



# *HIV/AIDS*

*Ages 13+*

Total Time: 2.5 Hours

**PART 1:** Ice Breaker

**PART 2:** HIV/AIDS Overview

**PART 3:** Attitudes toward People with HIV

**PART 4:** Question Box

**PART 5:** Follow-Up Activities

**ANNEXURE 1:** Statements about HIV/AIDS

**ANNEXURE 2:** Risk Signs

**ANNEXURE 3:** Risk Statements

**ANNEXURE 4:** HIV Sign

**ANNEXURE 5:** Reaction Cards

**ANNEXURE 6:** Notes from HIV/AIDS Unit

**ANNEXURE 7:** Evaluation

**ANNEXURE 8:** Q&A for Review Game

**POWER POINT:** HIV/AIDS



# *Part 1: Ice Breaker*

## **Time:**

15-20 Minutes

## **Objective:**

Participants will take part in an activity to become energized and ready to learn.

## **Materials:**

(Depending on Option Selected)

### **Option One:**

- Paper
- Pens/pencils
- Marker Board/ Chart Paper

### **Option Two:**

- Annexure 1: Statements about HIV/AIDS

## **Techniques:**

- Ice Breaker

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## **TRAINER INSTRUCTIONS:**

1. Welcome the participants and tell them that we want everyone to feel energized and ready to learn so we are going to take part in a fun activity to get things started. Lead an ice breaker activity from the options below:

**Option One: Word Association** – Divide the participants into smaller groups of 4-5 and invite each group to write down words that come to their mind when they think of HIV/AIDS. Allow no more than 5 minutes. Then invite each group to share their list with the whole group. Keep a list on the board with words from each group.

**Option Two: Myths about HIV/AIDS** – This game is designed to be played in teams. Divide participants into groups of 2-3 and ask each team to designate a team spokesperson. Explain that you will read a statement about HIV/AIDS from Annexure 1 and their team is to decide if it is true or false. Their spokesperson will give you their response when you ask for it. Keep a tally of correct answers on the board. The team with the most correct responses wins. Explain that they will be learning about HIV/AIDS in this unit.



## *Part 2: HIV/AIDS Overview*

### **Time:**

1 Hour

### **Objective:**

Participants will gain comprehensive information on HIV/AIDS transmission, prevention, testing and treatment.

### **Materials:**

- PPT: HIV/AIDS
- Annexure 2: Risk Signs
- Annexure 3: Risk Statements

### **Techniques:**

- Presentation
- Group Discussion

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### **TRAINER INSTRUCTIONS:**

1. Begin the PPT and **discuss the notes on the bottom of each slide.**
2. At **Slide #8** of the PPT, pause and explain to participants that they will be taking part in an activity to show how fast the HIV infection can spread. Even though HIV is not spread just by touch, the activity will help them see how quickly the infection can spread.
  - Pre-select 3 participants, and privately ask them to scratch the palm of every person they shake hands with.
  - Ask the participants to move around in the room and shake hands with as many people as they want to.

- Inform them that some of them will be scratched on the palms of their hands while shaking hands. Those whose palms have been scratched, must in turn, scratch the palm of everyone they shake hands with.
  - Ask the participants if they have any doubts and clarify accordingly.
  - Allow the game to continue for a few minutes. Ask the participants to return to their seats and ask them, “How many of you have had your palm scratched? Count.
3. Now inform them that initially there were only 3 people who were instructed to scratch the palms of others.

Note that within the short span of the game a large number of people were scratched.

4. Ask the following questions:
- What were you thinking when you were asked to shake hands with others?
  - What were your feelings when someone scratched your palm?
  - What did you do after being scratched?
  - How do you feel now that you understand the significance of the game?
  - Did you know the identities of the initial “scratchers”?

**Trainer Note:** Be sure to remind the teens that HIV is not transmitted by touch; this exercise was just to show them how quickly HIV can spread.

5. At **Slide #9** pause to lead the following activity:
- Hang the signs from Annexure 2 in three different parts of the room.
  - Read the statements in Annexure 3 and ask the teens to stand near the sign that they think is the best answer. Then ask them why they choose that sign. Discuss the following:
    - Did you have to think or did the answer come quickly?
    - How did the rest of the group answer?
    - Even if you know it is risky, why do we indulge in that behaviour?
6. Complete the Power Point



## *Part 3: Attitudes toward People with HIV*

### **Time:**

45 Minutes

### **Objective:**

Participants will explore the attitudes they have toward people with HIV and increase their sensitivity.

### **Materials:**

- Annexure 4: HIV Sign
- Annexure 5: Reaction Cards (cut into squares)
- Annexure 6: Notes from HIV/AIDS Unit

### **Techniques:**

- Role Play
  - Discussion
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### **TRAINER INSTRUCTIONS:**

1. Discuss how society discriminates for different reasons such as caste, community, being a girl, profession, etc.
  - Ask if anyone has experienced discrimination or knows of someone who has. Ask them to give examples.
  - Do they think it is any different than the stigma of having HIV/AIDS?
2. Lead the group through the following role play:

- Ask for a volunteer to be a person living with HIV, and give them the sign from Annexure 4 that says “I have HIV.” Have the person sit in the middle of the room.
- Ask for four volunteers and give each one a reaction card from Annexure 5
- Introduce the scene as the lunch area at school and the person living with HIV is a new student.
- One at a time, invite the volunteers to do what it says on their reaction card, beginning with reaction card #1. Tell them to act out slowly and make it dramatic.
- When the role play is finished lead discussion around the following questions:
  - How did the person with the sign feel? What feelings do people living with HIV face?
  - What did the audience think of the different reactions? What would they have done?
  - Do such situations occur and have they seen them?
  - If you were a person living with HIV, how would you like to be treated?

(\*Role Play taken from Life Skills Education Toolkit for Orphans and Vulnerable Children in India)

3. Tell the group that you will read several statements aloud, and keeping the role play in mind, they should stand if they agree with the statement, or stay seated if they disagree. Allow for discussion of value judgments, prejudices and biases after each statement.
  - I feel that HIV positive people should not get married, as this will increase the number of positive people.
  - I think that people who get infected with HIV have “bad habits” that cause infection.
  - I believe that if a child has HIV they should stop coming to school.
  - There should be separate hospitals and schools for HIV people.
  - People who choose only healthy looking partners cannot be infected with HIV
    - Distribute Annexure 6 and ask the group to keep the notes for future reference.



## *Part 4: Question Box*

### **Time:**

30 Minutes

### **Objective:**

Participants will have an opportunity to have their questions answered in a safe, respectful setting.

### **Materials:**

- Question Box
- Paper, pens/pencils
- Annexure 7: Evaluation

### **Techniques:**

- Discussion
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### **TRAINER INSTRUCTIONS:**

1. Reassure the group that most people have beliefs based on incorrect information and often it impacts their actions. No question is silly – correct information is important to take care of yourself.
2. Give participants 5 minutes to write any question they have related to this session. They do not need to write their names on the papers.
3. Ask participants to drop the papers into the question box.
4. Once collected, begin answering the questions, one at a time. Encourage the teens to analyze myths and ask more questions if desired.
5. While the group is writing down their questions, invite them to complete the evaluation (Annexure 7).



6. Gather the completed evaluations and include them in your trainer report.



## *Part 5: Follow-Up Activities*

### **Time:**

Varies by Activity

### **Objective:**

Participants will have the opportunity to practice the skills learned in this session.

### **Materials:**

(Depending on Option Selected)

#### **Option One:**

- None

#### **Option Two:**

- Two long sticks or long pieces of paper
- Optional: blue paper and green paper

#### **Option Three:**

- Poster paper, markers

#### **Option Four:**

- Annexure 8: Q&A for Review Game (one copy for Trainer)

#### **Option Five:**

- None

### **Techniques:**

- Applying learning to daily life
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## TRAINER INSTRUCTIONS:

1. Explain that participants will have the opportunity to review the material learned today throughout the next few weeks, and take part in activities designed to put the learning into action. They will take part in follow-up sessions to discuss the activities.
2. Assign one of the options below for this first week. Additional activities will be assigned in the following weeks.

**Option One: Do I Take Risks?** – While still sitting in a circle, explain that they will be doing an exercise to understand the concept of risk taking through a reflection of their own behaviors in life. Ask the participants to make themselves comfortable. Invite them to reflect for about 5 minutes on their life and identify an incident or situation where they think they have taken a risk. It may be a small incident or a major situation. It may be that some participants may not be able to identify such a situation. This is not a problem. Give small hints and examples to help the participants (eg. Cheated, did something dangerous, joined a friend in doing something you weren't supposed to do, behaved against the rules at school or home, etc.)

Now, start at one end of the circle, and ask them to share their reflections. Even those who cannot remember an appropriate situation should share their experience. If all they have to say is, "I have never taken a risk" that is fine. When everyone has finished sharing, ask them to answer the following questions (you may record the responses on a flip.

- Why did you take a risk?
- What factors influenced you?
- What were your feelings at the time?
- What was the outcome of taking the risk?
- Do you generally take risks?
- How do you view risk taking in others?
- What implication does this have for your attitudes towards HIV/AIDS?"

**Note to Trainer:** Explain to the group that often we feel that risk taking is alright and even courageous, if it turns out well. But, if things don't turn out well, we tend to look for someone to blame. When we do this we become harsh and judgmental. The fact is that we all take risks all the time – when we walk in a field at night, when we cross a road or give birth to a child. The important thing to remember is the consequences.

Link this to risk taking behaviors that can lead to HIV infection. Examples of risk taking behaviors include (invite the group to add to this list):

- Injecting drugs into the blood stream
- Drinking alcohol and having sex
- Sharing needles with a group of injecting drug users
- Having many sexual partners

\*A high number of partners increases the possibility of acquiring HIV as does sharing a needle cleaned with water, visiting sex workers or undertaking sex work.

**Option Two: Abstinence and Condom Bridge** – Show one long stick (or thin piece of paper) and explain it is the “Abstinence/Faithfulness Bridge”. This is the only bridge available to cross a river. (Optional: place blue paper under the bridge to symbolize water, and green paper at the end to symbolize land.) Invite the children to walk one by one on this narrow stick, keeping their toes from the back foot to the heel of the front foot. Their goal is to cross this dangerous water and reach land without falling in the water. Get excited and clap if they reach land safely. If they fall in the water, ask them to stand on the side until another bridge is built

Now, place the next stick, the Condom Bridge, parallel to the previous stick but one foot away. Ask the children to once again cross the Abstinence/Faithfulness Bridge but this time, if they lose their balance, they can use the Condom Bridge to steady themselves. The group will now be able to walk easily.

Discuss with the group:

- What is the significance of the two bridges?
- Are two bridges better than one? Why?
- Can some use just one bridge?
- What can make it harder to use the bridge (for example, if you have had too much to drink, or a risky relationship)?

Conclude the exercise with the following statements:

- Abstinence is a 100% safe method of eliminating sexual risk of HIV.
- Reduction of sexual partners and being faithful to one sexual partner reduces risk of HIV infections.

- Using condoms correctly and consistently with all sexual acts significantly reduces the risk of HIV.

\*Adapted from Bridges of Hope <http://bridgesofhopeinfo>

**Option Three: I'd Like to Help** – Divide the participants into four groups and give them the following assignments:

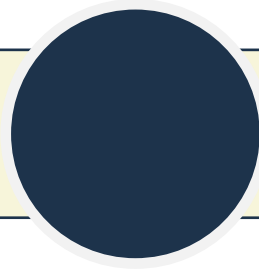
- Group One – prepare a small role play showing how they would take care of a friend who is living with HIV.
- Group Two – Prepare an article for the local newspaper emphasizing the need to stop discrimination against people living with HIV
- Groups Three and Four – Prepare posters with positive messages for raising awareness about the needs and requirements of people living with HIV/AIDS. They may prepare posters for the community, peer groups or government.

Tell the participants that they are allowed to refer back to their notes from the unit, and give the groups 30 minutes to do these activities. Then bring everyone back together and invite each group to show off their work and explain the ideas they were trying to present. Discuss the issues raised in the activity after each group presents.

Close the session with a recap of the major take-aways. These can be summed up in the following three broad headings – dealing with discrimination, care for people living with HIV/AIDS, and communication about the needs of people living with HIV/AIDS.

**Option Four: Review Game** – Divide the group into two teams. You will ask a review question (from Annexure 8) of Team #1 first. The team can talk amongst themselves to come up with the correct answer. If they answer correctly they get one point. (Tally points on the board.) If they miss, the question goes to Team #2. If they answer correctly they get one point. If not, the question is “dead” and no one will receive points from it. Explain the answer yourself. The next question goes to Team #2, and follows the same procedure. Discuss each response as needed to ensure the participants understand the material.

**Option Five: Guest Speaker – Someone Living with HIV** – Invite someone with HIV to come and discuss with the group how it feels to be HIV positive and how, in that person’s experience, has society reacted to it. It is helpful to have a positive experience presented so that the group can think of ways of empathizing and caring for others. You may want to ask the group to have some questions ready for the speaker.



# *Annexures*

## *HIV/AIDS*

### *Ages 13+*

**ANNEXURE 1:** Statements about HIV/AIDS

**ANNEXURE 2:** Risk Signs

**ANNEXURE 3:** Risk Statements

**ANNEXURE 4:** HIV Sign

**ANNEXURE 5:** Reaction Cards

**ANNEXURE 6:** Notes from HIV/AIDS Unit

**ANNEXURE 7:** Evaluation

**ANNEXURE 8:** Q&A for Review Game





## *Annexure 1: Statements About HIV/AIDS*

<b>S. No.</b>	<b>Statement</b>	<b>Correct response</b>
1.	The full form of HIV is High In Vitamins.	<b>False</b> , the full form of HIV is Human-Immuno Deficiency Virus
2.	HIV is caused by AIDS.	<b>False</b> , AIDS is caused by HIV.
3.	There is no cure for HIV & AIDS.	<b>True</b> , although some very strong drugs are now being used to slow down the disease. They however, do not get rid of HIV or cure AIDS.
4.	People with AIDS die from serious diseases.	<b>True</b> . In the final stages, the body has little or no immunity left and serious diseases like cancer or kidney failure lead to the demise of the person.
5.	Sex is the only way of getting HIV.	<b>False</b> . Unprotected sex is just one of the ways in which HIV can be transmitted.
6.	HIV & AIDS can only affect people if they do not maintain good hygiene.	<b>False</b> . HIV & AIDS can infect anyone, at any time, if the person indulges in risk behaviours such as unprotected sex, multi partner sex and the use of unsterilized needles and syringes.
7.	All sex workers are suffering from HIV & AIDS.	<b>False</b> . But sex workers are a high -risk group and more vulnerable to infections than others.
8.	HIV & AIDS is a punishment for our sins.	<b>False</b> . HIV/AIDS is a disease caused by a virus that infects people when they indulge in unsafe behaviour.
9.	Young people are more vulnerable to HIV infection	<b>True</b> : Young people involve themselves in sexual activity with strangers out of curiosity or peer pressure which make them vulnerable. Under the influence of drugs they can be easily swayed by and put them at risk. Therefore it is very important for them to use life skills such as critical thinking, creative thinking, coping with emotions, coping with stress in such kind of situation

10.	If you travel in the same bus as a person with HIV you will also be infected with HIV.	<b>False.</b> HIV does not spread through air, touch, sharing the same space or clothes.
11.	Pregnant women can pass the HIV to their unborn child.	<b>True.</b> HIV can be transmitted from an infected mother to her unborn child.
12.	It is possible to get HIV from a toilet seat.	<b>False.</b>
13.	Children cannot get HIV & AIDS.	<b>False.</b> Children are as vulnerable to HIV infection as anyone else.
14.	Children who have HIV cannot attend school.	<b>False:</b> Children with HIV can be as healthy and normal like other children if they are treatment is on. Proper care and support is available.
15.	People with HIV can live a healthy life for many years.	<b>True:</b> Possible through treatment, care and support.
16.	Mosquito bites can spread HIV.	<b>False:</b> HIV is human virus, it cannot survive in mosquitoes, lice, etc.





## *Annexure 2: Risk Signs*

**Stop!**

**This is HIGH Risk for HIV**

**Think!**

**This may have some Risk for  
HIV**

**Go!**

**This Activity has no HIV Risk**



### *Annexure 3: Risk Statements*

Eating food made by someone with HIV	Green
Hugging someone	Green
Using a public toilet	Green
Kissing	Yellow only if there is a sore, otherwise Green
Having sex without a condom	Red
Shaking Hands with someone with HIV	Green
No sex – abstinence	Green
Being bitten by a mosquito	Green
Sharing needles	Red
Sitting next to someone with AIDS	Green
If a person with HIV coughs or sneezes at you	Green
If a person with HIV cries and tears hit you	Green
Having sex with a sex worker	Red
Sharing cup or utensils with HIV infected person	Green



## *Annexure 4: HIV Sign*

I have HIV



## *Annexure 5: Reaction Cards*

<p style="text-align: center;"><b>#1</b></p> <p>Introduce yourself to the person and start shaking his/her hand, read the sign they are holding that says “I have HIV” and quickly pull your hand away.</p> <p>Run to the sink and wash your hands.</p>	<p style="text-align: center;"><b>#2</b></p> <p>Go to the person with HIV, read the sign and say “You must be joking! You have HIV! Then why have you come here to go to school?”</p> <p>Leave the room quickly.</p>
<p style="text-align: center;"><b>#3</b></p> <p>Go to the person, read the sign and say “You must be a former drug user who used infected syringes. You should be locked up somewhere where you cannot harm us!”</p> <p>Leave the room.</p>	<p style="text-align: center;"><b>#4</b></p> <p>Go to the person, read the sign, shake the person’s hand and say “It’s nice to meet you. My name is _____.”</p> <p>Sit down next to him/her.</p>



## *Annexure 6: Notes From HIV/AIDS Unit*

**HIV stands for Human Immunodeficiency Virus.** HIV is a virus, like the one that causes a cold, but it is different because it destroys part of the immune system. Our immune system protects us from many illnesses and diseases. If we are healthy, our immune system is strong, but if we are sick, do not eat the right food or get rest, our immune system can weaken.

A weakened immune system from HIV allows infections to more easily enter the body. After HIV enters the body, it piggybacks onto a T cell and works its way inside of that cell. Once inside, the virus completely takes over the T cell and uses it as a virus-making factory to make a lot of copies of itself. The newly made viruses then leave the T cell and go on to infect and destroy other healthy T cells as they continue to multiply inside the body. T cells invaded by the virus can no longer fight infections properly.

**Someone who is infected with the virus is called HIV positive.**

Although the HIV positive person may feel fine, the virus is silently reproducing itself and destroying T cells. Thanks to new medications, someone infected with HIV can stay relatively healthy and symptom-free for many years.

Even though they may look ok, people who are HIV positive may sometimes feel scared, angry, unhappy or depressed.

It may take years for HIV to damage enough T cells for that person to get sick and develop **AIDS - Acquired Immunodeficiency Syndrome**

- Acquired means it was received by a person rather than genetically inherited
- Immunodeficiency means there is deficiency in the immune system, or the immune system is weakened
- Syndrome means AIDS is not just one disease or symptom, but is a group of diseases or symptoms.

When the person's immune system can no longer fight off infections, they become very sick

### **HIV/AIDS in 2015**

2.1 Million People living with HIV in India

68,000 People died from AIDS related illnesses in India

Around 60% of new HIV infections worldwide occur in young people

### **How is HIV Spread?**

HIV infection isn't spread like a cold or the flu where you can pick up germs by touching things the sick person touched. HIV is passed only through direct contact with another person's body fluids such as blood, semen, vaginal fluids and breast milk. These bodily fluids must come into contact with a mucous membrane (lips, mouth, nasal passages, eyes, etc) or broken skin for transmission to occur. It can also be spread through needles and syringes that have been used by someone with HIV because small amounts of blood remain in the needle after use and can be injected into the next person's bloodstream.

- Unprotected sexual intercourse (most common method of transmission)
- Kissing only if there is a sore in the mouth
- Sharing needles or syringes
- Blood transfusion with untested blood
- Mother to child during childbirth or breastfeeding

HIV/AIDS is no longer restricted to certain groups of people. It can affect anyone. It is not belonging to a particular group of people, but behavior that puts people at risk.



## **People can stop the spread of HIV by:**

- Not touching another person's bodily fluids (as described in earlier slide)
- Abstaining from sex or using condoms correctly and every time during sex
- Not sharing needles or syringes

Since there is no vaccine to protect people against getting infected with HIV, and there is no cure for AIDS, the only certain way to avoid AIDS is to prevent getting infected with HIV in the first place.



People with HIV look exactly like people who are not HIV positive. People can carry the HIV virus for many years without knowing they have it. If untreated, an HIV-positive person will eventually begin to feel sick. When a person's T cell count gets very low, the immune system is so weak that many different diseases and infections by other germs can develop. These can be life threatening.

Doctors diagnose HIV by testing a person's blood or saliva. If you may have been exposed to the virus it is always safest to get tested, even if the chance seems small. Remember, you can be infected with HIV without even knowing it.

**Though there is no cure for HIV/AIDS, new medicines can help people live long and healthy lives just like people with other chronic diseases such as diabetes.**



## Annexure 7: Evaluation

<b>Unit 15</b> – <b>HIV/AIDS</b>	<b>Score</b> (Circle a number, 5 is the Best)	 <b>What I Liked/Learned</b>	 <b>What I Didn't Like or Things I'm Confused About</b>
Part 1: Ice Breaker	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 2: HIV/AIDS Overview	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 3: Attitudes	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 4: Question Box	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<b>Overall Score</b>	<b>1      2      3      4      5</b>		



## *Annexure 8: Questions and Answer For Review Game*

**1. What is the complete form of HIV?**

HIV is the Human Immuno Deficiency Virus

**2. What is the complete form of AIDS?**

AIDS is the Acquired Immuno Deficiency Syndrome. The condition is acquired as it is not inherited or past down from one generation to next, and is referred to as a syndrome as it consists of a number of symptoms collectively.

**3. What is the difference between HIV and AIDS?**

AIDS or the Acquired Immuno Deficiency Syndrome is the late stage of infection caused by the Human Immuno Deficiency Virus or HIV. In other words, once a person is infected with HIV, it can take almost 8 to 10 years (or more) before the condition of AIDS sets in. In addition, the onset of AIDS can be delayed through proper medication, food, nourishment and care. In other words, HIV infected people can live symptom-free lives for years. However, most people in developing countries die within three years of being diagnosed with AIDS, and is primarily due to a lack of access to medication, healthy nourishing food and a stress free existence.

**4. How do people get infected with HIV?**

HIV is transmitted mainly through semen and vaginal fluids during unprotected sex, or sex without the use of condoms.. In addition, HIV can also be transmitted by the sharing of needles contaminated with infected blood, by transfusions of infected blood or blood products and from an infected mother to her baby during pregnancy, delivery and through breast milk. Nevertheless, risk of HIV transmission can be reduced if partners ensure use of a condom during sex, do not share needles and test blood prior to transfusions.

**5. How many people are infected with HIV in India?**

As of 2015, there are 2.1 million people infected with HIV in India. Around 60% of new HIV infections worldwide occur in young people. This is primarily due to the fact that youth perceive themselves as invulnerable, take risks and access information that is generally inaccurate and misguided. Therefore, with accurate information, people will be better able to make informed choices and protect themselves from infection.

**6. How can children and young people protect themselves from HIV?**

Like adults, children and adolescents have the right to accurate information. As some young people may be sexually active, they should have adequate knowledge about condoms, where these are available and the method of use. In addition, they should have information on the importance of sterilized needles and tested blood. Further, parents and schools should share the responsibility of ensuring that young adults understand how to avoid HIV infection and develop tolerant, compassionate and non-discriminatory attitudes towards people living with HIV.

**7. Can blood transfusions transmit HIV infection?**

This is true only if the blood being donated contains HIV and had not been tested. However, in many places blood is screened for HIV before it is transfused to another person.

**8. How should the government share responsibility in prevention of HIV infection?**

Government authorities are responsible for ensuring that enough resources are allocated to AIDS prevention and care programs and that all individuals have access to these. In addition, the government should ensure that laws, policies and practices do not discriminate against People living with HIV/AIDS. In addition, the government should make responsible for increasing awareness and dispelling exiting myths and misconceptions. Finally governments of developed countries have a moral responsibility to share the AIDS burden with countries that are developing or under developing.

### **9. Should people living with HIV have special rights?**

Each individual is entitled to fundamental human rights without discrimination. So, why should infected people be different? People living with HIV/AIDS have the same rights as uninfected people, and these include the right to education, employment, health, legal intervention, travel, marriage, procreation, privacy, social security and mobility, scientific benefits and asylum. However, infected people who are aware of their status should be responsible and not put others at risk.

### **10. Why should young people be concerned about HIV/ AIDS?**

There many reasons why young people (like the rest of us) should be concerned about HIV. However, Young adults are often at particular risk as –

A major proportion of HIV infection occurs in young people.

They are at a high risk of acquiring sexually transmitted infections, including HIV if they experiment with sex or drugs while growing up.

Young people are an asset as they can communicate better with their peers, influencing them in positive manners as role models and peer educators. Further, young people have the enthusiasm, energy and idealism that can be harnessed to spread HIV /AIDS awareness and messages of responsible sexual behavior amongst their peers, families and community.

### **11. What can young people do about HIV and AIDS?**

Young people have a vital role to play in the prevention and control of HIV infection, and this role extends from protecting themselves and their peers to protecting their community. Below are some pointers that might be useful.

All young people can try to learn as much as possible about HIV/AIDS, and spread information to others.

They could encourage their teachers and role models to tell them more about HIV/AIDS and discuss preventive methods openly and exhaustively.

They could also spread the message of responsible sexual behavior among their friends, family and community, discussing aspects HIV/AIDS and sexuality openly with their peers.

Young people should try and set an example of responsible sexual behavior for their peers and younger persons

They can also encourage the prompt and correct treatment of sexually transmitted diseases from an appropriate care provider

They could encourage and help in voluntary donation of blood to certified blood banks.

**12. When does a person get tested for HIV?**

A person can get tested for HIV at any medical centre that provides testing and pre and post-test counseling facilities. However, an individual should ensure that testing is carried out by trained medical and paramedical staff, and they receive counseling both before and after the test.

**13. Why does one need counseling before and after the test?**

HIV testing can be an extremely exhausting procedure emotionally. Due to the stigma and fear attached, as well as the lack of information, most people are reluctant to test themselves and experience tremendous agony before and after the procedure. Pre-test counseling is important to provide the individual with information regarding the nature of the test and procedures involved, as well as prepare them for possible outcomes. Post-test counseling is crucial to provide the individual with a supportive environment to deal with the results and life after testing.

**14. A common question – ‘I am too scared to know if I am HIV Positive. What do I do to find out?’**

It is scary to get news one does not want to hear. However, knowing for sure is the first step to dealing with the test results. Nevertheless, do not forget the pre and post- test counseling as a counselor can help one prepare for the test and the results.

Many people experience emotions like fear, anger and helplessness, all which are natural and allowed. However, by talking to someone they trust, they can learn to accept their results and develop effective coping mechanisms that ensure a healthy and symptom-free existence.

**15. Another common question – ‘Why do I need to know my HIV status? It will only make me feel bad if I am HIV positive and there’s nothing I can do?’**

If one knows their HIV status there is a lot they can do to lead happy and healthy lives, protecting themselves and their loved ones. For example if someone is negative, they can decide to STAY NEGATIVE

If someone is positive, they can develop positive attitudes to help them live longer and stay healthier. Further, they can protect their lovers from becoming infected and protect themselves. In addition one can get counseling in order to make informed decisions and come to term with the results.

### **16. Where is HIV found?**

All body fluids can contain HIV. However blood, cerebrospinal fluid (CSF), vaginal and cervical secretions contain a high concentration of the virus. Therefore, in case there is an exchange between any of these fluids and one partner is already infected it is important that individuals take proper precautions.

### **17. Do Mosquitoes spread HIV?**

This is a common myth. However there is no need to worry, as this is not possible for three reasons:

First, the mosquito does not inject blood into the body of a person but draws blood from the person. So HIV infected blood from one person cannot be injected into another. The mosquito cannot act as a flying syringe.

Second, the amount of blood on the mosquito's proboscis (the elongated mouth of the mosquito) is too small to transmit the virus.

Third, HIV, unlike the malaria parasite cannot replicate itself within the mosquito's body system.

### **18. Can tattooing spread HIV?**

Tattooing can only spread HIV if the instruments used are already contaminated with HIV infected blood. So the risk of transmission is low. However, remember that one has the right to insist on sterilized equipment.

### **19. What are opportunistic infections?**

Opportunistic infections, like pneumonia and diarrhea, are those infections that affect the body when the number of T cells is reduced by HIV infection. These infections are called 'opportunistic' as in most people they are not life threatening; however, in the context of infected people they can cause long term illness and can be terminal.