
  - Being close
  - Giving a special gift
  - Talking openly about feelings
  - Sending cards
  - Trading rings, etc.
- Talk with the person you date about past relationships, your concern about HIV/AIDS, and protecting each other.
- Do not share injectable drug needles, syringes, or other works.
- Do not share body-piercing or tattoo needles, razors, or toothbrushes.
- Avoid taking drugs and alcohol. They impair your judgment.

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### Teaching/Learning Strategies

- Riding in a car with someone who's been drinking
- Driving while intoxicated
- Shoplifting
- Smoking
- Cutting class
- Hitchhiking
- Fighting
- Cheating on a test

Ask students to brainstorm other behaviors. After reading each behavior, have students discuss what the risks are and how risky they think the behavior is.

Review with students what they already know about HIV/AIDS and how the disease is transmitted. Make sure students understand that the virus is found in body fluids--blood, semen, vaginal secretions, tears, and saliva. Point out that even though HIV has been identified in tears and saliva, no cases of transmission from these body fluids have been reported and casual contact is not a risk. However, any exchange of blood, semen, or vaginal secretions can result in HIV infection.

Divide students into small groups, give them a list of behaviors, and have them rank them as "definitely not risky," "probably risky," or "definitely risky." Include behaviors such as:

- Going to school with a person with HIV/AIDS
- Donating blood
- Having sexual intercourse
- Abstinence (No sex! No drugs!)
- Social kissing (dry)
- Intimate, deep kissing (wet)
- Ear-piercing or tattooing

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## HIV/AIDS PREVENTION EDUCATION

Objective: 8.3 continued

### Content

Ways to make responsible decisions

- Identify the problem.
- Evaluate or gather information about the problem.
- Identify possible ways (alternatives) of solving the problem.
- Identify the possible consequences (pros and cons) of each solution.
- Decide which solution is best for everyone.
- Evaluate your solution.

### Teaching/Learning Strategies

- Blood transfusions
- Using a condom during intercourse
- Swimming in public pools
- Crying, coughing
- Using drugs (including alcohol)

After students complete their rankings in groups, allow the class to discuss the rankings and discuss the rationale used in the rankings. Be alert for misinformation and correct it as soon as it occurs.

Emphasize that avoiding high-risk behaviors involves making responsible decisions. Students are likely to be faced with these choices repeatedly; therefore, they need to know how to go about making intelligent decisions, not haphazard ones. Review the decision-making process. With the class, "walk through" a model problem-solving situation.

Stress that the decision about having sex is difficult and is often influenced by many factors (e.g., values, media, pressure, self-concept, etc.). Stress that nothing is wrong with a person who chooses to wait until marriage to have sex (abstinence). Point out that at least 50% of teenagers by age 17 are choosing not to have sex. Discuss the positive aspects of waiting (e.g., allows a couple to develop a deeper relationship, can be a test of love, can be a sign of emotional maturity, etc.). Emphasize that abstinence is the only sure way of reducing the risk of contracting STDs or HIV.

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## HIV/AIDS PREVENTION EDUCATION

Objective: 8.3 continued

### Content

### Teaching/Learning Strategies

Pose a sample problem and in small groups have students work through the process of decision-making.

Role-play situations in which a person must say "no" numerous times. Discuss how this is difficult.

Have students in their journals write responses to the following questions:

- If you and your girlfriend or boyfriend decide to postpone sexual intercourse, what other ways can you show him or her that you love him or her?
- How can a person change high-risk behaviors into low-risk or no-risk for contracting HIV?

Have students share responses about ways to share love without having intercourse. These might become a class bulletin board titled "Better Safe Than Sorry!"

## HIV/AIDS PREVENTION EDUCATION

Objective: 8.4 The student will identify ways to strengthen self-concept and know stress-management skills.

This objective relates to: FLE 7.4, 8.3, 8.8, 9.4; Health SOL 7.11; NHES 5, 6 & 7

### Content

Definitions of terms

- Self-image (self-concept)--the way you see yourself as a person
- Poor self-image--feeling negative about yourself
- Good self-image (self-esteem)—feeling positive about yourself and accepting your own strengths and weaknesses

Why a good self-image (self-esteem) is important

- It affects your reactions to experiences and to others.
- It affects your tendency to get involved in high-risk behaviors.
- It affects your future.

Ways to strengthen self-image

- Focus on positive thoughts about yourself (your strong points).
- Express negative thoughts in more positive, realistic ways.
- Accept yourself as unique, not exactly like everyone else.
- Do not depend on someone else's opinion of you or uncontrollable circumstances (inherited physical traits) as your gauge of your personal worth.
- Plan ways to strengthen your weaknesses, but set reasonable goals (improvement, not perfection).

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### Teaching/Learning Strategies

Discuss the question, "Who Am I?" Talk about the ways we identify ourselves, such as by the roles we play, the way we look, the interests we have, and the things we do and say. Ask students to write a short paper answering the question, "Who Am I?" Ask them to try to see themselves in as many different ways as possible.

Have students in their journals make a list of "Things I Value." Then have students rank the items on a scale of 1 to 10 (least valued to most valued). Explain that knowing what we value helps us know ourselves. Also, point out that our values change as we grow and change physically, emotionally, intellectually, spiritually. Tell students that they might wish to do a values survey on each successive birthday and then compare their most recent list to the previous year's list to see how their values change with their age.

Explain that each of us has three images--the way we see ourselves (as in the paper students just wrote), the way others see us, and the way we think others see us. Our self-esteem is affected by each of these images. If we see ourselves as unable to do anything right, we have a poor self-image. If we recognize that we have strengths as well as faults and work to improve our faults, we have a good self-image (self-esteem).

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## HIV/AIDS PREVENTION EDUCATION

Objective: 8.4 continued

### Content

- Accept both your positive and negative emotions and learn to deal with them.
- Learn to accept compliments with a smile and a "thank you," not a negative statement. ("You don't mean that. It was nothing.")

Definition of stress--the body's general reaction to situations associated with uncertainty, fear, or being out of control

Physical effects of stress

- Headache
- Fatigue
- Backache
- Stomachache
- Insomnia
- Loss of appetite
- Pounding heart
- Proneness to accidents
- Feelings of helplessness, hostility, anger, depression, guilt, lethargy

Sources of stress

- Parental pressure/family problems (illness, death, moving)
- Peer pressure (to drink, to smoke, to have sex)
- School pressures (worrying about grades, making teams, etc.)
- Changing relationships (divorce, remarriage, breaking off relationships)
- Teenage pregnancy
- Fear of HIV/AIDS
- Physical conditions (hunger, tiredness, injury)

(continued on next page)

### Teaching/Learning Strategies

Have students in their journals/ notebooks write about (a) a characteristic that makes them feel good about themselves (a strength), (b) a characteristic they would like to change (a weakness), and (c) ideas for ways to improve a weakness.

Ask the class for their ideas on why this objective is included in an HIV/AIDS prevention curriculum. Students need to understand that when they feel good about themselves, they are less likely to engage in high-risk behaviors such as those outlined in objective 8.3. Students who turn to drugs and sex usually do so because they have poor self-images.

Have students work in teams preparing skits to show situations in which a character has a poor self-image and then changes it into a good one by changing negative thinking into positive thinking.

Define stress and list its physical effects. Next, prepare a stress inventory in which students name one stressor, and all students rate the stressors on a scale of 1 (not a problem) to 5 (a very strong problem). Ask the entire group to suggest appropriate ways to handle stress (coping skills).

Ask students to list in their journals things that cause them stress (make them feel bad, worried, concerned, or anxious).

(continued on next page)

## HIV/AIDS PREVENTION EDUCATION

Objective: 8.4 continued

### Content

--Pleasant events (trips, important games, holidays, recitals, etc.)

Negative ways of coping with stress

--Alcohol

--Drugs

--Suicide

Positive stress-management techniques

--Proper diet

--Physical exercise and sports

--Sufficient rest

--Creative arts

--Religious activities and youth groups

--Career-development and life-management activities

--Time management

--Relaxation; visualization

--Confiding in a responsible adult (family, friends, counselor)

--Using the problem-solving method (used in objective 8.3)

--Setting realistic goals, believing in yourself—maintaining a good self-image

--Keeping a sense of humor

### Teaching/Learning Strategies

Tell students that people with low self-esteem will often try to handle stress with the use of alcohol and other drugs. Drug use, however, only leads to additional problems. People with high self-esteem are better able to handle stress because they have confidence that they can solve problems and face difficulties. They also know their limitations and do not try to be perfect.

Invite a guest speaker specifically trained to teach stress-management techniques to speak to the class or sponsor a school-wide night meeting for teens and parents on “How to Take the Stress Out of Stress.”

## HIV/AIDS PREVENTION EDUCATION

Objective: 8.5 The student will discuss the responsibility of the media in giving accurate information about HIV/AIDS.

This objective relates to: Health SOL 7.2, 7.5; NHES, 2, 4 & 5

### Content

Why accurate information about HIV/AIDS is needed

- To avoid unnecessary fear, anger, and discrimination
- Fear results from the unknown or misinformation.
- Anger can develop when one's needs are threatened or when a fear of such a threat results.
- Discrimination can occur as a result of fear and anger.
- To accurately educate people about HIV/AIDS and its prevention and not create misinformation
- To avoid creating mass hysteria

How to evaluate the accuracy of information

- What are the qualifications of the writer/speaker?
- What is the source of the information?
- How current is the information?
- How does this information compare with other information?

### Teaching/Learning Strategies

Have each student bring in at least one media message about HIV/AIDS to analyze for accuracy. Divide students into small groups for this activity. Discuss questions students should use to evaluate the accuracy of information (listed under "Content"). Allow each group time to report to the class its findings about the accuracy of all the group's media messages.

Have students write and deliver to the class a one-minute public-service message concerning HIV disease. Evaluate the messages for accuracy. Display the messages around the room as well.

Have students watch the nightly news on TV, listen to radio news daily, or read the paper daily for a period of time and keep a log of the number of pieces of news related to HIV/AIDS and the type of information related. This activity will allow students the opportunity to compare news reports for accuracy.

## HIV/AIDS PREVENTION EDUCATION

Objective: 9.1 The student will explain the scope/impact of HIV infection and AIDS in Virginia and the United States.

This objective relates to: Health SOL 9.7, 9.6, 9.9; NHES 1, 2, 4, 5 & 7

### Content

State and national statistics concerning HIV infection

Impact of HIV/AIDS infection

- On families
  - Emotional stress
  - Financial stress
  - Isolation
- In schools
  - Changes in educational programs (e.g., Family Life Education, HIV/AIDS Prevention Education)
  - Children with HIV/AIDS in schools
- In the community
  - Numbers of people infected
  - Increase in infection in the teenage population
  - Publicity surrounding HIV/AIDS
  - Children and HIV/AIDS
- In sexual behavior
  - Frankness about sex and sexual behaviors
  - Loss of friends
  - Return of abstinence/monogamy
  - Modifications of sexual behaviors
- In business
  - HIV-infected workers
  - Loss of work time
  - Loss of jobs
  - Medical insurance

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### Teaching/Learning Strategies

Obtain from the local health department the most recent figures on the number of HIV/AIDS cases in Virginia and the U.S. Have students research and compare these recent numbers with past figures to illustrate the growth of HIV/AIDS in Virginia and the U.S. This activity can be integrated with math class by having students graph the statistical information they find.

With students, brainstorm ways HIV/AIDS has impacted lives today. Write the acronyms HIV/AIDS in a circle on the chalkboard. Then draw a "mind map" with circles branching off the original circle. Each circle will represent an area of life affected by HIV/AIDS. Write students' responses in each circle and discuss specific changes which have occurred within each area of life affected.

Divide students into small groups called "Fact Finders." Ask each group to choose one of the areas of life impacted by HIV/AIDS infection, do further research on the topic, and present their findings to the class. Encourage students to use the most current information possible-- newspaper or magazine articles, recent laws, personal interviews, etc.

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## HIV/AIDS PREVENTION EDUCATION

Objective: 9.1 continued

### Content

- Disability pay
- Employee fears
- In courts of law
  - Lawsuits from people infected by others
  - Loss of child custody
  - Laws protecting persons with HIV/AIDS
  - Insurance coverage for those infected with HIV
  - Testing programs
  - Discrimination
  - Lawsuits and laws protecting health-care workers
- In the military
  - Medical care
  - Effect on manpower availability
  - Effect on soldier and unit morale
  - Effect on overall combat readiness
- In federal, state, and local governments
  - Money spent on programs to combat HIV and assist HIV-infected persons/families
  - Loss of tax revenues from persons with HIV/AIDS
  - Policy development/new laws
- In public health
  - Cost of treatment sites and care
  - Drug control programs
  - Stress on health-care workers
  - Global mobilization against HIV/AIDS
  - Refusal of health-care workers to care for persons with HIV/AIDS
- Testing

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### Teaching/Learning Strategies

For a period of time (2-4 weeks), have students clip newspaper or magazine articles about HIV/AIDS. Display these on a bulletin board and discuss the topics they cover.

If allowed by your school division, have a person with HIV/AIDS (preferably in his or her 20s) speak to the class. This first-hand commentary on what it is like to live with HIV/AIDS may put things into perspective for the students.

## HIV/AIDS PREVENTION EDUCATION

Objective: 9.1 continued

### Content

### Teaching/Learning Strategies

- Money
  - Tracking statistics about HIV/AIDS
  - Recommending policy concerning HIV/AIDS
- In science and medicine
  - Research
  - Testing
  - Adoption of universal precautions by hospitals/emergency medical services/public safety personnel
  - Fewer physicians pursuing careers in high-risk specialty areas of medicine such as surgery, dentistry, and obstetrics
  - According to federal law (COBRA) refusal to treat HIV-infected patients in many emergency rooms is illegal

HIV may become one of the widespread, expensive, and deadly diseases of modern times (along with cardiovascular disease and cancer.)

## HIV/AIDS PREVENTION EDUCATION

Objective: 9.2 The student will differentiate between facts and myths associated with HIV/AIDS.

This objective relates to: Health SOL 9.6, 9.7; NHES 1, 2, 3 & 5

### Content

Definitions of terms

--Fact--a statement that can be proven true

--Myth--a widely accepted belief that is unrealistic and unfounded

Distinguishing statements about HIV/AIDS as either myths or facts

Decision-making based on recognition of facts and myths

### Teaching/Learning Strategies

Distinguish between the terms fact and myth and provide examples of each.

Have students brainstorm any statements they already know or have heard about HIV/AIDS. Write these statements on the chalkboard, chart paper, or an overhead transparency and ask students to classify them as fact or myth.

Be sure the statements listed include most of the following:

- You cannot catch HIV by sitting next to an infected person. (fact)
- There is a vaccine on the market to prevent HIV. (myth)
- Women cannot transmit HIV. (myth)
- Not having sex is one way to prevent the transmission of HIV. (fact)
- People can look and feel good and still transmit HIV. (fact)
- Everyone infected with HIV has developed AIDS. (myth)
- A person can get HIV from donating blood to a blood bank. (myth)
- Most children with HIV/AIDS got it from an infected mother. (fact)
- People who inject drugs and share needles can get HIV. (fact)
- HIV/AIDS is a gay disease. (myth)
- HIV/AIDS can't happen to me. (myth)
- A person worried about being infected with HIV can be tested for the antibodies and know if he or she has the disease. (fact)

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## HIV/AIDS PREVENTION EDUCATION

Objective: 9.2 continued

### Content

### Teaching/Learning Strategies

- A person can become infected with HIV by using public bathrooms. (myth)
- No one has become infected through saliva. (fact)
- HIV damages the immune system. (fact)
- A person can make choices that protect him or her from becoming infected with HIV. (fact)
- People who have HIV/AIDS have damaged immune systems. (fact)
- Going to school with someone with HIV is dangerous. (myth)
- Mosquitoes can spread HIV. (myth)
- You can get HIV from sharing food. (myth)
- Babies cannot have HIV/AIDS. (myth)
- AIDS and HIV infection are the same thing. (myth)
- You can get HIV by swimming in pools. (myth)
- People who don't know they are infected with HIV can spread the virus without knowing it. (fact)

Make sure you dispel any misconceptions students may have about the facts and myths concerning HIV/AIDS through lectures, media presentations, fact sheets, etc.

Have students in their journals or notebooks write responses to the following situation:

- A good friend of yours has just returned from the hospital and has been diagnosed as having HIV/AIDS. You have been invited to dinner at his or her house. Will you go? Students should write their concerns, discuss the facts, and explain their decisions.

## HIV/AIDS PREVENTION EDUCATION

Objective: 9.3 The student will explain the most effective methods of preventing the spread HIV/AIDS.

This objective relates to: FLE 9.6, 9.12; Health SOL 9.7, 9.9; NHES 1, 2, 5, 6 & 7

### Content

Risky behaviors that put a person in danger of HIV/AIDS

- Having sexual intercourse (oral, anal, vaginal) with an infected partner/partners
- Having multiple sexual partners
- Having sexual contact with a prostitute
- Using injectable drugs
- Sharing needles (drug, tattoo, body-piercing)
- Using alcohol and other drugs
- Sharing blood (in "blood brother" rituals and by giving first aid without gloves)

"Safe" behaviors

- Abstaining from sexual intercourse (oral, anal, vaginal)
- Abstaining from injectable drug use
- Maintaining a monogamous sexual relationship with an uninfected person
- Avoiding needle-sharing (tattoo, body-piercing, drug, including steroid)
- Avoiding drug and alcohol use (it can impair judgment and lead to risky behaviors)

"Safer" behaviors

- Using a lubricated latex condom with a spermicide
- Limiting the number of sexual partners

### Teaching/Learning Strategies

Ask students to recall from objective 9.2 the ways HIV/AIDS is transmitted:

- From sexual intercourse (oral, anal, vaginal)
- From blood-to-blood contact (including sharing injectable drug equipment or "works," giving first aid without gloves, "blood brother" rituals)
- From an infected mother to her unborn child (However, recent studies show promising results. If pregnant mothers are tested for the HIV antibodies and she receives treatment throughout pregnancy, there is strong likelihood the baby will not be HIV-infected.)

Have students participate in a class activity to help them understand how HIV may be transmitted sexually. Tell one student (without anyone else's knowing) that he/she is the "special one" (the HIV-infected) for this activity. Ask students to stand and shake hands with another student. Then, have each student shake hands with another person. After the entire room is standing and everyone has shaken hands, tell students that now they will be able to see that when a person has had sex with someone, he/she has also had sex with each of that person's sexual partners. Ask the "special one" to identify himself/herself.

If students shook hands with the "special one," ask them to raise their hands. Keep the hands up. If other classmates shook hands with any of these persons, they are to raise their hands. Students can see how easy it is to spread HIV.

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## HIV/AIDS PREVENTION EDUCATION

Objective: 9.3 continued

### Content

### Teaching/Learning Strategies

This concept can also be shown by having a student break off and eat a part of food and pass it on with each student breaking off and eating a piece of food in turn.

NOTE: This activity may be perceived as “too juvenile.” Adjust according to your students.

Write the word PREVENTION vertically on the board and have students work in groups of three to prepare a list of AIDS prevention guidelines that begin with each letter of the word (P, R, E, etc.). These methods address the individual's responsibility in the prevention of HIV transmission (e.g., P= Practice abstinence; N= No sex, no drugs!). Compile students' lists of prevention tips into one set of guidelines for all students in school. Have each group write one of its methods on the board next to one of the letters in the word "Prevention."

You may wish to distribute this list school-wide on flyers, bulletin boards, posters, newspapers, etc. Check with your principal first.

Emphasize that using a condom does not make sex "safe." Condoms may make sex "safer," but the only "100% safe" behavior is abstinence from sexual intercourse or choosing sexual behaviors that do not exchange semen, vaginal fluids, or blood.

## HIV/AIDS PREVENTION EDUCATION

Objective: 9.4 The student will examine legal and ethical issues related to HIV/AIDS.

This objective relates to: Health SOL 9.3, 9.7, 9.9, 10.17; NHES 2, 4 & 7

### Content

The "right to know" vs. confidentiality

- Should people infected with HIV be identified by some visible sign?
- Should workers or school children infected with HIV be identified?

Testing

- Should teachers and school cafeteria workers be required to take a test for HIV?
- Should there be compulsory HIV testing for everyone? for patients undergoing surgery? for marital applicants?

Discrimination

- How should people with HIV/AIDS be treated?
- Should a student with HIV infection or AIDS be allowed in school?
- Should persons with HIV or AIDS be banned from public events, jobs, public services (buses, food services)?
- Should those infected with HIV be quarantined in some way to prevent the spread of disease?
- Should a teacher with HIV/AIDS be removed from the classroom?

Putting others at risk

- Should a person infected with HIV be punished for knowingly and deliberately exposing others to the virus by having unprotected sexual intercourse?
- Should a doctor (dentist, etc.) be forced to terminate his or her practice if he or she becomes infected with HIV?

### Teaching/Learning Strategies

Share some current events articles you have collected to make students aware of ethical issues that have arisen as a result of the HIV/AIDS crisis.

Over a period of time, have students read current articles in newspapers and magazines to add to the list of ethical issues you began and to discuss with the class.

Have each student research and debate one of the issues named in the "Content" section or other issues that may arise in the course of research and discussion. In the debate format, one side (the affirmative) presents a case in favor of a proposition, and one side (the negative) presents its case against a proposal stated in affirmative terms. For example: Resolved: A student with HIV/AIDS should be banned from school. The "burden of proof" is on the affirmative team. The negative team raises questions and makes arguments to rebut those of the affirmative team.

There are several formats that can be used in the debate. These are found in most English or speech textbooks. This activity would be a good one for integrating HIV/AIDS prevention education into the English curriculum.

See the Appendices for the Code of Virginia §32.1-36.1

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## **HIV/AIDS PREVENTION EDUCATION**

Objective: 9.4 continued

### **Content**

### **Teaching/Learning Strategies**

- Should a person infected with HIV be required to tell his or her dentist/doctor before being treated?
- Should a health-care worker be allowed to refuse to care for an HIV positive patient? What if the health-care worker is pregnant?
- Should a patient be required to tell his health-care worker if he or she is HIV positive?

## HIV/AIDS PREVENTION EDUCATION

Objective: 9.5 The student will discuss attitudes, risks, and behaviors of peers regarding HIV/AIDS issues.

This objective relates to: Health SOL 9.3, 9.7, 9.9, 10.17; NHES 1, 2, 3 & 5

### Content

Common attitudes of peers about HIV/AIDS

- HIV/AIDS is not going to happen to me.
- One day they'll find a cure for HIV/AIDS.
- HIV/AIDS is a gay disease.
- HIV/AIDS affects mainly ethnic groups.
- HIV/AIDS is going to kill us all.

Risky behaviors that make a person susceptible to HIV/AIDS

- Having sexual intercourse (oral, anal, vaginal)
- Having multiple sexual partners
- Sharing needles (injectable drug, steroid, tattoo, and body-piercing needles)
- Exchanging blood (becoming "blood brothers" or giving first aid without gloves)
- Using alcohol and other drugs (may impair judgment)

General concept of risk/risk-taking behaviors

- Physical risks--involve the potential for negative health outcomes (e.g., illness, broken bones, death, etc.)
- Social risks--involve the potential for social consequence (e.g., being jailed for a crime, fined, etc.)
- Emotional risks--could result in hurt feelings, embarrassment, etc.

Personal assessment of risk-taking behaviors (use as positive alternatives to negative risk-taking behaviors)

(continued on next page)

### Teaching/Learning Strategies

Have each student make a list of questions and conduct an informal survey of 5-10 peers to determine their attitudes about HIV/AIDS.

The survey can involve simple questions, such as "What do you think about HIV/AIDS?" or "Do you think you are at risk of getting HIV/AIDS?" Students should record the responses (no names attached to the responses) and share them in class. Compile a list of responses on the board. Have the class compile a fact sheet for their peers based on the results of their surveys. Emphasis should be on correcting misinformation the students discovered from their surveys. NOTE: The results could be disclosed in a school wide assembly with a fact sheet emphasizing corrected misinformation.

Discuss with students the concept of risk and risk-taking behavior. Explain that all of life involves decisions about taking risks. There are varying degrees of risk. The risks in this objective involve physical, social, and emotional consequences. Some risks are positive; others are negative. Tell students that there are generally three ways in which people decide whether or not to engage in risk-taking behavior. They actively seek out the behavior, actively avoid the behavior, or accept or go along with the behavior under certain circumstances.

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## HIV/AIDS PREVENTION EDUCATION

Objective: 9.5 continued

### Content

- Feeling good about (having self-esteem) and taking responsibility for oneself
- Using the decision-making model (to decide how to behave)
- Knowing refusal skills (to act on decisions and to fight peer pressure)
- Knowing coping behaviors (to respond appropriately in stressful situations)

### Teaching/Learning Strategies

Engage students in an activity to assess what kind of risk-taker they are. Label three locations in the classroom with the signs "SEEK," "AVOID," and "ACCEPT." Read statements of behaviors to students and ask them to move to the sign that most accurately reflects their response to each of the behaviors being described. After each statement is read and students have moved to their respective places, ask for volunteers to comment on why they chose to stand in that spot. Some possible behaviors to read:

- Riding in a car without a seatbelt
- Driving a car without insurance
- Asking someone out on a blind date
- Shoplifting a piece of candy from a store
- Going to a party where you don't know anyone but the host
- Having sexual intercourse without a condom
- French or deep kissing
- Running for class office
- Trying out for a varsity team
- Smoking to fit in with peers
- Making the honor roll

Discuss the process of deciding about taking risks, especially examining the consequences of risk-taking situations. Using a situation relevant to the students' lives, review the steps in decision-making:

- What's the problem?
- What information do I have?
- What information do I need?
- What are my alternatives and the possible consequences of each?
- What is my decision?

Discuss and model ways to refuse certain risk-taking behaviors without losing friends.

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## HIV/AIDS PREVENTION EDUCATION

Objective: 9.5 continued

### Content

### Teaching/Learning Strategies

- Find out if you are risking getting into trouble by asking questions. (What are we going to do? Who will be there?)
- Tell the other person what kind of trouble you are risking.
- Tell the other person what you stand to lose (the consequences).
- Suggest something else to do that is not so risky.
- Leave the scene, but invite the other person to join you if he/she changes his/her mind.

Review information in objective 8.4 on self-esteem and coping with stress. These strategies will help students in dealing positively with negative risk-taking situations.

Engage students in brainstorming some risky behaviors of teens that could be considered risky behaviors for HIV/AIDS. Write these on cards. Arrange students in pairs. Have one partner, the "pusher," draw a card and try to get the other partner, the "resister," involved in the risky situation listed on the card. The "resister" will refuse the behavior by using the decision-making model and refusal skills.

Examples of risky behaviors:

- Going steady
- Hanging around with older friends who are sexually active
- Having friends of the opposite sex in your home when your parents are away
- Going to unchaperoned parties
- Getting drunk or high
- Heavy petting and kissing
- "Hiding out" at parties

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## HIV/AIDS PREVENTION EDUCATION

Objective: 9.5 continued

### Content

### Teaching/Learning Strategies

- "Teasing" and testing
- Using media and books which arouse sexual feelings
- Following behaviors of poor adult models (Adults are not always right!)

If your school has a "peer facilitator" or "peer counselor" program, you might wish to have these trained students use their skills in helping other students think about their attitudes and feelings, explore alternatives to situations, and make responsible decisions.

Ask students to write in their journals or notebooks about the following:

- (a) Ways my life has been affected or changed because of HIV/AIDS
- (b) Three fears or concerns I have about HIV/AIDS
- (c) My idea about who gets HIV/AIDS
- (d) How I can avoid getting HIV/AIDS
- (e) A decision I made this week. (Discuss how you made it and evaluate the decision.)

