

Final Draft

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HIV/AIDS Education Prevention Curriculum

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INTRODUCTION

AIDS (acquired immune deficiency syndrome) was first diagnosed in the United States in 1981. AIDS is caused by the human immunodeficiency virus (HIV) transmitted primarily through sexual intercourse and the sharing of needles in injectable drug use and being born to an HIV-infected woman. It is possible for anyone to contract HIV infection and the disease AIDS--males, females, bisexuals, heterosexuals, homosexuals, old people, and young people. Young people are the group most at risk of contracting and transmitting the disease because of their sexual behavior and illegal and legal drug-use patterns, steroid use, body piercing, and tattoos.

The increase of HIV infection and AIDS cases since 1981 is startling. At present, HIV/AIDS is usually a fatal disease and has no FDA-approved vaccine or cure. Therefore, the disease has become a threat to public health not just in America, but in the entire world. Because there is no cure for HIV infection or AIDS, the public health focus is on prevention. Prevention requires the education of everyone, especially preadolescents, teenagers, and young adults. Educators must reach students before they develop risky health habits that will make them susceptible to the human immunodeficiency virus that causes AIDS.

The purpose of this guide is to assist teachers in educating young people to develop healthy, mature, and responsible attitudes toward sexuality, drug use, basic good hygiene, and to develop an awareness of HIV infection and the AIDS epidemic so that young people do not become infected with the disease. The knowledge and skills gained from this curriculum, combined with values taught in the home, will enable and empower young people to lead healthy lives and make responsible choices that will protect them from HIV infection.

HIV/AIDS prevention education should be taught as part of a comprehensive approach to health education in grades K-12. Such an approach encompasses a sequential curriculum that develops knowledge, attitudes, and skills necessary for positive health behavior. Students should discuss HIV/AIDS within the curriculum setting after they have had an opportunity to gain knowledge of human growth and development, sexuality, behaviors that promote health and prevent disease, and the dangers of alcohol and other drug use. The comprehensive health curriculum should explore attitudes about responsible sexual behavior and drug abuse as well. Students should also develop and practice skills in communication, socialization, conflict resolution, stress management, self-concept enhancement, problem-solving, decision making, resistance/refusal to negative peer pressure, and response to emergency situations in the school setting. These skills need to be practiced through varied activities, and students need to understand how the skills may be applied in different situations. All of the aspects of a comprehensive health education program are necessary to help prevent HIV infection and AIDS.

The intent of this curriculum guide is to provide a document that curriculum planners and program coordinators in Virginia's public schools and in agencies serving youth outside the public school may use to organize HIV/AIDS educational activities.

The objectives, content, and teaching/learning activities are intended to be developmentally appropriate, sequential, and comprehensive. Many of these objectives are already included in health education, and family life education. It is appropriate that HIV/AIDS information be infused into the established curricula areas to ensure a comprehensive approach to health education. However, if HIV/AIDS prevention education is not included in these curricula at the local level, information included within this curriculum guide should be offered independently and according to the guidelines of the local division.

To assist with the implementation of this curriculum or the infusion of this curriculum into existing curricula, planners and coordinators are encouraged to take advantage of the HIV/AIDS in-service training programs offered by the comprehensive health education teacher-training institutions throughout the state. A list of these institutions can be found in the Resources Section of this guide.

HOW TO USE THIS GUIDE

SCOPE AND SEQUENCE

The scope of this curriculum includes four basic content areas regarding HIV/AIDS:

1. HIV Infection and the Disease AIDS
2. HIV/AIDS Is Preventable
3. HIV/AIDS Affects Everyone
4. HIV/AIDS Help Is Available

The objectives, content, and teaching/learning strategies are intended to be developmentally appropriate, sequential, and comprehensive. Refer to the Scope and Sequence Chart in the following section for an overview of the entire curriculum.

CONCEPTS

The concepts taught in each of the content areas are as follows:

1. There are some diseases that are infectious (communicable). HIV/AIDS is one of these diseases. It is not transmitted by normal day-to-day casual contact, but it can be transferred from person to person. Anyone can become infected with the HIV that causes AIDS if he or she practices high-risk behaviors such as sexual intercourse, sharing equipment used for injectable drugs, sharing tattoo or body-piercing needles, exchanging blood, and through birth from an HIV infected woman.

2. There are decision-making and refusal skills to practice and behaviors to learn that will lead to a healthful lifestyle. There are also specific methods of preventing HIV/AIDS including avoiding high-risk behaviors.
3. There are mental, emotional, social, and economic implications of HIV/AIDS that affect everyone.
4. There are national, state, and community resources for HIV/AIDS information, help, and counseling.
5. How to practice good basic hygiene:
 - a. washing hands
 - b. if it is wet, do not touch
 - c. tell an adult if someone is bleeding
 - d. do not share eating utensils or drinking cups
 - e. no spitting

OBJECTIVES

The objectives offer a comprehensive approach to teaching HIV/AIDS prevention education. The objectives are also designed to build usable skills in students, not just to convey information about HIV/AIDS. Skills addressed for preventing the spread of HIV/AIDS are skills in

- Basic hygiene
- Developing and enhancing self-esteem
- Decision-making
- Communicating well with others
- Being assertive
- Refusal/resisting peer pressure
- Coping with stress without drugs, alcohol, or desperate attempts at peer acceptance

These skills should be practiced repeatedly. Students need to know how to apply the skills in different situations. The varied teaching/learning strategies throughout the curriculum will help the educator plan meaningful lessons.

If an objective is already taught in other areas of the school curriculum, such as in health, family life education, or substance abuse prevention, it does not have to be taught again or separately for this curriculum. Rather, information in this curriculum guide is to be included where there are no such objectives in an existing curricula. This guide may offer ways to integrate information about HIV/AIDS into existing curricula.

Each objective in this curriculum is cross-referenced with the following existing state curricula:

FLE = Family Life Education

Health SOL = Health Standards of Learning

HIV/AIDS = HIV/AIDS Prevention Education Curriculum

NHES = National Health Education Standards

TERMINOLOGY

The terminology used in this guide coincides with the terminology used in current health textbooks and journal articles. A Glossary of all terms used in the guide appears in a separate section in the back of this guide. Teachers may wish to plan a list of glossary terms for each grade level as a teaching strategy. The language used in this curriculum guide is written for the teacher's planning, preparation, and instruction. Some terminology may need to be modified for presentation to lower grade levels and abilities. For example, an infectious disease may need to be termed "contagious" or "catchable" for grades K-1, depending on the students' abilities.

TEACHING/LEARNING STRATEGIES

The teaching/learning suggestions within this guide are meant to serve as guidelines, not requirements. In many cases there are several suggestions for activities that will accomplish the same aspect of the objective. Therefore, it is not intended that a teacher use all given strategies. Rather, one or more of the teaching/learning strategies will be appropriate for a particular class or situation. The teaching/learning strategies may be used as printed or may be modified as necessary. This guide is a resource for teachers to ensure that they adequately teach about the disease HIV/AIDS and its prevention. A copy of this guide should be available to all teachers (i.e., in the Teachers' Resource Center).

Teachers should seek the assistance of the school's media resource person for suggestions about films, books, videotapes, etc., that will enhance instruction. With a topic such as HIV/AIDS, these resources change or become available so rapidly that it is best to use those that are current and are recommended by the Centers for Disease Control or other creditable health organizations. The media center should serve as the school's clearinghouse for information.

The teaching/learning strategies used in this guide utilize current methodology such as the following:

Brainstorming

Use to begin discussion or generate a variety of ideas. Ask students to give their ideas on a topic without discussion or passing judgment. Brainstorm for a certain amount of time or until all ideas are exhausted. Your role as teacher is to list all the ideas on the chalkboard or chart paper and facilitate discussion of their merits following brainstorming (or the generation of the list).

Class discussion

Use to begin a lesson, to review, or to clarify information. Your role is to guide the discussion and to keep students on the topic.

Group discussion

Use small groups (2-6 members) to produce information or to analyze ideas while encouraging interaction among students. Assign each group a specific task, and allot a time for each task (use a timer). Assign each student a responsibility (leader, recorder, timer, reporter, etc.). You should circulate from group to group to answer questions and assist with any problems that might arise.

Role-play

Involve students actively in learning concepts or practicing behaviors in nonthreatening situations by acting out an imaginary situation. Give students a part to portray or ask them to improvise the communication and/or action according to how they think it would feel to be in that situation and what they think would happen. Provide time for students to plan the action and the ending. Set time limits (3-5 minutes) for each performance. Props may be used. You should structure the role-play and summarize what has been accomplished at the end (e.g., reasons for behavior, how behaviors affect others, why persons want others to change their behavior, etc.).

Journal/notebook

Have students reflect on their learning and internalize it by writing about directed topics such as:

- what they know or would like to know about a topic
- how they think or feel about an issue
- how they think they would react in a given situation
- questions they have about a topic.

Using a journal on a daily or weekly basis in class or as a homework assignment is an excellent way to see the effects of the learning strategies on an individual student's attitudes. Journal entries should be read only by the teacher and not shared with the class unless a student volunteers to read aloud what he or she has written. Do not judge the entries on grammar, punctuation, etc. Your focus is concerned with what the student has written. Plan time to review the journals weekly or biweekly and to write comments for the to students. You do not need to read everything a student has written. Read only the items students checked for you to read. Be positive and encouraging. When students

realize you are really reading what they have to say, they may be encouraged to write more. Journals give students an opportunity to respond personally to the learning. They may also help identify students who need particular help or referral for health-related problems.

Hands-on activities

Use worksheets, puzzles, games, or other types of written materials to test/review the student's knowledge of a particular topic. These are especially effective for kindergarten and elementary grades.

Peer facilitation

Some schools may have peer facilitators as part of their school guidance program. Peer facilitators are students who use helping skills and concepts to assist other students (and sometimes adults) to think about ideas and feelings, to explore alternatives to situations, and to make responsible decisions that affect their academic and personal development. Not just anyone can be a peer facilitator. Students must be trained in the areas of what a helping relationship is, how to be a better listener when someone is talking to them, and how to get individuals to talk more about their ideas and feelings. Peer facilitators can fulfill four basic helping roles: special assistant (e.g., safety patrol), tutor, special friend, or small-group leader. Peer facilitators can be effective in objectives involving decision-making, peer pressure, values clarification, etc.

Debate

Have students present the pros and cons of a proposal stated in the affirmative. For example: Resolved: A student with HIV/AIDS should be banned from attending school. One team, the affirmative, speaks in favor of the proposal. The negative team speaks against the proposal. The burden of proof lies with the affirmative team. Students will do research to prepare their arguments for and against the proposal. There are several formats that can be used for the debate. These can usually be found in an English textbook. This method will be especially effective in objectives dealing with the moral, ethical, and social issues regarding HIV/AIDS.