

HIV/AIDS PREVENTION EDUCATION

Objective: 9.6 The student will identify the impact of HIV infection on people with HIV/AIDS.

This objective relates to: Health SOL 9.9, 10.6, 10.26; HIV/AIDS 9.1, 10.5; NHES 3 & 7

Content

Consequences of being infected with HIV/AIDS

- Inability to have unprotected sexual intercourse without giving the disease to a partner
- Inability to have children without risking the chance a child will be born with HIV
- Difficulty pursuing long-term personal relationships because others may be cautious about becoming emotionally involved with an HIV-positive person
- Inability to complete career goals due to illness and death or financial constraints
- Isolation from friends and family due to their fear of acquiring HIV
- Crisis, disruption, and disorganization in thinking and daily habits
- Loss of financial support (due to inability to work)
- Physical debility due to fatigue, chronic diarrhea, fever, loss of appetite, etc.,
- Loss of self-esteem
- Self-condemnation
- "Roller coaster" effect on emotions (extreme highs and lows)
- High cost of treatment
- Discrimination (in health insurance, life insurance, employment, housing, organ and blood donation, joining Armed Services, Peace Corps, Foreign Service)
- Emotional/mental health problems.

Emphasis is on seriousness of the consequences of HIV/AIDS and that the choices/behaviors of the present will always have an impact on the future.

Teaching/Learning Strategies

Have each student write in his/her journal or notebook the following:

- (a) A personal item you value dearly
- (b) A personal or physical characteristic of which you feel proud
- (c) Your favorite physical activity
- (d) A goal in your life
- (e) A secret you have told only a few people or no one at all
- (f) A friend or loved one whose support means a lot to you

Now, have each student imagine and write how he or she would feel if:

- (a) You lost the personal item you value because you lost all your money
- (b) You had an accident and lost the physical characteristic of which you are proud
- (c) You couldn't do your favorite physical activity because of an accident
- (d) You couldn't achieve your goal because of the loss of money, the loss of your physical attribute, or your inability to perform a favorite physical activity
- (e) Everyone found out your special secret
- (f) You lost your friend or loved one because of the changes named above (activity from AIDS and the IV Drug User published by the National Institute on Drug Abuse)

The above exercise will give students a sense of how it feels to lose everything when a person finds out he or she has HIV/AIDS.

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HIV/AIDS PREVENTION EDUCATION

Objective: 9.6 continued

Content

Teaching/Learning Strategies

Encourage students for extra credit to find in the library or bookstore a book, newspaper article, or magazine article which contains first-hand accounts of what it's like to live with HIV/AIDS by people who have the disease. Allow students time to share with the class the information they found.

Invite a person from a local HIV/AIDS organization to talk with the class about living with HIV infection or the disease AIDS. Follow the policy of your local school division regarding such speakers.

HIV/AIDS PREVENTION EDUCATION

Objective: 9.7 The student will survey the community for additional sources of information about HIV/AIDS and for the availability of support for people with HIV/AIDS.

This objective relates to: Health SOL 9.9; HIV/AIDS 10.6; NHES 3 & 7

Content

Counseling services
--Mental health
--Teenage pregnancy prevention
--Family planning

Self-help groups

Social service support

Testing programs

Substance abuse prevention/treatment programs/support groups

Mental health services

Religious organizations

Hotlines
--Virginia Department of Health (VDH)
1-800-533-4148 (VOICE/TTD Accessible)
1-800-322-7432 (Spanish-speaking)
--U.S. Public Health Service 1-800-342-AIDS

Medical/hospital treatment

March of Dimes

American Red Cross

AIDS Service Organizations (ASO)
--AIDS Council of Western Virginia
(Roanoke)
--AIDS Support Groups, Inc. (Charlottesville)
--Central Virginia AIDS Services and
Education (Richmond)
--Northern Virginia AIDS Project (Arlington)
*(Contact VDH Hotline for current ASO list)

Teaching/Learning Strategies

Assign small groups of students to research and report to the class about at least one community resource that provides support for people with HIV/AIDS and the kind of support the organization provides.

If possible, have each group interview a person in the agency and/or obtain any literature distributed by the organization as part of the group's research.

Have each group make a poster advertising the agency researched and displaying any relevant pamphlets, etc., from that agency. Display these in a prominent place the information on the poster should include the following:

- The group's name and address
- The telephone/hotline number
- The hours of operation
- A description of services available (information, treatment, counseling, referral, testing)
- Languages spoken
- Access for the disabled
- The cost for services
- The person to contact in the agency
- Other information

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HIV/AIDS PREVENTION EDUCATION

Objective: 9.7 continued

Content

Teaching/Learning Strategies

Health departments

AIDS consortiums *(Contact VDH for resource packet)

--Tidewater AIDS Crisis Taskforce (Norfolk and Peninsula) AIDS Service Organizations (ASO)

HIV/AIDS PREVENTION EDUCATION

Objective: 10.1 The student will know the basic information about sexually transmitted diseases including symptoms, transmission, and treatment.

This objective relates to: FLE 8.14, 9.12; Health SOL 9.6, 9.7; HIV/AIDS 9.3, 10.3, 11.2; NHES 1, 2 & 5

Content

Definition of sexually transmitted disease (STD, formerly called venereal disease)--a disease passed from person to person through intimate sexual contact.

HIV is a bloodborne disease passed through sexual contact and injectable drug use.

Types of STDs

- HIV
- Chlamydia (most prevalent bacterial pathogen in the U.S. today)
- Genital herpes
- Gonorrhea
- Syphilis
- Hepatitis B
- Genital warts (HPV or human papilloma virus)
- PID (pelvic inflammatory disease)

Transmission of STDs

- Pathogens (disease-causing germs) that die quickly when exposed to heat, light, and air are passed in body fluids through intimate sexual contact between an infected person to another person.
- STDs are not transmitted by casual contact (shaking hands, from door knobs, or in swimming pools).
- HIV and hepatitis B can be transmitted by receiving bloodborne pathogens from an infected person without any sexual contact.

General symptoms of STDs

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Teaching/Learning Strategies

Teach this objective prior to objective 10.3. That objective focuses on the behavior that will prevent/reduce the transmission of HIV/AIDS and other STDs.

To review facts about sexually transmitted diseases and HIV/AIDS, involve students in a game of STDs/AIDS Basketball. Have each student write down three questions concerning STDs or HIV/AIDS in varying degrees of difficulty from easy to hard. These will become 1-point, 2-point, and 3-point questions. It may be necessary for you to add questions in order to cover all the important facts. Divide the class into two teams. Ask a question of one team member at a time, taking turns within each team and alternating between teams. Give each student the choice of a 2-point or 3-point question (more difficult). Accept only one answer given in a reasonable time period (10 seconds). If the answer is correct, the player earns points for his or her team. If a player commits a "foul" by trying to help another player answer a question, the other team gets the opportunity to answer a "foul-shot" question worth one point. Determine the length of the game (time, number points scored, etc.) and keep score on chart paper or the chalkboard. If possible, obtain information sheets from a local STD clinic and involve students in an imaginary "walk through" of a clinic visit so

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HIV/AIDS PREVENTION EDUCATION

Objective: 10.1 continued

Content

- No symptoms for many people, yet they can transmit the diseases
- Discharges from the sex organs
- Pelvic pain, soreness (females)
- Genital itching
- Burning upon urination
- Skin changes (sores, rashes, bumps) around the genitals
- Symptoms that may be more specific of each STD
- HIV
 - No symptoms during most of the period of infectivity (asymptomatic)
 - Unexplained, persistent fatigue
 - Persistent fever
- AIDS
 - Loss of appetite
 - Unexplained weight loss of ten pounds or more
 - Persistent diarrhea
 - Night sweats
 - Swollen glands
 - Persistent cough or shortness of breath
 - Persistent infection
 - White spots in the mouth
- Chlamydia
 - Males
 - Painful urination
 - Watery discharge
 - Some have no symptoms
 - Females
 - Itching, burning
 - Discharge
 - Dull pelvic pain
 - Bleeding between periods
 - Most have no symptoms
- Genital herpes

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Teaching/Learning Strategies

that they will know what to expect if they ever have an STD and seek treatment. Encourage students to consult with their parents before visiting a clinic or doctor, but explain that the law permits minors to obtain confidential medical care for STDs without parental permission. However, if parents requests medical records of their child(ren), they will have access to all records. Many adolescents avoid healthcare due to fear of needles. Emphasize that many STDs may be treated with oral antibiotics and injections are usually not required. HIV also can be treated, but unlike chlamydia and gonorrhea cannot be cured.

Using textbooks, charts, audiovisuals, fact sheets, etc., review the symptoms and transmission of sexually transmitted diseases. This information is summarized under "Content."

Display in the room the toll-free hotline numbers that students may call for the latest information, the name of the nearest location for medical care, or just to talk to someone about STDs or HIV/AIDS.

- VD National Hotline 1-800-227-8922
- AIDS National Hotline 1-800-342-AIDS

Create "Dear Abby" letters concerning an STD situation. Have students write a reply to the letter. Then have students discuss their individual responses in small groups and decide on the best collective response to share with the entire class.

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HIV/AIDS PREVENTION EDUCATION

Objective: 10.1 continued

Content

- Painful sores on genitals that heal on their own in a few weeks but often reactivate later (1/3 do not)
- Itching and/or tingling prior to the onset of the sores
- Swollen glands, fever, aches, pains, discharges, tiredness
 - May be asymptomatic (no symptoms)
- Gonorrhea ("clap")
 - Males
 - 3-8 days after contact, some have a burning discharge from the penis
 - Many are asymptomatic
 - Females
 - No symptoms since infection is of the cervix, not the vagina
- Syphilis
 - 1st stage: 10-90 days after contact a chancre appears (painless sore that goes away)
 - 2nd stage: 2-6 months after contact, a tired feeling, fever, sore throat, loss of hair, non-itchy rash appears, then disappears
 - 3rd stage: after 2 years, possible damage to central nervous system, insanity, even death
- Hepatitis B
 - Flu-like symptoms
 - Fever, nausea, chills, loss of appetite
 - Dark-colored urine
 - Abdominal pain
 - Jaundice (skin and whites of eyes turn yellow)
 - May be asymptomatic
- Genital warts (HPV or human papilloma virus)
 - Cauliflower-like bumps on penis or vaginal area or anus
 - Subclinical (not visible) warts may exist and may be transmitted

Teaching/Learning Strategies

Have small groups of two to three students produce TV public-service announcements about STDs. The group will research a particular disease, write a script, create some type of visual, and if possible, tape the message using a video camera. Have each group present its message to the class either directly or by videotape.

Alternately, you may wish to have the class produce a slide cassette educational program concerning STDs. Students will write the script, take pictures, and record the audio.

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HIV/AIDS PREVENTION EDUCATION

Objective: 10.1 continued

Content	Teaching/Learning Strategies
--PID (pelvic inflammatory disease)	
--Pelvic pain	
--Chills	
--Fever	
--Irregular menstrual periods	
--Lower back pain	
Treatment	
--HIV/AIDS	
--No cure	
--Antiretrovirals slow virus from weakening the immune system	
--Preventive treatments for opportunistic diseases	
--Drugs and other therapies for opportunistic diseases as they occur	
--Chlamydia	
--Can be cured	
--Oral antibiotics	
--Genital herpes	
--No cure	
--Virus becomes dormant, only to possibly activate again when triggered by stress (yet many people experience no recurrences)	
--Pain relieved by drug Acyclovir	
--Gonorrhea	
--Can be cured	
--Oral antibiotics	
--Syphilis	
--Can be cured	
--Penicillin injection (before 3rd stage)	
--Other antibiotics	
--Hepatitis B	
--Cannot be cured, can be prevented with vaccine	
--Resolves spontaneously but damage may remain	
--Can result in severe illness, rarely death	
--Must avoid alcohol	

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HIV/AIDS PREVENTION EDUCATION

Objective: 10.1 continued

Content

Teaching/Learning Strategies

- Rest, proper nutrition, and avoidance of drugs
- Genital warts (HPV)
 - Cannot be cured
- Electro surgery, freezing, or surgery to remove growths
 - Can reoccur with further exposure
- Associated with cervical cancer in females later
- PID (pelvic inflammatory disease)
 - Can be cured
 - Oral antibiotics (unless there is an associated fever)
 - Can cause sterility due to development of scar tissue on Fallopian tubes

Some serious complications of STDs

- Emotional effects (fear, shame, guilt)
- Affects newborns if mother infected
- Tubal (ectopic) pregnancy
- Risk of sterility (inability to reproduce)
- Death

What to do if you think you have an STD

- Stop having sex.
- Call for an appointment with an STD clinic at the health department or a health professional. (Law permits minors to obtain confidential STDs medical care without parental permission.)
- Follow doctor's instructions.
- Notify recent sex partner(s) of a positive diagnosis and help him or her (them) get treatment; or tell the counselor at the clinic, who will contact the partner(s) and maintain confidentiality.
- Schedule a follow-up visit to confirm the cure before resuming sexual activity.

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HIV/AIDS PREVENTION EDUCATION

Objective: 10.1 continued

Content

Teaching/Learning Strategies

--To prevent future STDs, practice sexual abstinence or use latex condoms lubricated with spermicides.

Reasons people infected with STDs do not seek prompt medical care or tell their sex partners

--They are asymptomatic (have no symptoms)

--Discrimination

--Fear

--Guilt

--Ignorance

--Misinformation

--No money

--Shame

Ways to encourage people infected with an STD to seek help and tell sex partners

--Advertising (media)

--Awareness

--Education

--Emphasize moral responsibility

HIV/AIDS PREVENTION EDUCATION

Objective: 10.2 The student will review the effects of HIV/AIDS on the immune system.

This objective relates to: Health SOL 9.6, 9.7, 10.6; NHES 1 & 2

Content

The body's natural defenses against disease

- Skin
- Mucous membrane
- Mucus
- Nasal hairs
- Cilia (eyelashes)
- Tears
- Stomach acids
- White blood cells
- Antibodies

How a healthy immune system works

- White blood cells called T-helper cells signal other white blood cells (called T-killer cells) to look for anything that could harm the body.
- T-helper cells control the release of antibodies into the bloodstream.
- Each kind of antibody fights one certain pathogen by attaching to it and disarming it.
- Other white blood cells (phagocytes) destroy pathogens.
- T-killer cells travel through the body and check it regularly
- If T-killer cells find a cancer cell or a cell infected with a virus, they destroy the cell.
- T-killer cells also destroy certain microorganisms (protozoans and fungi) and thus keep their numbers in the body small.

How AIDS weakens the immune system

- The AIDS virus enters the blood.
- The AIDS virus attaches to and then enters the T-helper cell.
- The AIDS virus becomes part of the T-helper cell's genetic code.

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Teaching/Learning Strategies

Review the body's natural defenses against disease. These were discussed in previous objectives 6.2 and 8.2. Ask students to brainstorm body parts/substances that help protect the body from the entrance of disease-causing agents.

Illustrate the body's defense system by drawing a body that highlights the skin, hair, etc. as outside protection from infection. Also, draw white blood cells inside the body. These are the components inside the body that provide protection from infection. Show on the drawing how a break or opening in the skin can allow HIV to enter the body.

Continue the diagram by illustrating the invaders (HIV) attaching to and entering T-helper cells (the defenders), destroying them, etc.

HIV/AIDS PREVENTION EDUCATION

Objective: 10.2 continued

Content

Teaching/Learning Strategies

- The HIV directs the T-helper cell to make hundreds of new AIDS viruses, and the T-killer cell is destroyed.
 - New viruses attack other T-helper cells.
 - T-helper cells cannot signal for the release of antibodies or the release of T-killer cells to check the body for pathogens.
 - The immune system breaks down because the more T-helper cells that are destroyed, the fewer T-killer cells are sent out.
 - Cancer cells are no longer killed, and they reproduce. Therefore, rare cancers like Kaposi's sarcoma can develop.
- Microorganisms that the body usually lives with in harmony increase in number and can become harmful. For example, PCP is caused by pneumonia carinii protozoa, which are normally held in control but which reproduce quickly when the immune system breaks down. The weakened immune system of a person infected with HIV becomes susceptible to these and other opportunistic diseases. Death usually results from the body's inability to combat these diseases.

HIV/AIDS PREVENTION EDUCATION

Objective: 10.3 The student will explain behavior that will prevent/reduce the transmission of HIV/AIDS and other sexually transmitted diseases.

This objective relates to: FLE 8.14, 9.12; Health SOL 9.6, 9.7, 9.9; NHES 2, 5, 6 & 7

Content

Behaviors to prevent/reduce HIV/AIDS and other STDs

- Abstinence from sexual intercourse (oral, anal, vaginal)
- Avoidance of injectable drug use
- Avoidance of needle-sharing (drug, steroid, tattoo, and ear-piercing needles)
- Avoidance of blood-to-blood contact
 - No "blood brother" rituals
 - Wearing protective gloves and masks when working with blood or when giving first aid
 - Insisting that your own dentist wear gloves before your examination
- Mutual monogamy with an uninfected partner
- Prevention of pregnancy (to prevent transmission of HIV from infected mothers to their unborn babies)
- Prevention of "date rape"
- Using latex condoms lubricated with a spermicide (possibly nonoxynol-9) during sexual intercourse

Ways to change high-risk behaviors to behaviors that are less risky

- Using the decision-making model
- Resisting peer pressure
- Role-playing

Teaching/Learning Strategies

After studying objective 10.1, review high-risk behaviors for contracting HIV/AIDS and other sexually transmitted diseases.

Emphasize that there is no such thing as "safe sex." The only sure way to prevent the transmission of HIV/AIDS by sexual contact is to practice abstinence. Condoms may be a "safer" way to have sex, but they do not make sex "safe."

Emphasize that all decisions about whether to have sex, use drugs, etc., involve personal choice and that every person has the right to make his/her choices. However, with this right comes responsibility. A person is responsible for his/her own behavior and the consequences that behavior may have for himself/herself and others. Therefore, when making any decision, it is best to follow a decision-making process, not just leave decisions to chance. Such a process involves asking oneself certain questions about a problem/situation:

- What is the problem/situation?
- What are the available choices?
- What are the possible consequences of each choice, both positive and negative?
- What are the available resources? (Who can help?)
- What is my decision?

Emphasize that when an individual makes a decision not to have sex, not to use drugs, alcohol, etc., it is important to be able to convey a clear message of "no."

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HIV/AIDS PREVENTION EDUCATION

Objective: 10.3 continued

Content

Teaching/Learning Strategies

Sending a clear message involves

- Recognizing one's own feelings, thoughts and desired outcomes (what you want to happen) in a situation
- Choosing words which accurately convey the intended message
- Using appropriate tone, posture, gestures, eye contact (body language)
- Following through with appropriate actions

Sometimes there can be a difference between what one wants to say and what one actually says. Then a situation of mixed messages occurs. This is sometimes the case when "date rape" occurs.

Divide students into groups to practice skills for saying "no." Hopefully this activity will give students skills for refusing to participate in behaviors that put them at risk for HIV/AIDS and STDs. Provide situations for students to role-play. Ask them to identify the issues in each situation.

- "We've been going together for a year. My boyfriend/girlfriend wants me to have sex (intercourse) with him/her. I love him/ her, and I don't want to lose him/her, but I'm not sure this is what I want to do."
- "A lot of my friends are using drugs. I don't want to lose my friends, but I'm scared of drugs."
- "My boyfriend/girlfriend always wants to end our date with a heavy 'petting' session. I don't want to become any more physically involved than we have been, but I sense he/she does. We spend a lot of time alone together."

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HIV/AIDS PREVENTION EDUCATION

Objective: 10.3 continued

Content

Teaching/Learning Strategies

Have students present skits illustrating the issues involved to the class without presenting a solution to the situation. Stop after each skit and ask the audience to name (and you list on the board) possible ways to say "no"--which action and words will send a clear message, yet keep friends. For example:

- Honestly convey thoughts, feelings, desired outcomes (e.g., "I still like you and want to go out with you, but I do not feel comfortable having sex"). This opens the door for further communication.
- Make an excuse (e.g., "I can't go out tonight"); however, excuses will only work in the short run, not in long-term relationships.
- Avoid situations in which the behavior can occur (e.g., "partying" with friends when parents are not at home).

After the students have offered their collective suggestions, have the groups select the ones they wish to use to finish their skits. Have them finish acting out the solution to their skit.

Ask students to brainstorm things teenagers can do to change high-risk behaviors to behaviors that are less risky. For example:

- Do fun things in groups.
- Hang around with teens your own age.
- Find friends who accept you as you are and don't push.
- Stay sober.
- Keep your clothes on.

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HIV/AIDS PREVENTION EDUCATION

Objective: 10.3 continued

Content

Teaching/Learning Strategies

- Learn to say "no" when you need to.
- Do something with your parents at least once a week.
- Save single dating until the junior or senior year.
- Work and earn money.
- Get involved in hobbies.
- Use your talents and get positive strokes that way.

Have students, working in small groups (two to three students each), produce an "AIDS Smart" public-service spot that will focus on the behavior of teens that will prevent/reduce the transmission of AIDS. This activity can be done in conjunction with SOL 10.1 If possible, have students tape their "spots" and show them all to the class.

