

# HIV and AIDS



## LEARNING OUTCOMES

- To develop a basic understanding of HIV and AIDS
- To know the difference between them
- To know that HIV can be transmitted through sexual contact
- To understand possible routes of transmission of HIV
- To differentiate between safe and unsafe activities in relation to HIV transmission

## RESOURCES

- Flipchart, sticky notes and pens
- **Optional.** Bags of sweets for each learner (one per learner) and one bag of chocolate buttons, marked as described in Activity 2, option 2. Paper and pens for learners
- **Resource 1: HIV and AIDS name cards** one set prepared for each group of learners
- **Resource 2: How you get HIV** diagram
- **Resource 3: Where does HIV live in the body?** cards prepared or sticky notes and flipchart
- **Resource 4: Safe / unsafe activities – how to avoid HIV** cards prepared
- **Resource 5: HIV and AIDS – the facts** resource for teachers
- Leaflets about HIV – sourced from local/ national health promotion services and suitable for the group of learners
- Copies of the **Glossary**, for each learner

## RELATED THEMES

### Sexual health topic

Talking about sex and sexual health  
Sexually transmitted infections  
Safer sex  
Contraception  
Getting help / accessing services

### Skilled for Health file 2: Services and self-care

**Topic 3: Finding out about health concerns:** themes 2, 4 and 5

Although recent developments in treatment and management of HIV mean that the outlook for those newly infected with HIV is much improved, there is, as yet, no sign of an effective vaccine or cure. Continuing work on HIV prevention initiatives is necessary to help reduce the number of newly acquired infections of HIV. Giving people accurate and up-to-date information about HIV and AIDS helps people make decisions that can help prevent both primary and secondary infection of HIV.

Teaching about HIV – even at a basic level – requires the teacher to have a level of understanding and knowledge about HIV and AIDS. The notes in this theme (**Resource 5: HIV and AIDS – the facts**) aim to provide the information a teacher will need in order to deliver this theme. Another option would be to invite a guest trainer from a sexual health service/health promotion team to co-facilitate.

There is still a lot of misinformation about and a great number of ‘myths’ surrounding HIV and AIDS. This can, and does, lead to a great deal of fear, prejudice and stigma towards people living with HIV. It also means that many people wait for diagnosis until the virus is well established, making management and treatment more difficult/complex.

Having an accurate understanding of HIV and, in particular, of the possible routes of transmission can not only help people to protect themselves and their partners from being infected with HIV, but can also help remove some of the fears that people may have about the virus. This, in turn, can help contribute towards reducing HIV-related stigma and, therefore, improve how people relate to those who are, or who are perceived to be, living with HIV.

You also need to be aware of how cultural and religious issues might affect discussion and learning about HIV and AIDS. Note that some cultural groups hold mistaken beliefs about how HIV can be ‘cured’ by having sex with a virgin. It should also be recognised that some groups may be unable / unwilling to engage in mixed gender groups and / or mixed cultural groups. You may need to take advice about this, perhaps from community or cultural leaders.

It is important that learners understand the difference between HIV and AIDS and this requires an understanding of complex concepts such as the immune system, the difference between viral and bacterial infections and how viral infections can be transmitted. Many learners will need a lot of support and discussion, with opportunities to ask questions, in order to get to grips with this information. This will include some communication of complex, technical vocabulary. Teachers will need to check learners’ understanding continuously.

Learners will be asked to consider information that is factual and commonly-held beliefs that are incorrect. This requires some ability to distinguish between fact and opinion, quite a high-level skill.

There is information for each activity about support and ESOL. ‘Support’ is usually for literacy or numeracy skills, but also more general issues that might arise. ‘ESOL’ relates to learners whose first language is not English, and may include language or cultural issues. You may find that some of these suggestions apply to other learners as well.

### Core curriculum

Activities in this theme will contribute to learning in the following curriculum areas:

- Expressing a point of view (SLc/E3.3)
- Listening to points of view (SLlr/E3.5)
- Listening to new information (SLlr/E3.3)
- Following verbal instructions (SLlr/E3.2)
- Respecting turn-taking rights in discussions (Sld/E3.3)
- Using a glossary (Rw/E3.3)
- Selecting the meanings of words (Rw/E3.1)
- Discussion about truth and reality versus myths and untruths (SLd/L1.1; SLd/L2.4)
- Reading about fact and opinion (Rt/L1.1)

## Related health information

All these sites have good information about sexual health. Some have leaflets you can order.

[www.hpa.org.uk](http://www.hpa.org.uk)

[www.nhs.uk/Livewell](http://www.nhs.uk/Livewell)

[www.fpa.org.uk](http://www.fpa.org.uk)

[www.tht.org.uk](http://www.tht.org.uk)

[www.direct.gov.uk](http://www.direct.gov.uk) (look under health and well-being, then sexual health)

[www.lgbthealth.org.uk](http://www.lgbthealth.org.uk)

[www.lgf.org.uk](http://www.lgf.org.uk)

Telephone service:

NHS Direct 0845 4647

Sexual Health Line 0800 567123

- Remind learners about the session on STIs and ask if there are any questions. Deal with these. If anyone has brought leaflets or information from the internet, share this with the group if appropriate.
- Write the words HIV and AIDS on a piece of flipchart paper and ask learners what the words mean to them.
- This exercise will enable you to assess the level of knowledge and awareness in the room and will probably bring out some myths and misunderstandings about HIV and AIDS.
- Summarise the points made by participants by writing these on flipchart paper. Do not correct any ideas, but say that the group will revisit these thoughts at the end of the session (see Activity 5) to see if people still agree with them. You might want to group responses on the flipchart, e.g. how you get HIV, symptoms, safer sex, treatment.
- It is important that all contributions from learners are acknowledged and summarised on the flipchart, whether or not these are accurate.
- You will need to confirm ground rules for discussion (see **Theme 1: Talking about sex**) if participants begin to challenge thoughts presented by others in the group. Note in particular the need to respect the views of group members, even if they are different from your own.
- If this happens, ask for and record the thoughts of the 'challenger'. It is about what each learner thinks or believes, and should not be about responding to the views of other learners.
- Be aware of cultural and religious attitudes to HIV and AIDS. Discussion about HIV and AIDS needs to confirm that they are an issue for all people who are sexually active.
- Some ideas that are suggested by participants may relate to cultural beliefs that are present in learners' countries of origin. It is important to accept and record these even if they seem controversial, so that they can be addressed during this theme.

*What do you know about HIV? What do you know about AIDS? Share with the group what you know...*

ACTIVITY 1

**What do HIV and AIDS mean and what's the difference between them?**

- Divide learners into small groups of three or four. Give each group a set of word cards prepared from **Resource 1: HIV and AIDS name cards**. Each group should be given cards for either HIV or AIDS. Dependent on the size of the group you are working with, you may have two small groups working on HIV and two on AIDS.
- Tell each group to select the words which the letters H-I-V and A-I-D-S stand for. Give the small groups a few minutes to discuss this then ask them to show the other groups their decisions.
- Using flipchart paper, present the correct words to the group, building the words and explaining each component to learners, for example:

*We talk about HIV and AIDS, but what do these letters stand for? Look at these cards and have a go at choosing the words you think are correct. Don't worry if some of the words sound very technical! We'll go through the meanings of the words after you've had a go.*

<b>HIV</b>	
<b>Human</b>	Relating to people.
<b>Immunodeficiency</b>	Something that makes your immune system weak and means that you may find it difficult to fight off infections.
<b>Virus</b>	An infection that is passed from person to person which gets into all the cells in the body and causes illness.
<b>AIDS</b>	
<b>Acquired</b>	Something you get from outside your body
<b>Immune</b>	<i>(read together with 'deficiency' below)</i>
<b>Deficiency</b>	Something that makes your immune system weak and means that you may find it difficult to fight off infections.
<b>Syndrome</b>	A combination of illnesses. In AIDS this means diseases that someone with a healthy immune system would be less affected by, e.g. rare kinds of cancer, brain disease and pneumonia.

- Check learners' understanding of these descriptions and invite questions or comments. Particular points you should make during this discussion are:
  - HIV and AIDS are not words for the same thing.
  - HIV is the infection that can lead to AIDS.
  - People do not die of HIV, but of an AIDS-related illness, such as pneumonia.
  - If you have an HIV test and the result shows you have got it, then you are HIV-positive.
  - It can take many years for someone who has been infected with HIV to develop illnesses that mean the person has AIDS.
  - Someone can live with the HIV virus without getting ill or

knowing they have the virus for many years, and can still pass the virus to other people.

- In this country, drug treatments are available free of charge (under the NHS) to help keep people healthier and prevent AIDS from developing. In other countries you can still be treated but you may need to pay. In some other parts of the world, treatment is not available at all.
- These treatments are very effective for many people but need to be taken regularly (for life) and can cause bad side effects like sickness and diarrhoea.
- It will be helpful to spend additional time talking about what the immune system is (see the glossary definition), what its functions are and what happens when it is compromised. Confirm the following points.
  - The immune system is the body's defence system against infection and disease. It develops throughout life, in response to threat from different infections.
  - We develop our immune system from contact with other people and infections. Our immune systems are also boosted by immunisation, the jabs we have as babies against diseases such as whooping cough.
  - If you are overtired or not well, then your immune system does not work so efficiently.
  - Fit, healthy people usually have strong immune systems and are more likely to be able to resist diseases. Looking after your health (e.g. eating sensibly, not drinking, smoking or taking drugs) is therefore very important.
- Go through any of the words on the cards that learners do not understand. Many are in the glossary.

### Support

- Most of these words are at about Entry 3, apart from 'vaccine', 'immunodeficiency', 'infectious', 'deficiency' and 'syndrome'. As three of these are the correct choices, you will need to judge how much support to give learners or whether to conduct this as a whole-group activity.
- When giving instructions for the activity, stress that it doesn't matter if learners don't know the words or find them difficult to read. Confirm that some of the words are technical or medical.
- Experience suggests that this aspect of Theme 3 is quite difficult for learners. It is important that learners do have some basic understanding of the difference between HIV and AIDS so be prepared to spend some time discussing them.
- You may need to explain that HIV and AIDS are short forms or abbreviations for longer words. Abbreviations are usually written with capital letters. Learners might be able to think of others from their own experience, e.g. NHS.

### ESOL

- ESOL learners may need to think about the meanings of each of the words on the cards before proceeding with the activity. They will need support for this. You could encourage them to use the glossary.
- If you use the term 'HIV-positive' be aware that the term is potentially confusing as something 'positive' is often a good thing, and 'negative' a bad thing. You may need to spend a little time discussing this.

## ACTIVITY 2 – option 1

### How you get HIV

- Ask learners how HIV is passed from one person to another. Expect to get some detail about known risky sexual practices, e.g. sex without using a condom, sex with an infected person and so on. You may also get a response about sharing needles. These will be discussed later in the session. Ask if people get HIV every time they engage in a risky practice. The answer is ‘no’. Ask if people risk getting HIV every time they engage in a risky practice. The answer is ‘yes’.
- Using **Resource 2: How you get HIV** as a guide, describe how you get HIV. This is sometimes called ‘the cycle of transmission’ but this is a difficult concept for many learners. You could copy the resource for learners or use flipchart paper to build the model stage by stage. The critical points are:
  - For HIV to be passed from one person to another there has to be a way for the virus to get from one person’s body into the body of another person.
  - This can only happen if a **large enough** amount of **good quality** virus finds its way from **someone who has HIV into the body of someone else**.
  - Although HIV is a strong virus in the body, it is very fragile and weak outside the body. Outside the body, it is destroyed by air, heat and light. It cannot be carried through the air.
  - In some bodily fluids, HIV is strong. In other fluids, it is weak.
- Take time to discuss any issues and questions coming from learners. Expect there to be some comments about the relative fragility of the HIV virus.
- Explain to the group that the next activities will enable learners to consider where HIV lives in the body of someone who has the virus and explore possible ways that the virus can be passed on.

## ACTIVITY 2 – option 2

### How you get HIV

An alternative way of conveying the same information is to use this more hands-on activity. You should try this out a couple of times to make sure it works well for you. It works best with a group of eight or more. **This activity is adapted from *Guide to Implementing TAP (Teens for AIDS Prevention): A Peer Education Program to Prevent HIV/STD Infection, Washington, DC: Advocates for Youth, © 2002. The full instructions are given on the site.***

- Instructions:
  - Give each learner a small bag of the same type of sweets (it doesn’t matter which type) but give one learner a bag containing chocolate buttons (or a noticeably different sweet). Don’t give any explanations for this. (Note: choose the person given the chocolate buttons carefully, making sure he / she can handle the later ‘exposure’.)
  - One of the bags of sweets has the letter ‘C’ in it and one has the letters ‘IC’. Again, don’t give any explanations for this or draw learners’ attention to these.
  - A third learner has the words ‘I don’t share’. Explain to this

learner alone that this means they shouldn't share their sweets with anyone.

- Learners go round the room and exchange sweets (i.e. a sweet for the same type of sweet, a sweet for a chocolate button or a chocolate button for a sweet) with everyone else in the room. They should make a note of who they exchange sweets with. They should only exchange their own sweets and not the ones given to them by someone else. Don't eat them just yet!
- Ask learners to sit back in their places. Now explain the difference in the sweets: the person with the different type of sweets (e.g. chocolate buttons) had HIV. The learner with the bag of sweets with a 'C' in it used a condom. The person with the bag of sweets with 'IC' used a condom but used it incorrectly.
- Ask all learners who shared sweets with the HIV person to stand up (i.e. they have a chocolate button), apart from the person with the 'C' card. The 'I don't share' person should also be sitting down still as they shouldn't have shared with anyone.
- Everyone standing up could have HIV.
- Discuss the outcomes of this. Some thoughts that may come up are: you can't tell if someone has HIV by looking at them; using a condom properly is a good protection from HIV; using a condom incorrectly is no protection; and people don't always do what they're supposed to do (the person with the 'I don't share' card sometimes does swap sweets).
- Take time to discuss any issues and questions coming from learners. Talk to learners about the relative fragility of the HIV virus (i.e. the information from Option 1).
- Explain to the group that the next activities will enable learners to consider where HIV lives in the body of someone who has the virus and explore possible ways that the virus can be passed on.

### Support

- This information is important so teachers are presented with two options for the activity. You will need to decide which option best suits you and your learners.
- Option 1 requires good listening and discussion skills and a good level of comprehension. It involves some quite complex language (e.g. quantity, quality, virus) and concepts (e.g. 'good quality virus'). Learners may need some support for this.
- Option 2 is more 'hands-on' and less reliant on literacy skills but requires a high degree of cooperation from learners. Learners may need support to follow the verbal instructions accurately.
- Be aware that some learners may not want to or be able to eat sweets (e.g. diabetes). Substitute counters or similar for the sweets.

### ESOL

- Option 1 involves some quite complex language (e.g. quantity, quality, virus) and concepts (e.g. 'good quality virus'). Learners may need some support for this.
- Learners may struggle with the Option 2 activity, in terms of sharing sweets with others. Be sensitive to this.

### ACTIVITY 3

#### Where does HIV live in the body?

- Have the words for body fluids from **Resource 3: Where does HIV live in the body?** prepared as cards or sticky notes. Prepare flipcharts with the headings from the resource.
- Explain to learners that HIV lives in the body fluids of someone who has HIV. But only in some fluids is there enough quantity of the virus for it to be infectious to other people. Ask learners to name some body fluids, anything liquid in, or coming out of, the body. Expect a range of names for body fluids – you may be able to prepare the names learners use beforehand; otherwise use the range of names given by learners in the session. Make sticky notes as you agree words with learners.
- Link the names given by learners to the more ‘technical’ ones in the resource – group them together on the flipchart (e.g. urine with wee, pee, piss).
- Now go through each of the bodily fluids listed in the resource and, talking it through with learners, place them under their correct heading: **Yes:** enough virus lives in these fluids to be infectious; **Yes:** the virus lives in these fluids but there is not enough of it to be infectious; **No:** the virus does not live in these fluids. Involve learners as much as possible in the decision-making about this.
- Emphasise the following points.
  - Any activity that involves coming into contact with body fluids listed in the ‘**No**’ and ‘**Yes, but not enough virus for it to be infectious**’ columns carries no risk of being infected with HIV.
  - It is only coming into contact with the fluids listed in the ‘**Yes, enough virus to be infectious**’ column where there might be a risk of becoming infected with HIV.
  - For these body fluids to be infectious, the virus needs to be of a good quality. Once outside the body, any virus in these fluids will be quickly damaged by the air, heat and light, making the quality of the virus poor.
  - Therefore, there has to be a way for these infectious body fluids to get into someone else’s body without the virus being damaged. This is the way you get HIV.
- Give time to discuss issues arising. Quite a lot of this information may be new for learners.
- Explain to the group that the next activity will look at how to avoid getting HIV.
- An alternative method for this activity, avoiding too much presentation, is for the group to be divided into smaller groups and given a set of header cards and bodily fluid cards. These small groups would then consider which cards go under each heading and then present their group decision.
- Learners are unlikely to know all the correct answers, so you will need to conclude by guiding the groups to place cards in the correct headings. Give plenty of time to discuss the correct answers.

*The HIV virus lives in the fluids of the body. What body fluids can you think of? That is, anything that is wet, runny or sticky that comes out of your body.*

*So which heading does ‘blood’ go under? Do you think the HIV virus lives in blood? If it does live in blood, is it enough to be infectious? Yes, you’re right, blood does contain the virus and it is strong enough to be very infectious.*

## Support

- Not all learners will understand where particular body fluids come from. It may be helpful to relate body fluids to the body diagrams from Theme 1, Resources 2a and 2b.
- Getting learners to do this activity themselves should only be done with learners who have good reading skills or where groups are able to work supportively.
- Make sure all learners are involved in the discussion and confirm understanding by asking questions.
- Encourage learners to use the glossary to check the meanings of words. Remember they may need support for this.

## ESOL

- Be aware of cultural or religious sensitivities relating to describing particular bodily fluids.
- Check there is a common understanding of words used to describe bodily fluids as these may be unfamiliar terms. A more detailed description may be required for some learners, e.g. 'semen or cum is the fluid that comes out of a man's penis when he is having sex or masturbating'. It might help to use the glossary to look up these terms.
- You may also need to define some of the other words used in this activity, e.g. infectious, virus. Again the glossary will help.

## ACTIVITY 4

### Safe and unsafe activities – how to avoid HIV

- Using cards prepared from **Resource 4: Safe / unsafe activities – how to avoid HIV**, place the two cards that read **Safe** and **Unsafe** on the floor facing the group. Read the words and ask learners what they mean in this context. Place the picture cards in a pile face down.
- Ask each learner in turn to pick a card and say what they think the picture represents. Then ask them to think about the information given about body fluids in this theme and decide whether this is a safe or unsafe activity in terms of HIV transmission and then place it under the appropriate header card. Ask the learner to explain why they have placed it in that position. Confirm that none of the people having sex are using condoms or anything else of that sort (note that safer sex is covered in Theme 4).
- Only the person with the card should speak until they have completed their task. Then open up discussion to other learners. Do they agree or disagree, and why? The teacher should guide the group to place the card under its correct heading before the next learner picks a card.
- Once all the cards have been placed and discussed, ask the group if they have any remaining questions about any of the cards. Expect there to be a lot of questions about different sexual and other practices and the risk of HIV. You may need to counter any prejudice and judgement expressed in the group about some of the activities, e.g. homophobic attitudes or values towards oral sex.
- Ask the whole group to consider the activities in the **Unsafe** column and ask how they can be made safe or safer. Hopefully the group will provide the answers, but particular points to make are:
  - using condoms for all penetrative sex will make these activities safer (check the glossary for a definition of penetrative sex and

*This word says 'safe' and this one 'unsafe'. What does this mean when we're talking about HIV and having sex? What is 'safe sex' and what is 'unsafe sex'? What are safe activities and what are unsafe?*

*What's happening here? None of the people here are using condoms. Is it a safe sex activity, or not? Think about the body fluids that contain the virus and those that don't.*

remind learners about the discussion on penetrative sex in **Theme 1**)

- oral sex is safer than penetrative sex, but condoms and dams (see the glossary for a definition, but these are described in **Theme 4**) can further lessen the risk
- not sharing needles for taking drugs like heroin will make this safe
- if needles are shared, making sure they are properly washed and disinfected will make this safer
- mothers who are HIV positive are (currently) advised to use formula milk and not to breastfeed.

### Support

- Some learners may need support to understand the relationship between particular bodily fluids and the activities portrayed in Resource 4. Again it might help to use the body diagrams from Theme 1, Resources 2a and 2b.
- Learners are asked to describe or explain sexual or other acts they may find embarrassing or for which they may not have the words. All participants need to be sensitive about this and remember confidentiality. Some learners may need support to express themselves effectively.
- Learners are asked to discuss quite sensitive issues in this activity and they may need support to participate effectively in a discussion, e.g. for turn-taking, respecting the views of others, not interrupting, listening carefully to the views of others and achieving some kind of consensus.
- As some of the picture cards depict sexual acts, you should acknowledge this but reassure learners that they are cartoons and not graphic.

### ESOL

- Some of the sexual activities depicted in the cards may be illegal in some countries. You may need to state that if they are consensual acts (i.e. both parties agree to them) then they are not illegal in this country.
- It may be helpful on occasion for you to paraphrase the reasons given by learners for placing their card, in order to help group understanding.
- It may be helpful to think of other words where the prefix 'un-' gives an opposite meaning, e.g. happy / unhappy, lucky / unlucky.

## ACTIVITY 5

### Revisiting first thoughts

- At the start of this theme (in the **Engage** section) learners were asked what HIV and AIDS meant to them. Taking the flipchart notes prepared during this activity, ask the group which they now feel are correct, which are not correct and which they are still not sure about.
- It may be helpful for the teacher to read each point from the flipchart to the group before discussing these.
- To summarise, the teacher will need to explain which are correct statements and which are not correct and why. It might be useful to think of them in terms of fact and opinion or belief. If it's a fact, then there is medical or other evidence for the statement. If it's an opinion or a belief, this means that you think or believe something but it may not actually be true. So HIV being caused

by a virus is a fact, but that HIV can be caught only if you have anal sex is a (mistaken) belief.

- Explain to the group that in **Theme 6** they will look at where to go for information, advice and support about HIV including where to have an HIV test.

### Support

- Understanding the difference between fact and opinion or belief is quite a sophisticated skill. Picking up or identifying a fact from speech or writing is also quite hard.
- Learners may need to spend some time considering what it is about statements that indicate that they are facts, i.e. the type of language used to indicate facts and opinion/belief, e.g. phrases such as 'I think that...', 'I feel that...', 'We know from research that...'
- It can be particularly confusing for people to understand that a common tactic is to phrase an opinion as if it were a fact, such as 'Everyone knows that only gay men get HIV.' or 'Only promiscuous people get infected.' Discuss this and ask learners to consider how else you can tell facts from opinions. Is it always possible to do this?
- Learners are asked to discuss quite sensitive issues in this activity and they may need support to participate effectively in a discussion, e.g. for turn-taking, respecting the views of others, not interrupting, listening carefully to the views of others and achieving some kind of consensus.

### ESOL

- The language of fact and opinion / belief (see opposite for further ideas) may also be difficult for ESOL learners.
- Ensure ESOL learners are clear about which statements are correct and which incorrect.

### Action

- Give learners leaflets on HIV and AIDS and ask them to look at these before the next session and bring any thoughts or questions about these to discuss before proceeding with **Theme 4** which is about safer sex.
- Learners could be encouraged to collect some facts and opinions or beliefs about sexual health in general or HIV/AIDS in particular. These could be from reading leaflets, newspapers, websites or from discussions and conversations. Use these as the basis of a discussion or a role play of how to respond to questions or comments about HIV/AIDS. For instance, what would you say if someone said "It's only gays who get AIDS."
- Learners could look at the Terrence Higgins Trust website <http://www.tht.org.uk/> or the NHS site <http://www.nhs.uk/Livewell/Pages/Livewellhub.aspx> for more information, and bring anything they have found to the next session.
- **Resource 5: HIV and AIDS – the facts** is a set of teacher notes but could be used with learners who have good reading skills.

# HIV and AIDS name cards

RESOURCE 1

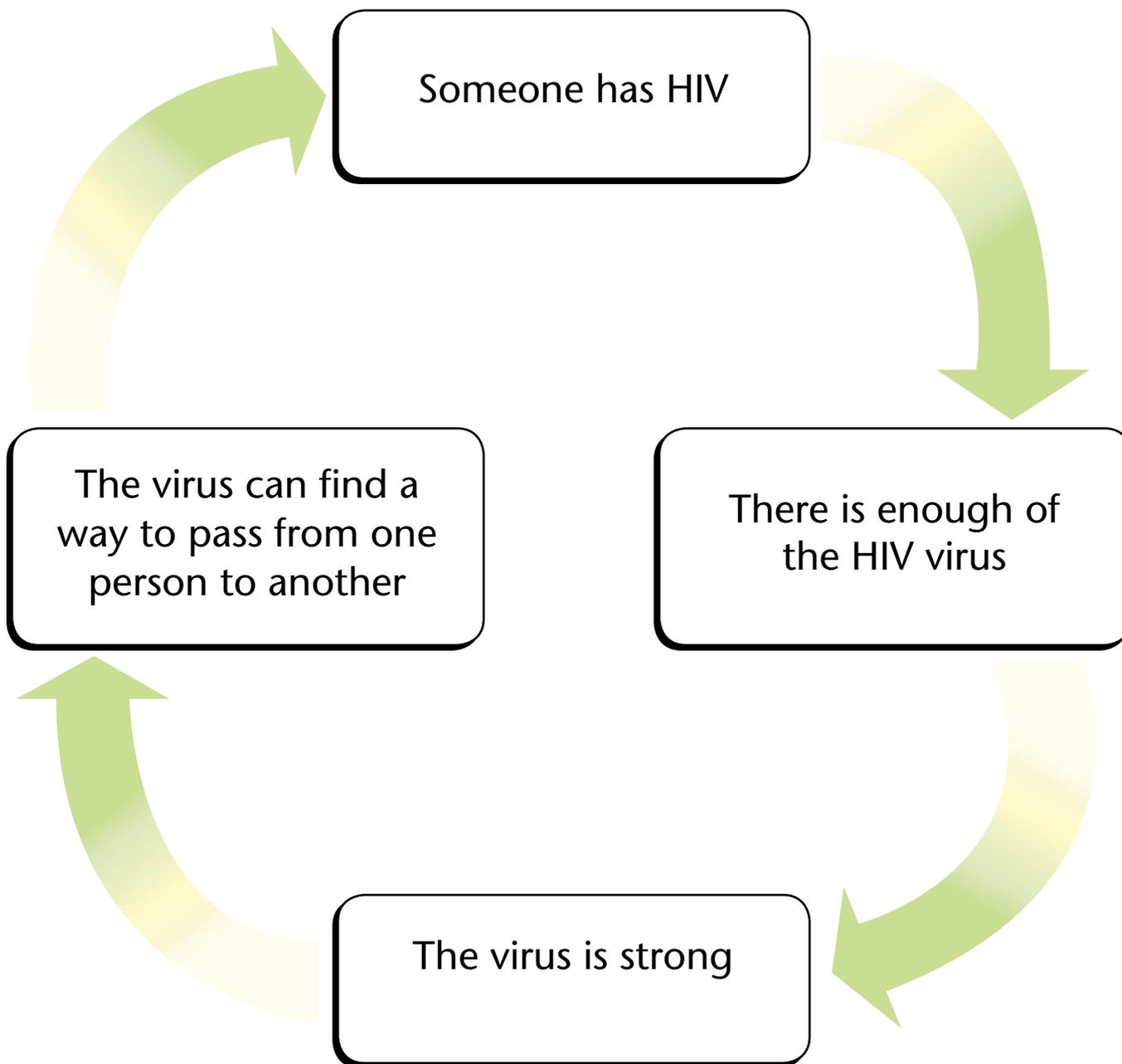
## HIV

Human	Horrible
Healthy	Hostile
Immunodeficiency	Invading
Infectious	Invisible
Virus	Vaccine
Visitor	Violent

## AIDS

Acquired	Angry
Advanced	Acute
Immune	Irritating
Illness	Infectious
Deficiency	Destroying
Disease	Deadly
Syndrome	Symptoms
Sexual illness	Sickness

## How you get HIV



For HIV to be passed on from one person to another all these things have to happen.

# Where does HIV live in the body?

RESOURCE 3

<p><b>Yes</b></p> <p><b>Enough virus lives in these fluids to be <u>infectious</u></b></p>	<p><b>Yes</b></p> <p><b>The virus lives in these fluids but there is <u>not enough of it to be infectious</u></b></p>	<p><b>No</b></p> <p><b>The virus <u>does not live</u> in these fluids</b></p>
Blood	Saliva	Urine
Semen	Sweat	Faeces
Vaginal fluids	Tears	Vomit
Breast milk	Nasal mucus	
	<p>Blister fluid</p> <p>Pus</p> <p>Scabs</p>	

**Safe**

**Unsafe**

# Safe/unsafe activities – how to avoid HIV

RESOURCE 4B



Shaking hands



Male-female vaginal sex



Male-male anal sex



Sharing cups and glasses



Male-female anal sex



Being sneezed / coughed on



Kissing



Male-female oral sex

# Safe/unsafe activities – how to avoid HIV

RESOURCE 4C



Female-male oral sex



Massage



Male-male oral sex



Hugging



Sharing a toilet / using a public loo



Female-female oral sex



Breastfeeding a baby



Being spat on

# Safe/unsafe activities – how to avoid HIV

RESOURCE 4D



Most people have heard of HIV and AIDS. These are words that you often see in the newspaper or hear on TV. But do you know the facts about HIV and AIDS? Did you know that the main way people get infected with HIV is by having unprotected (not using a condom) sex?

HIV is still around. The number of new cases rises every year. In fact, there are more than 70,000 people living with HIV here in the UK. Worldwide there are over 40 million people who have HIV.

You may have heard that HIV is a 'gay disease' or an 'African disease'. Neither of these is true. HIV can affect anyone – whether you are male or female, young or old, gay or straight, black or white, rich or poor.

There are now drugs that can help keep the levels of HIV virus in someone's body at a low level. These drugs help many people to keep healthy for a long time. However, there is no cure or vaccine for HIV.

## What is HIV?

HIV stands for Human Immunodeficiency Virus.

It is a virus that attacks the body's immune system. It does this by attaching itself to the cells that help to protect us from illness and keep us healthy. If it isn't treated, the HIV virus kills off these cells. This makes the immune system so weak that it cannot fight off infections and other illnesses.

HIV is transmitted sexually. Most of the 40 million people infected with HIV got it by having unprotected sex with a person who had the virus.

## What is AIDS?

AIDS stands for Acquired Immune Deficiency Syndrome.

AIDS describes what happens to someone who has had HIV for some time so that their immune system is badly damaged by HIV. Illnesses you normally get over quickly can take hold and affect you very badly. These include bacterial and fungal infections as well as rare kinds of cancer, types of pneumonia and brain diseases.

HIV and AIDS are not the same thing. Someone who has HIV can live for many years before getting AIDS. You can't catch AIDS, but you can catch HIV. People do not die from HIV but from an AIDS-related illness.

## How do people get HIV?

When a person has HIV, the virus is in many of their body fluids.

In body fluids like saliva (spit), sweat and urine, the level of virus is low and the quality of virus is poor. This means that there is absolutely no chance of getting HIV by coming into contact with these fluids.

So you cannot get HIV:

- by kissing, hugging and touching someone who has HIV
- by sharing cups/glasses and crockery with someone who has HIV
- by eating food prepared by someone who has HIV
- from toilet seats
- from insect bites.

Some types of body fluids have a high level and strong quality of HIV so that they are very infectious. These are:

- blood
- vaginal fluids
- semen (cum)
- breast milk.

But just touching these body fluids is not a risk for getting HIV. There has to be a way for these infected body fluids to get into your blood.

The main ways for people to get HIV are:

- unprotected sex (sex without a condom) with someone who has HIV
- sharing needles and syringes for taking drugs (such as heroin or steroids) with someone who has HIV
- having a blood transfusion outside the UK
- from mother to child. Pregnant women who have HIV have advice about not passing on the virus to their baby. This may mean no breastfeeding.

## How do you know if you have HIV?

The simple answer is, you don't.

You cannot tell by looking at someone whether they have HIV or not. A person with HIV can feel very healthy and not know they have it. But they can still give it to other people.

The only way to know for sure is by having a blood test. This blood test can detect HIV a few weeks after infection.

## Can you get HIV from any type of sex?

All types of sex are high risk for getting HIV. These types of sex have a very high risk:

- vaginal penetrative sex
- penetrative anal sex.

This is sex where the penis penetrates – is put into – the vagina or anus (bottom). This affects men and women, gay or straight. It doesn't matter if you are the person being penetrated (the receiver) or the person penetrating (the giver).

Oral sex has some risk of getting HIV, but the risk is much lower than penetrative sex. If your mouth or throat is unhealthy, this can increase the risk of getting HIV from oral sex. If there is damage from bleeding gums, mouth ulcers or from a bacterial sexually transmitted infection (e.g. syphilis, gonorrhoea or chlamydia) then the risk is even greater.

Oral sex performed on a man (blow job) is higher risk than oral sex performed on a woman (going down).

## Making sex safer

Most people who have HIV have been infected because they have had unprotected (without using a condom) penetrative or oral sex.

Condoms are a very good barrier to the HIV virus if you use them correctly, and every time you have sex. They can also help to stop you getting other sexually transmitted infections (STIs) like gonorrhoea, chlamydia and syphilis.

There are many types of condom. Finding out which type you like best can be fun. There are flavoured condoms that can be used for oral sex on a man. There are also dams that can help to stop infection from oral sex on a woman.

Condoms are free from most sexual health clinics.

If you know that you can get HIV by having unprotected sex, you can protect yourself and your partners from infection. Sex can be safe and fun at the same time. Using a condom means you can have sex and enjoy yourself, without worrying about HIV and other infections.

## Where to go for help and support about HIV

You can get information about HIV and HIV testing from any sexual health clinic. Phone NHS Direct on 0845 46 47 to find the clinic nearest to where you live.

You can also phone the sexual health line on 0800 567123.