

### **Aims of the Respect Programme:**

- To enable students to develop a framework for responsible decision making around the issue of their sexual health, especially in the light of the HIV/AIDS crisis
- To promote gender equality given that the lower status of women in society may make them more vulnerable to the transmission of the virus
- To recognise that the presence of STI's may act as a co-determinant to the HIV virus
- To promote an understanding that sexual behaviour is not just a personal matter, but has social and community implications as well.
- To provide not only the knowledge but engender the skills and attitudes that will help protect young people from STI and HIV infection
- To dispel common myths about modes of HIV transmission
- To promote understanding of the importance of being tested for HIV infection
- To counteract prejudicial attitudes towards those who are HIV positive
- To promote knowledge and understanding of living positively with HIV
- To promote self esteem and confidence

### **The Learning Environment**

In organizing the learning environment, the teacher will be careful to create an atmosphere which respects the privacy of each individual student and treats all individuals with sensitivity and care. It would be particularly important to consider the religious and cultural sensitivities in the delivery of this programme.<sup>1</sup>

### **Establishing Ground Rules in Class**

In all sexuality and life skills programmes, it is advised that the teacher would have some agreed set of rules for conduct in the class. These should come about as a result of discussion with the students, so that a consensus is reached. Examples of ground rules for these classes might include the following:

- We all agree to respect each other
- We are not expected to make any kind of personal disclosure, or reveal any details about our own personal situations
- We agree to give each other time to speak, and listen to each other's ideas
- We agree not to laugh at each other's ideas or gossip about what people have said in class

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<sup>1</sup> *Department of Education and Science/National Council for Curriculum and Assessment, Social, Personal and Health Education Guidelines, 2006.*

These guiding rules can be added to, and if put up on the wall of the classroom, they act as a reminder to people who break the ground rules.

### Teaching and Learning Strategies

In conjunction with Camara's Respect Programme, the teaching methodologies employed should as far as possible incorporate participatory, active teaching methodologies. Examples of such methodologies include the use of:

- **Brainstorming**
- **Group work**
- **Pair work**
- **Role Play**
- **Art Work**
- **Narrative expression (use of stories and poems)**
- **Games/Quizzes**
- **Debates**
- **Project work**
- **Visitors**
- **Use of other multi-media resource materials suggested in Resource Section of Camara's Respect Programme**

### Active Learning Rationale

We tend to Remember:

10%	READING
20%	HEARING WORDS
30%	LOOKING AT PICTURES
50%	LOOKING AT AN EXHIBITION WATCHING A DEMONSTRATION
70%	PARTICIPATING IN A DISCUSSION GIVING A TALK
90%	DOING A DRAMATIC PRESENTATION

*(From the Centre for Teaching Effectiveness, University of Austin, Texas)*

Thus, the more we move from *passive* to *active* involvement, the more we learn.

With reference to health, sexuality and relationship programmes, evidence shows that knowledge alone does not change behaviour (i.e. knowledge of modes of HIV transmission may not necessarily mean that the person will desist from unsafe sex, in the same way as knowledge that cigarette smoking may cause cancer may not stop a person from smoking). In this regard education that has active components that can be described as experiential learning caters not just the domains of knowledge but the affectual domain and is more likely to bring about attitudinal change. Attitudinal change along with skills like assertiveness and the ability to communicate openly and honestly are vital components in sex education that works. This approach assists in the process of allowing any young person to protect themselves and others, especially in the context of a society where HIV/AIDS remains a threat to the health and well being of its young citizens.

## **Content of Respect Program**

### 1. Relationships and Sexuality

- ✓ Introduction
- ✓ Relationships
- ✓ Sexuality
- ✓ Gender
- ✓ Summary

### 2. STIs, HIV and AIDS

- ✓ Introduction
- ✓ STIs
- ✓ HIV
- ✓ AIDS
- ✓ Summary

### 3. ABC of HIV Prevention

- ✓ Introduction
- ✓ Abstinence
- ✓ Being tested & being faithful
- ✓ Condoms
- ✓ Summary

### 4. Getting Tested

- ✓ Introduction
- ✓ Why get tested
- ✓ About the test
- ✓ After the test
- ✓ Summary

### 5. Living with HIV

- ✓ Introduction
- ✓ Antiretroviral Therapy
- ✓ Lifestyle changes
- Summary

## Module 1 [Relationships and Sexuality](#)

✔ <a href="#">Introduction</a>	(1 minute)
✔ <a href="#">Relationships</a>	(6 minutes)
✔ <a href="#">Sexuality</a>	(6 minutes)
✔ <a href="#">Gender</a>	(5 minutes)
✔ <a href="#">Summary</a>	(1 minute)

Total viewing time: 19/20 minutes

### Topic 1

#### Learning about Relationships

**Aims:** To deepen students understanding of the differences between healthy and unhealthy relationships

**Outcomes:**

As a result of this lesson, students should be able to:

- Identify characteristics of a healthy and unhealthy relationship
- Have considered strategies for improving relationships

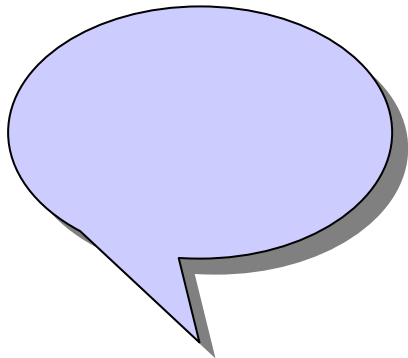
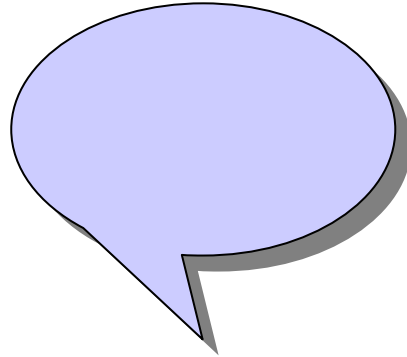
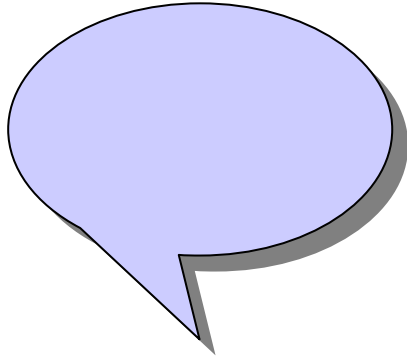
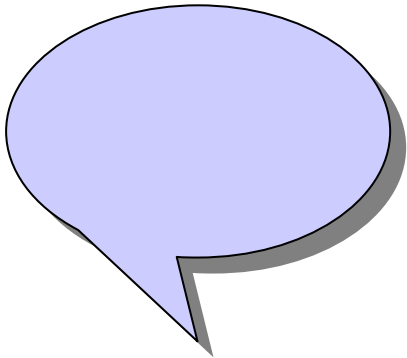
**Materials needed:** Camara's Respect Program – Module 1 – Introduction and Section on Relationships. Chalk/Blackboard.

**Optional:** Paper and Pens for students Copies of student worksheets – if facilities allow for photocopying

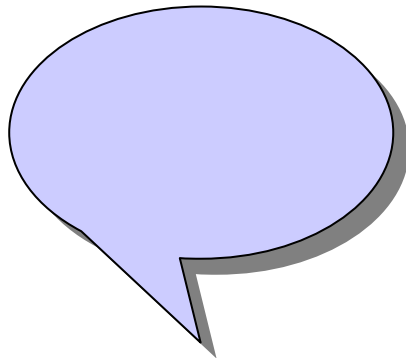
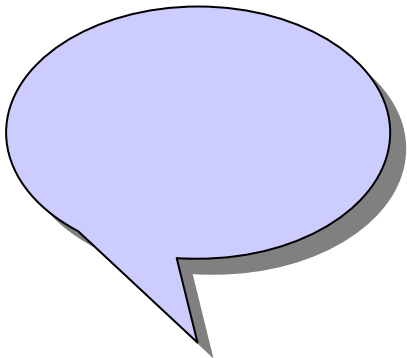
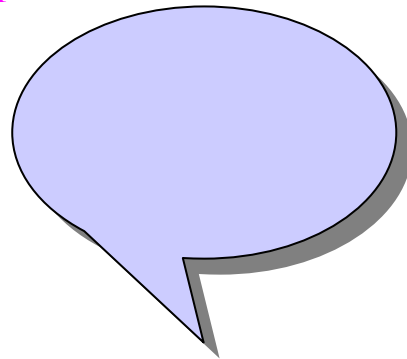
**What to do:**

1. **Brainstorming** – Teacher asks class to brainstorm and see how many types of relationships that they can name
2. Teacher asks students use adjectives to describe how a good/bad relationship makes you feel (these can be added to after viewing the Respect Program) and writes words on board or asks students to do so
3. Students **view** and **listen** to Module 1, Topic 1 on Relationships, and the elements of a healthy and unhealthy relationship as described by Counsellor Ramarou.....
4. Ask the students in pairs to jot down the **key words** she uses to describe a healthy/ unhealthy relationship
5. Ask students if they can think of **other examples** of what makes a relationship healthy or unhealthy
6. Ask students to note key words that Counsellor Ramarou uses to describe an abusive relationship, and ask students to **discuss** what they would consider the most damaging type of behaviour in an abusive relationship
7. Finally, Counsellor gives some practical tips to make a relationship better, ask students to add to her list

# Student Worksheet 1, Module 1, Topic 1 Relationships



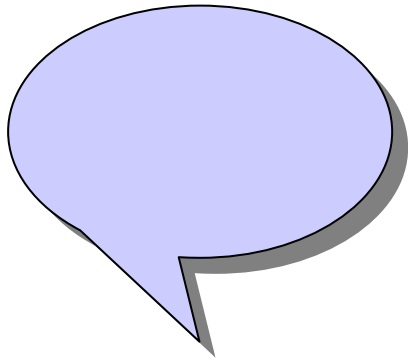
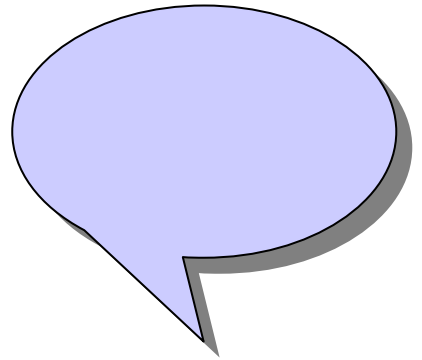
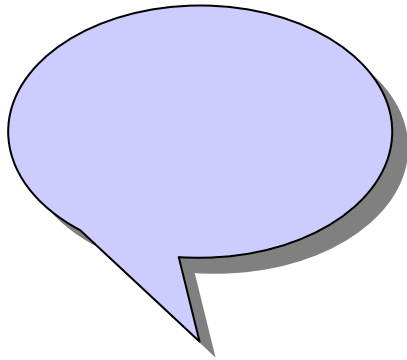
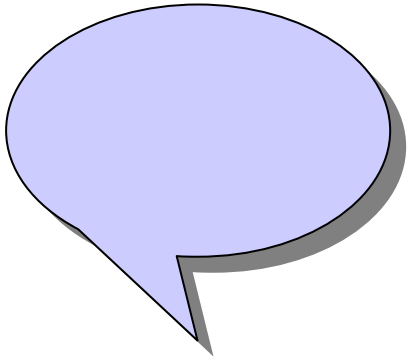
**COUNSELLOR RAMAROU  
SAYS THAT HAVING A HEALTHY  
RELATIONSHIP MEANS.....**



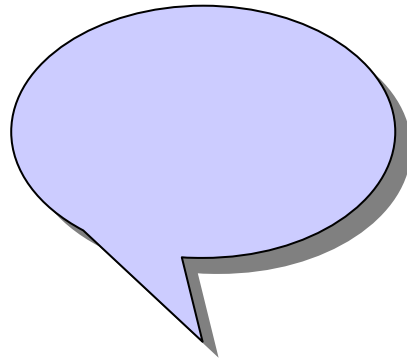
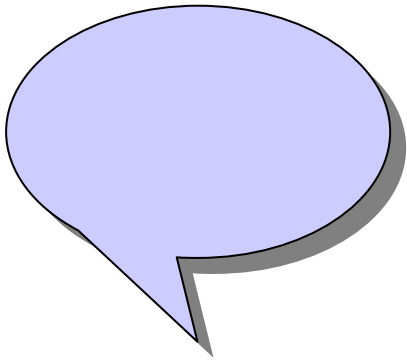
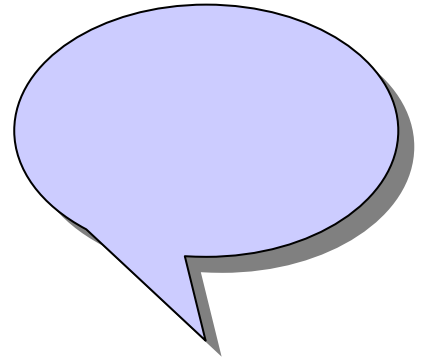
*We think that having a healthy relationship might also mean...*

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## Student Worksheet 2, Module 1, Topic 1 Relationships



**COUNSELLOR RAMAROU  
SAYS THAT HAVING AN UNHEALTHY  
RELATIONSHIP MEANS.....**

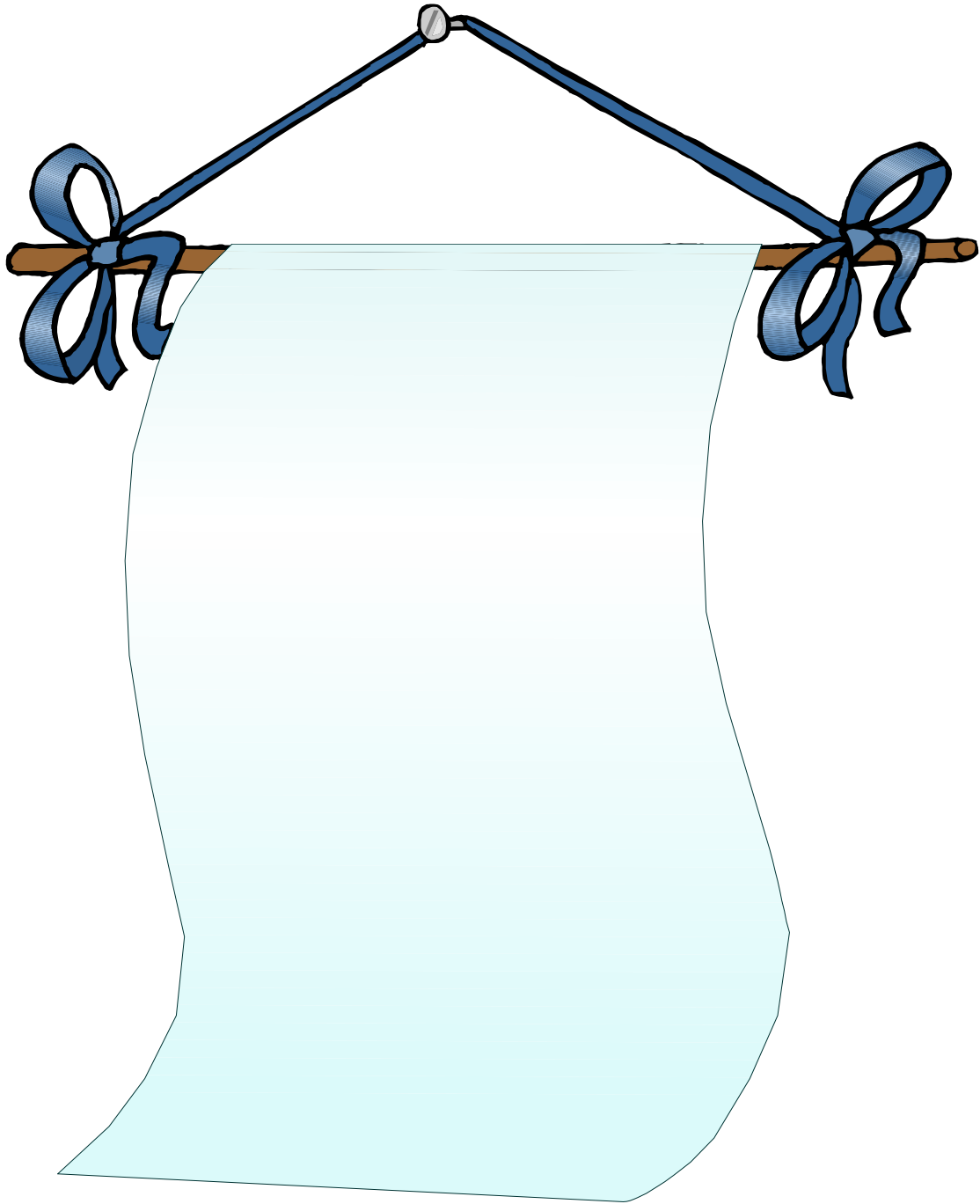


*We think that having an unhealthy relationship  
might also mean.....*

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# STUDENT WORKSHEET 3 - Module 1 Topic 1 RELATIONSHIPS

## *Our Better Relationship Charter*



## Reference Material for Teacher – Main Points of Content of Topic 1 – Relationships

Introduction: What is respect about?

Relationships –

- What is a relationship to you?
- What is a good relationship?
- How should you feel in a good relationship? (positive, confident, wanted)
- How might you feel in a bad relationship? (confused, angry, trapped)

A healthy relationship means:

- Communicating
- Being respectful
- Trusting
- Honest
- Equal
- Being able to enjoy personal space
- Making consensual sexual decisions

An unhealthy relationship means:

- Being disrespectful
- Not trusting
- Dishonest
- Trying to take control
- Feeling smothered
- Pressuring the other into sexual activity

An abusive relationship means:

- Communicating abusively
- Being disrespectful through abuse
- Falsely accusing the other of flirting or cheating
- Does not take responsibility for abuse
- Controls the other partner
- Isolates the other partner
- Forces sexual activity

Practical tips to make a relationship better:

- Listen to the other's point of view
- Be respectful
- Make your point as clearly as you can
- Be open, be honest, be reasonable
- Choose a good time to discuss touchy subjects

## Topic 2

### Sexuality

**Aims:** To promote understanding of what it is to be a sexual being. Also to promote understanding that the decision to become sexually active is an important decision that should be taken only after careful consideration, and should never be subject to coercion.

**Outcomes:**

As a result of this lesson, students should be able to:

- Define what sexual intercourse is, what safe and unsafe sex means
- Have a deeper understanding of important factors to consider when making a choice to become sexually active
- Demonstrate that they have the skills necessary to communicate and negotiate with a boyfriend/girlfriend limits as regards to sexual activity if/when desired.

**Materials needed:** Camara's Respect Program – Module 1 – Sexuality. Chalk/Blackboard

**Optional:** Paper and pen for students. Copies of student worksheets – if facilities allow for photocopying

**What to do:**

1. Students **view** and **listen** to Module 1, Topic 2 on Sexuality.
2. Students **discuss** in pairs/ groups any differences that our sources of information when learning about sexuality might make – i.e. learning about sexuality from friends, the media, at home, in school etc. (Some sources may make sex seem glamorous, others may make sex seem frightening, while sources – such as school friends may be a source of **misinformation**)
3. Ask students if they have **any unanswered questions** about what 'having sex' means – ( if students are embarrassed, they could write down their questions anonymously, fold over the sheet, get another student in class to collect questions, which the teacher could review later and address in another class).
4. Counsellor Ramarou says that making the decision to have sex is a 'big deal'. Ask students to **brainstorm** what kind of things a person would need to consider before making this important decision.
5. Counsellor Ramarou says that having sex is only one way to show you care about someone. Ask students **to suggest** ways in which a relationship could be developed or enriched without having full sexual intercourse
6. Ask students in pairs/ groups to **rank** in order of importance reasons why having sex may not be a good choice in certain circumstances ( option students could fill in worksheet 4)
7. In pairs/groups ask students to prepare a **role play** where one student acts as the "boyfriend" whose role it to try and persuade his "girlfriend" to have sex, while the "girlfriend" gives reasons as to why she would rather wait (using the

information suggested by Counsellor Ramarou in the Respect Programme). This exercise could also be done reversing gender roles, with the “girlfriend” trying to persuade her boyfriend to have sex, and the “boyfriend” giving reasons as to why he would prefer to wait.

8. Ask students to distinguish between safe and unsafe sex, and to suggest a number of consequences of unsafe sex.

#### **Key questions for discussion/ debate –**

- **What have we learned from the Respect Programme about the nature of human sexuality?**
- **How strong are local cultural/ religious factors an influence when considering sexual relations?**

#### **Reference Material for Teacher – Main Points of Content of Topic 2 – Sexuality.**

1. **Sexuality: What is it all about?**
  - **Sexuality is about all parts our sexual lives. It is about our bodies, feelings, thoughts, behaviour and desires as young men and woman towards ourselves and each other.**
  - **It is about the way we dress, walk and talk, dance and express our sexual feelings, and the things we enjoy as sexual beings.**
  - **We are born as sexual beings and sexuality is an important part of our personality, from when we are born to when we die.**
  - **We can enjoy feeling and expressing our sexuality in different ways through our lives. We do not have to have sexual intercourse to enjoy our sexuality.**
2. **Where do we learn about sexuality?**
  - **We learn about sexuality in our culture from our elders, books, newspapers, films and friends**
  - **These days we need to learn about sexuality at school because of the danger of HIV. Young people need to know how to protect themselves from HIV at an early age.**
3. **What is sexual intercourse?**
  - **Sexual intercourse is the physical act of a man putting his penis into his partner’s vagina or anus and moving together. This is called ‘having sex’.**
  - **Sexual intercourse is the main way that HIV is passed from one person to another in Lesotho. As young people we can enjoy our sexuality without having sexual intercourse.**
4. **How do I know that I am ready for sexual relations with my boyfriend? Counsellor Ramarou give Mpho some things to consider when making the important decision to have sex –**
  - **It’s a big deal – you should feel ready for sex and not pressurized by friends or a partner**

- You must learn about safe sex and contraception
  - Wait until you feel safe in the company of your partner, and be sure you want to take the relationship further
  - Do you trust your partner and feel they respect you?
  - Respect your own feelings and beliefs, if you are not ready to have sex, don't do it
  - Talk to an adult you trust or contact a helpline.
5. Mpho is afraid that her boyfriend will lose interest in her if she does not have sex. Counsellor Ramarou advises that:
- Building a loving relationship takes time, care, respect and trust on both sides and that sex is not the only way of showing someone that you care. Having sex does not mean that you will fall in love. You can spend personal time together without having sex
  - By talking and sharing experiences you can learn something more important about each other. How you view life, decisions that you would make together, what kind of partner or parent you would make, and how you feel about each other's plans for life
6. Counsellor Ramarou asks Mpho to remember:
- Don't have sex because your friends think it's cool
  - Don't think love and sex are the same thing
  - Don't get carried away with romance
  - Don't allow drugs or alcohol change your mind
7. Counsellor Ramarou gives wrong reasons to have sex.....
- Thinking everyone is jumping into bed (they are not)
  - Being put under pressure to have sex
  - Being under the influence of alcohol or drugs
  - Thinking that having sex is going to make you more mature, cooler or changed for the better. Sex isn't going to make you more sophisticated or cooler than before.
8. Mpho says her religion says she shouldn't have sex until she is married – and is confused. Counsellor Ramarou advises that religion, family and community are important influences on how you think about sex and sexuality. Every religion has its opinion on what is right and wrong when it comes to sex. Counsellor Ramarou advises Mpho that if she feels unsure on what is right or wrong to talk to her priest/minister/pastor/partner etc.
9. What about safer sex – what does this mean?  
Safe sex is described as the practice of sexual intercourse in a manner that reduces the risk of sexually transmitted infections and HIV
10. What is unsafe sex?  
Unsafe sex is described as the practice of sex without regard to the prevention of STI's.
11. What can make sex safer?
- You must plan before you have sex
  - You must let your partner know how important it is to protect yourself. If you find it hard to talk to your partner, you could pretend that you are talking about another couple.

## Student worksheet 4, Module 1, Topic 2 Sexuality

Mpho is afraid that her boyfriend might lose interest in her if she doesn't have sex. However, she is not sure that she wants to go further in the relationship. She is thinking about her reasons for saying no at this time. Fill in the thought bubbles with reasons why Mpho might wish to delay sexual activity. Also make suggestions for other ways she and her boyfriend might build up a loving relationship.



### Topic 3

#### Gender

**Aims:** To increase awareness of the link between gender based violence and HIV.

#### Outcomes

As a result of this lesson students should be able to:

- Identify what is meant by the terms sex and gender
- Have a deeper understanding of gender stereotyping as negative and limiting
- Identify factors which make HIV infection different for women.

**Materials Needed:** Camara's Respect Program – Module 1 – Gender. Chalk/Blackboard.

**Optional:** Paper and Pens for students. Copies of student worksheets – if facilities allow for photocopying

#### What to do:

1. **Brainstorming** – ask students if they can explain what stereotyping is (oversimplified standardized image of person or group). In pairs/ groups students give examples of groups in society that are often stereotyped – hints: teenagers, old people, teachers etc.
2. In pairs/ group students **identify** stereotypical characteristics of the groups they have named. Attention should be brought to whether the characteristics they have described are positive or negative. Students should be asked to consider why negative stereotyping is unfair.
3. Students **view** and **listen** to Module 1, Topic 3 on Gender
4. Students should **discuss** what gender stereotyping means in their society. Teacher could write on board words used to describe traditional roles attached to men and women in terms of behaviour, work roles, dress etc. ( option – students could **fill in** worksheet 5). Another approach that could be taken would be to write the following statements on the blackboard, divide the class in two groups and ask students in groups to finish the sentences. The exercise would work best with a mixed sex group, but if you are working with a single sex group, ask one of the groups to take on the identity of the other sex.

**For Male students:**            *Because I am a boy/man I must  
If I were a girl/woman I could.....*

**For Female students:**      *Because I am a girl/woman I must....  
If I were a boy/man I could.....*

5. Ask students to explain how gender stereotyping leads on the one hand to power and on the other hand to powerlessness.
6. Ask students how to explain why it has been suggested that gender stereotyping limits what women and men hope to do with their lives?
7. Students are asked to **suggest** reasons for the links between gender based violence/ sexual exploitation and negative stereotyping of woman
8. Students are asked to **list** the reasons why Counsellor Ramarou says that HIV is different for women – ( option – students could fill in worksheet 6)
9. Students are asked in pairs/ groups to **devise strategies or ways** to ensure equal treatment and respect for everyone regardless of gender, in order to lessen the worst aspects of gender inequality which has a huge role to play in the spread of HIV. How can gender equality be promoted at home, in school, in the community? What needs to change to see this happening?

**Key question for discussion/debate:**

**“Expecting women to be submissive and men dominant is the best way to organize our community and society”**

**Reference Material for Teacher – Topic 3 – Gender**

**What is a stereotype?**

**A stereotype is a belief that all members of a given group share the same fixed personality traits or characteristics as a result of this group membership. While stereotyping can be positive or negative, all stereotypes are always based on an oversimplified generalisation of a social group. For example:**

- ‘All young people have loads of energy’
- ‘All older people are sick and frail’

**Stereotyping can diminish groups of people by seeking to limit their potential to fixed, and often negative, shared traits or characteristics. Negative stereotyping of women may encourage gender based violence and the sexual exploitation of women, which has increasingly been linked to HIV.**

**Main Points of Content of Topic 3 – Gender**

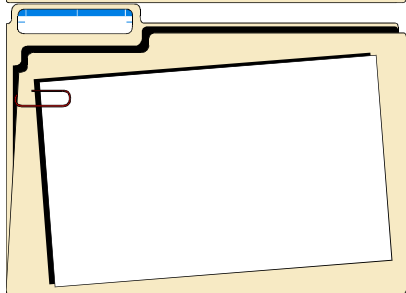
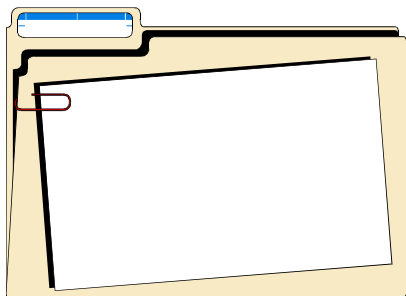
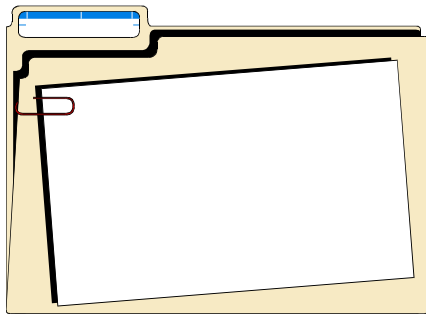
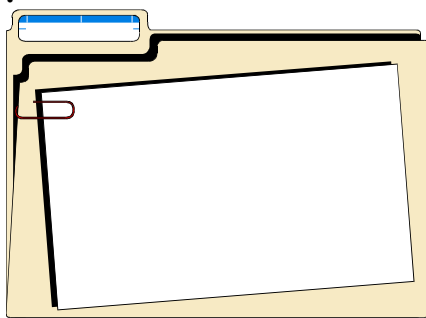
1. The term ‘sex’ and ‘gender’ describe two different things.
2. What does the term ‘sex’ describe?
  - Sex describes the biological and genetic differences between men and women. Only females have the organs and hormones to enable them to menstruate, get pregnant, deliver children and breastfeed.
  - Only males have the organs and hormones to enable them to produce sperm and impregnate women.
  - The differences are the work of nature, people cannot change them.
3. What does the term ‘gender’ describe?

- Gender describes the differences in the way that males and females are expected to behave, their dress, the work they do, the way they speak and behave, and their status.
  - These differences are created by society, not nature. They are part of our culture, and over time may change.
  - Gender roles describe what males and females are expected to do, for example in many cultures, a man is expected to cut down trees and a woman to cook.
  - Since we create gender roles, it is possible for us to change them. This happens all the time in response to our changing lives, and understanding of the affects of gender on the well being of women and men.
4. What is gender stereotyping?
- Gender stereotyping means that people from a certain group are always expected to behave in the same way. Gender stereotyping is when women and men are always shown in traditional roles. For example, the woman cooks and stays home to mind the children, and the man goes out to work.
5. What are gender values?
- Our self- esteem, relationships with others and behaviour are greatly affected by what our culture considers correct for males and females. These are our gender values. A woman is expected to be submissive and men to be dominant.
  - Gender stereotyping limits what men and women hope to do with their lives.
6. Examining the links between gender based violence and HIV –
- The link between gender based violence and HIV are becoming increasingly apparent based on the findings of various studies done in the United States and Sub Saharan Africa. Findings show an increased risk of HIV among women victims of gender based violence.
  - The sexual exploitation of girls and women is one of the most extended forms of gender violence, and an ongoing factor in the spread of HIV.
7. Why is HIV different for women?
- Women are more easily infected because of their physiology
  - Women are often infected at a younger age because they are likely to be married younger and less able to refuse unsafe sex
  - Women may be living with an untreated STI which will make them more vulnerable to the HIV virus
  - Because of childbirth women may have more blood transfusions
  - Pregnant women may pass the HIV virus on to their child
  - Poor nutrition, coupled with childbirth may make women less able to fight the virus
  - Women may be blamed unfairly if they contract the virus
  - Women are the caretakers in families who may have to look after family members who are sick with the HIV virus, despite being infected themselves.

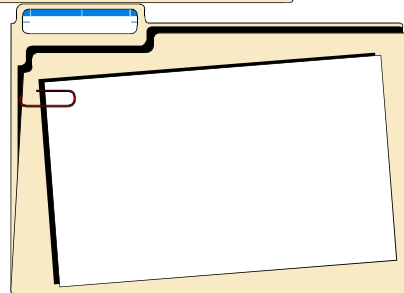
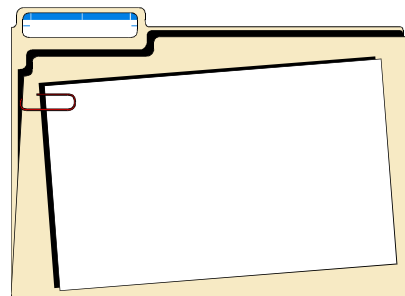
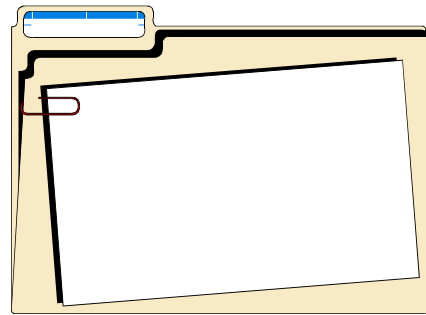
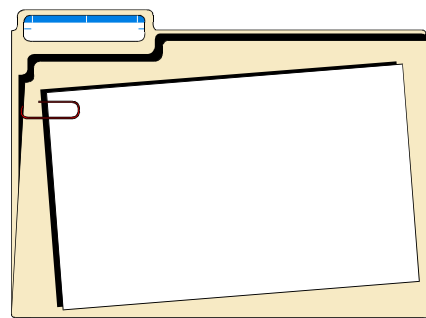
## Student worksheet 5, Module 1, Topic 3 Gender



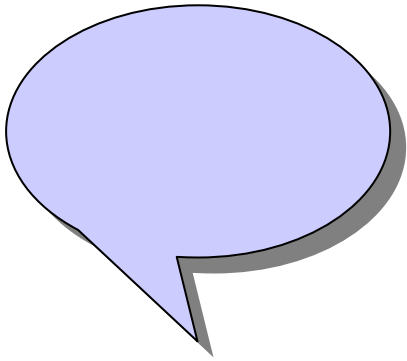
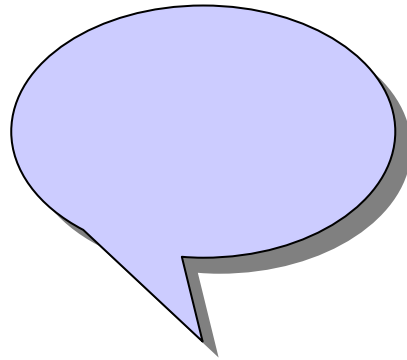
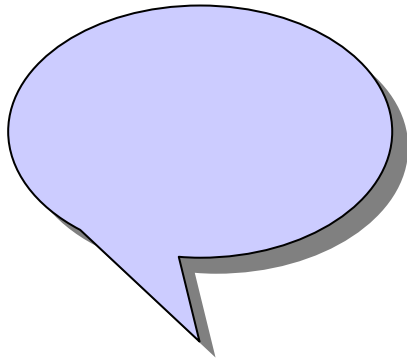
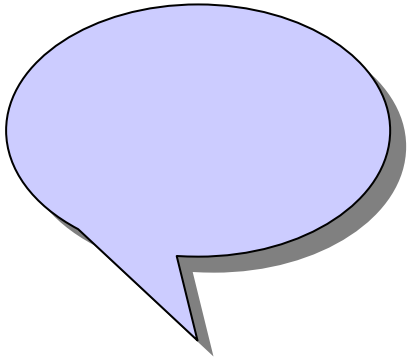
A stereotypical view of a woman sees her as...( use words to describe behaviour, work roles, dress, status etc)



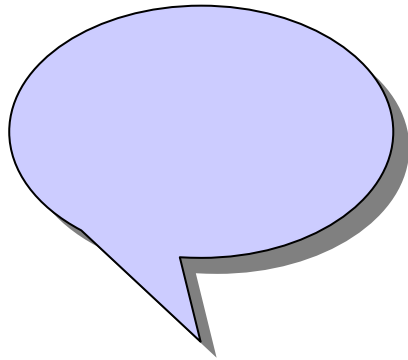
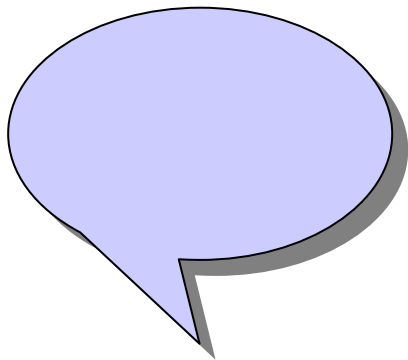
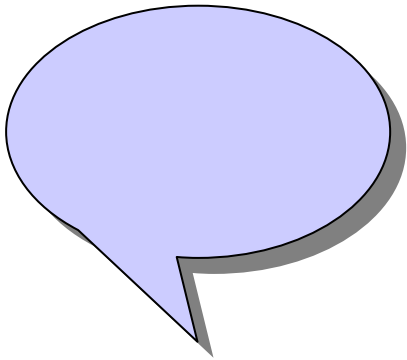
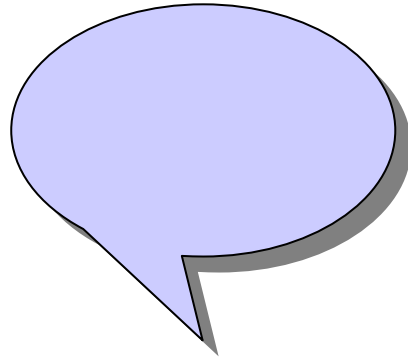
A stereotypical view of a man sees him as... (use words to describe behaviour, work roles, dress, status etc)



# Student Worksheet 6, Module 1, Topic 3 Gender



**COUNSELLOR RAMAROU EXPLAINS THAT HIV IS DIFFERENT FOR WOMEN BECAUSE OF THE FOLLOWING FACTORS.....**



## MODULE 2

This module is intended to dispel misconceptions and misinformation about what STI's (including HIV) are and how they are transmitted. Learning the facts will enable students to make more educated choices about their health.

- ✔ [Introduction](#)
- ✔ [STIs](#)
- ✔ [HIV](#)
- ✔ [AIDS](#)
- ✔ [Summary](#)

### Topic 1

Sexually Transmitted Diseases – STI's

**Aims:** To increase student's knowledge of STI's

**Outcomes:**

As a result of this lesson students should be able to:

- Demonstrate knowledge of what STI's are and name common infections
- Understand how STI's are transmitted
- Name the common symptoms of STI's
- Understand the importance of seeking treatment if an infection occurs

**Materials needed:** Camara's Respect Program, Module 2, Topic 1 – STI's.

Chalk/Blackboard.

**Optional:** Pen and paper for students. Resource sheet on STI's may be viewed by students under the resource section of the Respect Programme.

**What to do:**

1. Teacher may wish to gauge or check student's current level of knowledge of STI's prior to viewing Topic 1 by asking students if they can name any STI's. Teacher may wish to write up the infections named on board to be added to as the lesson progresses.
2. Students **view** and **listen** to Module 2, Topic 1 on STI's
3. Students are then asked in pairs/ groups:
  - What the letters STI's stand for?
  - How STI's are transmitted?

- How many types of STI's there are?
  - What can untreated STI's result in?
4. If students knowledge of common STI's is poor, students should **view** the **Resource Sheet on STI's** under the resource section of the Respect Programme ( also included here in Teacher's Reference Material)
  5. The scenario described where Tsepo talks on the phone to his friend about having unprotected sex with Selloane has some important points that should be **discussed**.
    - ***“How someone looks has nothing to do with whether someone has an STI or not”***. ( Teacher should make students aware that frequently STI's do not have any symptoms in women)
    - Tsepo says that ***“it will be hard to seek treatment”***.... Students should **discuss** reasons why this is so. Embarrassment? Lack of access to a clinic? Fear that family and friends might find out? If a teacher is aware of the nearest centre or clinic that tests for STI's and HIV then this information should be given to students.
  6. Students in pairs/groups are asked to **identify** 4 common symptoms of STI's as listed by Dr. Monyamane.
  7. Students should note that most infections (with the exception of Herpes and HIV) can be cured, but that treatment for STI's should be sought as soon as possible. Students should also be made aware of how important it is to complete any course of tablets prescribed by a doctor in the case of a sexually transmitted disease.

### Main Points of Content on Topic 1 – STI's

1. The letters **STI** stands for **Sexually Transmitted Infection**.
2. Sexually transmitted infections are passed from person to person during unprotected sex.
3. There are at least **25** types of STI's, all of them serious, but most completely treatable.
4. Untreated STI's can be:
  - **Painful**
  - **Can result in serious illness or infertility**
  - **Can increase risk of HIV infection**
  -
5. Scenario described where Tsepo talks on the phone to his friend about having unprotected sex with Selloane.
6. Dr Moyamane explains that while symptoms of STI's may be different in men and women, common symptoms include:
  - **Burning or itching of the genital area**
  - **Unusual discharge or smell**
  - **Sores/blisters in the genital area**
  - **Pain or swelling in the pelvic area**

**7. Most STI's can be cured except HIV and Herpes**

**8. Importance of seeking treatment as soon as possible if infection is suspected.**

**9. For more information on STI's students are referred to the Resource Section of the Respect Program.**

**Reference materials for Teachers on STI's from the Resource Section of Camara's Respect Program**

## **SEXUALLY TRANSMITTED INFECTIONS**

### **What is an STI?**

Sexually Transmitted Infection (STI) is an infection that is spread during sex (vaginal, oral or anal). STIs are very common and most are treatable. Untreated STIs can be painful and can result in serious illness and infertility and increases your risk of HIV infection.

#### **Common STIs include:**

<b>English:</b>	<b>Also known as:</b>
Chancroid	Sekamokada
HIV	Kokoana-hloko ea HIV
Syphilis	Mokaola
Genital herpes	Liso tse maqhanyatsa botoneng kappa botsehaling (mashoa)
Gonorrhoea	Seso se rothang
Chlamydia	Seso se setala se lekoeba
Hepatitis B	E iponahatsa ka mahlo a masehla
Genital Warts	Litatomoloko botoneng kappa botsehaling (mahae)
Inguina bubo	Litsoelesa

### **What puts me at risk of contacting an STI?**

- ✓ Being sexually active
- ✓ Having sex without a condom

### **How can I reduce my risk of contracting an STI?**

- 1) Abstinence is the ONLY way to ensure that you will not contract an STI including HIV.
- 2) If you are sexually active you and your partner should be tested for HIV and STIs.
- 3) Be faithful to your partner. Know his or her sexual history.
- 4) Consistently use condoms and avoid unprotected sex with someone who has symptoms of an STI or who may have been exposed to a STI.

**Every** time you have sex use a **NEW** condom and follow the instructions in the pack.

5) Delay early sexual activities. If you have not started having sex, waiting to have sex will reduce your risk of getting infected with HIV or any other STI.

## **How do I know if I have an STI?**

*Symptoms of STI's include:*

- ✓ Pus or smelly fluids coming out of the penis or vagina.
- ✓ Blisters, sores or warts on the vagina, penis or anus.
- ✓ Itching or redness on or around your vagina or penis.
- ✓ Unusual swelling near the penis or vagina.
- ✓ Pain in the lower abdomen
- ✓ Pain or burning when urinating
- ✓ Pain in the testicles
- ✓ Pain during sex

Some STI's do not have any symptoms, especially in women. If you are sexually active, you should get tested regularly for STI's. The **ONLY** way of knowing if you have an STI is by being testing at a hospital or clinic.

## **What should I do if I think I have an STI?**

- ✓ See a doctor, or go to a clinic or hospital for examination and treatment. Don't just hope the STI will go away. It won't.
- ✓ Most STI's can be treated. Follow the doctor's orders and complete the full course of medication that is prescribed. Do not share your medication with others.
- ✓ Avoid sex, especially without a condom, while being treated for an STI and until the treatment is completed.
- ✓ If you are pregnant, seek treatment for the STI right away. This will help to avoid passing the infection onto your baby.
- ✓ Tell all current and past sexual partners and urge them to get a checkup.

## **Why should I tell my partner if I have an STI?**

Telling your partner(s) that you have an STI, especially HIV, may be difficult or embarrassing but it is extremely important. Talk to your nurse or counsellor about how to tell your partner. Telling your partner(s) will enable them to get checked at a clinic or hospital and treated if necessary. Telling your partner(s) helps to prevent the spread of STI's unknowingly from one person to another.

**I am in the army and have a girlfriend who visits me sometimes. I think she may be having sex with another man and am afraid to ask her. Is it possible for a woman to have an STI and not show any symptoms?**

Yes, frequently STIs do not have any symptoms in women. If you suspect that your partner is not being faithful it is important that you:

- ✓ Encourage your partner to test for STIs and HIV by suggesting you both go for a test.
- ✓ If an STI is diagnosed follow the correct and complete course of medication prescribed by your doctor.
- ✓ Use a condom.

## Topic 2

### HIV

**Aims:** To increase student's knowledge and understanding of HIV

**Outcomes:**

As a result of this lesson students should be able to:

- Demonstrate knowledge of what HIV means and how it attacks a person's immune system
- Understand how HIV is transmitted
- Be able to refute common myths surrounding HIV infection
- List early symptoms of HIV and treatments available

**Materials needed:** Camara's Respect Programme, Module 2, Topic 2 – HIV.  
Chalk/Blackboard.

**Optional:** Teacher may wish to play an “ice-breaker” game at the beginning of the class to illustrate how easy it is to spread misinformation. Teacher may wish to play a “walking debate” game with students to ascertain if they hold false beliefs about the way in which HIV might be transmitted.

**What to do:**

The teacher may wish to start this lesson with a **game** to show students how easy it is to spread misinformation about a topic.

#### Whispering game – Ice Breaker

1. Ask participants to form a line in the middle of the room. Whisper a message to the person at one end of the line. It can be any kind of simple message, for example, “Mpho is only happy when she is eating, she especially loves oranges, bananas grapes, rice and chicken” The message is then passed through whispers to the other end of the line. The person who receives the message at the end of the line writes it on the blackboard. Then write the original message.

2. Ask the group to discuss:

- *What happened as the message got passed along?*
- *Why did the message change?*
- *What does this game tell us that might apply to HIV?*

3. The game is designed to show how information is misunderstood or distorted as it is passed from one person to another. The same is true of beliefs about HIV. These ideas may be distorted as they are communicated from one person to the next

4.. The teacher may want to ascertain students' current level of knowledge at the start of this lesson by asking students **to agree or disagree** with a series of statements about HIV and its modes of transmission on the worksheet provided. Alternatively this could be done at the end of the lesson.

### **The Walking Debate**

This could be done with the students sitting at their desks and raising their hands if they agree or disagree, or it can be done by way of a "walking debate". The teacher in this case puts a sign up on one side of the blackboard saying "I agree" and another sign at the other side of the blackboard saying "I disagree". The students are then asked to stand in a line in the centre of the room, and the teacher reads out the series of statements. The student moves towards the sign which indicates their choice. Students are then asked to explain why they hold this opinion. All students are entitled to move positions as a result of listening to the opinions of other students. Alternatively students could fill in the worksheet provided if facilities allow for photocopying.

5. Students **view** and **listen** to Topic 2 on HIV
6. Ask students in pairs/groups to **describe** what HIV does to the body.
- 7.. Ask students to **identify** the body fluids in which the HIV virus lives.
8. Ask students to **recount** ways in which the virus can be transmitted and ways in which the virus cannot be transmitted? (The questions on the work sheet could be used at this point)
9. Ask students to **identify** the only way to be sure that you are not carrying the virus?
10. Ask students to name the typical symptoms of HIV infection.
11. Check students' understanding of what treatment is available for HIV/AIDS.
12. Worksheet no. could be used to check students' knowledge of the main points of this lesson. If photocopying facilities are not available the words could be written on the board.

***Student worksheet no. 7 has been adapted from Education International (EI) and the World Health Organization (WHO) Training and Resource Manual on School Health and HIV/STI Prevention***

## Student Worksheet 7, Module 2, Topic 2 HIV

You can get HIV in the following ways .....

Circle whether you agree or disagree with the following statements:

1. A person can get HIV through witchcraft Agree/Disagree
2. You can get HIV by using unclean needles Agree/Disagree
3. You can't get HIV by kissing and hugging someone who is HIV positive Agree/Disagree
4. Only people who have lots of sexual partners get HIV Agree/Disagree
5. Having sex with virgins is a cure for HIV/AIDS Agree/Disagree
6. HIV and AIDS are the same thing Agree/Disagree
7. You can't get HIV from being around someone who is HIV positive and is coughing and sneezing Agree/Disagree
8. You can always tell if a person is HIV positive or when they have AIDS Agree/Disagree
9. You can't get HIV from the sweat or saliva of another person Agree/Disagree
10. If you have tested negative for HIV then it will be safe for you to have unprotected sex Agree/Disagree
11. You can't get HIV from mosquito bites Agree/Disagree
12. You can get HIV from sitting on toilet seats Agree/Disagree
13. You can't get HIV from saliva or sweat Agree/Disagree
14. The HIV virus is found in blood in semen Agree/Disagree
15. If a woman is HIV positive she will automatically pass the virus on to her child Agree/Disagree
16. Traditional medicines are able to cure HIV/AIDS Agree/Disagree
17. If you wash yourself carefully after sex using a Disinfectant, you will be able to wash away the HIV virus Agree/Disagree
18. You can't get HIV by sharing food, cooking pots, cups, plates, knives and forks with someone who is HIV positive Agree/Disagree

## **Student Worksheet 8, Module 2, Topic 2 HIV**

**Put a cross x through words which indicate body fluids where the HIV virus can live**

**Put a circle ○ around words which indicate how the HIV virus is transmitted**

**Put a correct symbol ✓ beside words that indicate early symptoms of the disease**

**Blood**

**Headaches**

**Unprotected Sex**

**Swollen Lymph Glands**

**Breast Milk**

**Fever**

**Unclean Needles**

**Semen**

**Mother to Child during pregnancy and labour**

**Tiredness**

**Fluids of the Vagina**

**Infected blood getting into cuts or wounds of another person**

**Muscle Ache**

**Blood Transfusion**

**Breast Feeding**

## Main Points of Content of Topic 2

1. What HIV stands for – Human Immunodeficiency Virus
2. How the HIV virus attacks and weakens the immune system (the body's disease fighting system) and thus making it difficult for the body to fight infections and cancers.
3. Three key pieces of advice given by Dr. Monyamane as regards HIV
  - Your sexual partner can be HIV positive and not know it, so always use a condom
  - You can be HIV positive and not know it so if you are sexually active, it is good practice to get tested regularly for STI's
  - Once you are infected with HIV you are infected for life and so have the potential to pass the virus on to others
4. How the HIV virus operates inside the body by gradually killing off the white blood cells that fight infections.
5. How the HIV virus only lives in certain body fluids including:
  - Blood
  - Semen
  - Fluids of the vagina
  - Breast milk
  -
6. How HIV is transmitted in the following ways:
  - Unprotected sex
  - Mother to child transmission during pregnancy and labour
  - Breast feeding
  - Blood transfusions where the blood has not been tested for HIV
  - Through infected blood that gets into the cuts or wounds of another people
  - Through unclean needles
7. How HIV *cannot* be transmitted in the following ways:
  - HIV cannot be transmitted by sharing crockery/cutlery
  - HIV cannot be transmitted by insect/animal bites
  - HIV cannot be transmitted by eating food prepared by someone who is HIV positive
  - HIV cannot be transmitted by touching, hugging, shaking hands with someone who is HIV positive
  - HIV cannot be transmitted by toilet seats
8. Understanding the importance of HIV blood tests, including the fact that it can take 3-4 months after infection to show a HIV positive status
9. Understanding that it can take 7-10 years to develop symptoms, and early symptoms may include:
  - Swollen lymph glands in the throat, underarms and groin
  - Headaches

- **Fever**
- **Tiredness**
- **Muscle pain**

**Because the disease can be hidden for years it is important to practice safe sex and have a HIV test**

**10. Treatments available include particular drugs to stop the transmission of the virus during pregnancy and birth and ARV's (anti retroviral drugs) that may halt/ or slow progression of the disease from HIV to AIDS.**

### Topic 3

#### AIDS

**Aims:** To increase student's knowledge and understanding of AIDS

**Outcomes:**

As a result of this lesson students should be able to:

- Explain what AIDS means and how it is related to HIV
- Understand the path of progression from a diagnosis of HIV to a diagnosis of AIDS

**Materials needed:** Camara's Respect Programme, Module 2, Topic 3 – AIDS.  
Chalk/ Blackboard. Pen and Paper for students.

**What to do:**

1. Students **view** and **listen** to Module 2, Topic 3 on AIDS.
2. **Check** to see if students understand the definition given of AIDS.
3. Ask students **to recount** how a diagnosis of AIDS is made.
4. Use reference material on Page 30 to explain more about T- Cells and CD4 cells.  
The teacher could **read out** this information to students.
5. Ask students in pairs/groups to **draw an illustration or a diagram** to show how the HIV virus behaves inside the body. The students could then explain their illustrations, or diagrams to the rest of the class.

### Main Points of Content of Topic 3

1. Definition of AIDS – Acquired Immune Deficiency Syndrome.
2. The relationship between HIV and AIDS, where the HIV virus affects the body's immune system (described as poking holes in the body's armour).
3. The point at which an AIDS diagnosis is made – when the T Cells drop below a certain level or the HIV person starts to experience opportunistic infections.
4. Opportunistic infections are infections that would not normally affect a healthy body.
5. The importance of understanding that no one dies of AIDS itself but as a result of the inability to fight infections such as T.B or Malaria.
6. The length of time of progression of HIV to an AIDS diagnosis is approximately 8 to 10 years in a person who has *not* had any treatment.

### Reference Material for Teachers on Topic 3 – AIDS

#### Definition of a virus

A virus is an ultramicroscopic infectious agent that replicates itself only within cells of living hosts

#### T- Cells and CD4 Cells

T- Cells have not been referred to previously, but are the white blood cells in the body that fight infection. A certain type of T-Cell known as CD4 cells are particularly important because they tell other fighter T-Cells what to do. Without CD4 cells the body has no protection against infections and diseases. When the HIV virus gets inside the body it cleverly attaches itself to a CD4 cell and makes it way inside the cell. There the virus multiplies, and at a certain stage the CD4 cell releases the newly formed virus in to the body where it then attacks other CD4 cells and destroys them. At a certain point, usually 8-10 years a person with the HIV virus who has not had any treatment will have had so many CD4 cells destroyed that they are no longer able to fight off the opportunistic infections already mentioned.

#### Malaria

Malaria is a blood disease caused by protozoan parasites transmitted to humans by Anopheles Mosquitoes. The fact that malaria is contracted through mosquito bites may have given rise to the misunderstanding that HIV infection is possible through mosquito bites.

#### Tuberculosis

TB is caused by mycobacteria. It is an infectious and contagious disease that can be spread through the air by breathing in TB infected droplets. It usually attacks the lungs. It cannot be simply assumed that a TB diagnosis signals an underlying HIV infection. Yet it is true to say that there is more TB because of HIV, and that a diagnosis of TB may be linked to AIDS. It should be noted that TB is curable even in a person with HIV.

## Module 3

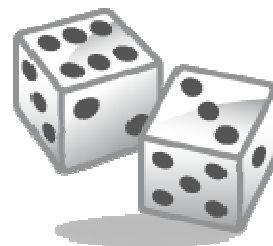


This module focuses on things you can do to protect yourself from STI'S and HIV. It is about making choices as regards your sexual behaviour, and suggests adopting the A,B,C Message (Abstinence, Be Faithful and Be Tested, Careful use of Condoms)

- ✓ [Introduction](#)
- ✓ [Abstinence](#)
- ✓ [Being tested & being faithful](#)
- ✓ [Condoms](#)
- ✓ [Summary](#)

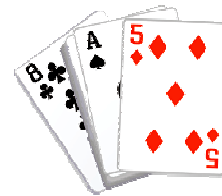
### Introduction:

In the introductory section, the character Maleka says to Dr Monyamane: *“All this advice about safe sex is for people who use prostitutes, it will never happen to me”* This may be a commonly held view by students that needs to be challenged, as we have seen that sexual intercourse is not the only way of contacting the HIV virus. For example, we have seen that the virus can be passed in blood transfusions where that blood has not been screened for HIV.



Dr Monyamane says that it all a question of chance. There is always a chance that HIV may be transmitted through unprotected sex. Someone who is infected with HIV may have sex with a partner a number of times without passing on the virus, on the other hand it may be transmitted by one single sexual encounter. To reinforce this message, the following game might

be played in class at the beginning of this module. Students may be already familiar with playing cards from the computer game 'Solitaire'.



### Ice breaker Game - A Game of Chance

**Materials Needed:** A Pack of Cards. (If pack of cards is not available, teacher could cut up pieces of paper and draw the heart, diamond, club or spade symbols on them)

**Number of Participants:** 16 participants per pack of cards

**What to do:** Tell the students that you are going to play a game of chance with a pack of cards where one of the suites (either the hearts, diamonds, clubs or spades) represents an exposure to the HIV virus, but that you will not be revealing which suite of cards represents an exposure to the virus until the end of the game.

1. Divide each suite (hearts, diamonds, clubs and spades) into bundles of 3. Each suite has 14 cards, so discard the extra two cards in each case. Give each student 3 cards.
2. Tell each of the game players that **they will keep one of the original cards** they have been given but that they are going to exchange their other two cards with other students in the game.
3. Ask the students to get up and ask another student to exchange a card. Ask them to remember the name of the student they exchanged the card with and what suite of card they received (another heart, diamond, club or spade)
4. Ask the students to repeat this action and exchange another card with someone else in the group and ask them to remember the name of the student they exchanged the card with and what suite of card they received (another heart, diamond, club or spade)
5. Ask all students who were originally given the **diamond suite** to get up and come to the middle of the room.
6. Reveal to the students that the suite of cards that represented having had an exposure to HIV was the suite of diamonds.
7. Ask students who received a diamond suite in the 1<sup>st</sup> round of the exchange to join the group in the centre.
8. Then ask students who received a diamond in the 2<sup>nd</sup> round of the exchange to join the group in the centre.

9. Anyone left sitting without a diamond suite has avoided an exposure to the virus.
10. Ask students **to discuss** what they think that the point of playing this game was.
11. Teacher should emphasise that the game helps to show that HIV can spread in a community where people are not aware that they have had an exposure to the virus.

*(This exercise has been adapted from Our Future, Preparing to Teach sexuality and life-skills: An awareness training manual for teachers and community workers, International HIV/AIDS Alliance, 2008)*

## **Topic 1**

### **Abstinence**



**Aims:** To explore the issue of abstinence from sexual activity as a protection strategy from STI's, HIV and unplanned pregnancy

### **Outcomes:**

As a result of this lesson students should be able to:

- Appreciate that abstinence from sexual activity is a choice that you are entitled to make
- Show understanding that there are certain kinds of sexual activities that can be engaged in that do not involve intercourse and the exchange of body fluids

**Materials needed:** Camara's Respect Program, Module 3, Topic 1 – Abstinence. Chalk/ Blackboard.

**Optional:** Pen and Paper for students. Worksheet called 'What's your Response?'

### **What to do:**

1. Students **view and listen** to the A for Abstinence topic.
2. Ask students to **discuss** why the advice that the surest way to protect from HIV infection, STI's and unintended pregnancy is to delay sexual debut until marriage may present might not be followed?

3. Despite the advice that, “*Your body belongs to you and no one else*”, Puleng seems to be coming under pressure to have sex with her boyfriend. However, she is worried about HIV. Pressure may be put on girls to have sex even when they feel they are not ready or it is not right for them. Ask the students in pairs/groups to **fill out** the worksheet “What’s Your Response?” in order to give students a chance to formulate responses to statements meant to pressurize girls into having sex. If photocopying facilities are not available the teacher could read out the statements on the worksheet and in a **brainstorming session** ask for responses that Puleng could make to the statements.

5. This activity may be continued by students dividing the students into two groups with one group suggesting other common statements used to pressurize girlfriends into sexual activities they may feel unhappy about, and the other group suggesting responses to counteract these statements/arguments.

4. Dr. Monyamane gives Puleng advice on kinds of sexual activity (outercourse) that do not involve intercourse or the exchange of body fluids. Ask students why he gives a word of caution about these activities.

*The student worksheet no.9 has been adapted from Educational International (EI) and the World Health Organization (WHO) Training and Resource Manual on School Health and HIV/STI Prevention.*

### **Main Points of Module 3, Topic 1, Abstinence.**

**1. Advice is given that the surest way to protect yourself from HIV infection, STI’s and unintended pregnancy is to abstain from sexual activity and delay sexual debut until marriage.**

**2. Puleng feels under pressure to have sex. Advice is given that the less unprotected sex that occurs = the less exposure to the HIV virus.**

**3. Puleng is reminded that her body belongs to her and no one else and that she should be able to discuss these matters with her boyfriend and decide what is right for her.**

**4. Puleng is given advice from Dr. Monyamane as to the kinds of sexual activity that couples can engage in without exchanging body fluids or the risk associated with sexual intercourse.**

**5. It is explained that ‘foreplay’ are activities that are intended to lead to full sexual intercourse. Like foreplay, ‘outercourse’ also adds to a couple’s sexual excitement and pleasure and may lead a couple to take a risk and have full sexual intercourse.**

**6. Dr Monyamane ends this topic by saying again abstinence is a very effective way to protect against HIV and STI’s, while also being the only sure way of protecting oneself from unintended pregnancy.**

**7. Recognition is given that in reality abstinence may be difficult but it is a matter that must be taken seriously and discussed in relationships. It is a matter for every individual and couple to decide for themselves.**

## Student Worksheet 9 - Module 3, Topic 1 Abstinence

What's my response?.....

Look at some of the things that might be said to Puleng to try and persuade her to have sex. If Puleng does not want to have sex what responses could she give to the following arguments?

You can't get pregnant the first time you have sex.....

Puleng's Response -----  
-----

I'm sure I don't have a disease—do I look sick to you?.....

Puleng's Response: -----  
-----

Your parents will never know.....

Puleng's Response: -----  
-----

Everyone else is doing it—do you want to be the last one?.....

Puleng's Response -----  
-----

Come on, have a drink. It will get you in the mood.....

Puleng's Response -----  
-----

You're my girlfriend, so you have to do what I say!.....

Puleng's Response -----  
-----

No one will ever know, so it doesn't matter, I promise I won't tell any of my friends .....

Puleng's Response -----  
-----

You won't get another chance like this.....

Puleng's Response -----  
-----

You should listen to what I say because I know more about these matters than you.....

Puleng's Response -----  
-----

You are strange, I don't think that you have any sexual feelings.....

Puleng's Response -----  
-----

If you won't have sex with me, I will have to consider if you really have any strong feelings for me, you know your friend Thato really fancies me?.....

Puleng's Response -----  
-----

I am going to buy you something nice if you have sex with me.....

Puleng's Response -----  
-----

## Topic 2

### Being Tested and Being Faithful



**Aims:** To deepen understanding of the importance of the Be Tested, Be Faithful Message

**Outcomes:**

As a result of this lesson students should be able to:

- Identify reasons why one should be tested for STI's and HIV at the beginning of a relationship regardless of whether one has a history of sexual activity or not.
- Give reasons why being faithful within a relationship is important.

**Materials needed:** Camara's Respect Program, Module 3, Topic 2 – Be Tested and Be Faithful. Chalk/Blackboard. Pens and Paper for students.

**What to do:**

1. **Brainstorming activity** – before you review the topic 'Be tested and Be Faithful', students could be asked to brainstorm reasons as to why someone who has never had sexual intercourse, but is about to begin a relationship should still consider being tested for HIV? (Students who have covered these modules in sequence should be able to suggest other means of HIV exposure excluding unprotected sex).
2. Students **view** and **listen** to the 'Be tested and Be Faithful' topic.
3. Ask students to **discuss** the benefits of staying faithful within a relationship.
4. Ask students **to suggest** the reason why Dr Monyamane is impressed that Thato and Lintle have come to see him?
4. Ask students **to identify** the types of questions that Thato and Lintle might need to ask each other before starting a sexual relationship in order to assess the level of risk of infection.
5. What other reason, besides HIV does Dr. Monyamane suggest to Thato and Lintle that they should go to the Voluntary Counselling and Testing Centre before starting a sexual relationship?
6. Ask students **to design** a poster with the message "Know Your Status" on their computers. They could word Word Art and insert clipart images in their work.

### **Main Points of Content of Module 3, Topic 2 – Be Tested and Be Faithful**

- 1. By having a HIV test you can be sure that you are not carrying the virus and cannot transmit it to someone else.**
- 2. If both partners have been tested and found to be HIV negative then remaining faithful to each other is a very effective way to prevent infection.**
- 3. Thato and Lintle come to get advice from Dr. Monyamane about starting a sexual relationship.**
- 4. Regardless of the fact that either partner may not have had a sexual relationship before, Dr Monyamane still advises a HIV test., as it is extremely important to “Know Your Status”.**
- 5. Dr Monyamane suggests a list of questions to consider before starting a sexual relationship. These include the following:**
  - Have either of you had sex before?**
  - With whom?**
  - Do you know how many times?**
  - What do you know about this person/these persons’ histories?**
  - Did you use condoms?**
  - Have you ever used drugs or needles?**
  - Have you or your ex partners ever had a blood transfusion?**
- 6. Dr Monyamane suggests that even if you are HIV negative that there are other STI’s to consider, so testing is advised.**

### Topic 3

#### Condoms



**Aims:** To deepen understanding of the importance of the Careful Use of Condoms

**Outcomes:**

As a result of this lesson students should be able to:

- Demonstrate understanding of different types of condoms and their role in providing protection from HIV, STI's and unplanned pregnancies
- Demonstrate knowledge of the proper use of condoms

**Materials needed:** Camara's Respect Program, Module 3, Topic 3 – Careful use of condoms Chalk/ Blackboard.

**What to do**

1. Teacher may wish to start this section by asking students what they have heard about the use of condoms. Have they heard negative or positive things about the use of condoms? What is the attitude of the community towards use of condoms? Is it a negative attitude or a positive attitude? Ask students if they can explain or give the reasons behind why there may be a negative or positive attitude towards the use of condoms.
2. Students **view** and **listen** to the 'Careful use of Condoms' topic.
3. Ask students what condoms give protection from.
4. Ask students **to debate** the following statement that they have just listened to, "Using condoms shows that you are taking responsibility for your actions"
5. Clarify with students the point that the pores in the latex of a condom are too small to allow the HIV virus to pass through, as this point has been the subject of **misinformation**.
6. Ask students **to identify** the reasons why Teboho was reluctant to use a condom in the scenario in the nightclub and **discuss** other reasons why some people may be reluctant to use condoms. For example, is their access to condoms in your local community? Who has access? Can men/ women /young people equally access condoms, and if not, why not?
7. Ask students in pairs/groups to **discuss** the question of who is responsible for using a condom, you or your partner – the man or the woman?
8. Ask students in pairs/groups to **identify** the main points to consider when using a condom.

9. Ask students if they have any more questions re the proper use of a condom that need to be clarified

### **Main Points of Content of Module 3, Topic 2 – Be Tested and Be Faithful**

**1. Condoms are the only form of protection that can both help to stop STI's, HIV and unwanted pregnancies.**

**2. A number of different types of condoms are now available, male and female condoms.**

**3. There are no age limitations on buying condoms and using them shows that you are taking responsibility for your actions.**

**3. Condoms are available for free at Family Planning Centres and Clinics, and are available to buy in supermarkets, convenience stores, petrol stations etc.**

**4. Condoms are effective protection against HIV because the pores in the latex are too small to allow the HIV virus to pass through. However, they need to be used properly to be effective.**

**5. Simon and Teboho are getting ready for a night out in Maseru where Teboho feels that he may have a sexual encounter with a girl but is reluctant to use a condom.**

**6. A list of facts about male condoms is given. These include the following:**

- **A condom is a rubber or latex shield that is placed over the penis**
- **Keeps semen from entering the body**
- **Condoms can prevent HIV, STI's and pregnancy**
- **Condoms are available from clinics or are available from supermarkets or clinics**

**7. Students are asked to consider who is responsible for using a condom – you or your partner?**

**8. A list is given of things to consider when using a condom. These include the following:**

- **Do not store them in a pocket or in sunlight**
- **Use quality condoms**
- **Don't roll it out before putting it on**
- **Roll it directly onto the penis**
- **Press the air out of the top, and leave some room**
- **Take it off carefully**
- **Use only once**
- **Check expiry date**
- **Don't use flavoured condoms for penetrative sex.**

**9. Illustration of the proper use of a condom.**

## Module 4

- [Introduction](#)
- ✔ [Why get tested](#)
- ✔ [About the test](#)
- ✔ [After the test](#)
- ✔ [Summary](#)



This module concentrates on the importance of knowing your status. It includes information on why a person should be tested for HIV, about the HIV test itself, and dealing with the outcome.

In the context of this module it would be important to take a human rights approach. The preamble to the United Nations Declaration of Human Rights says that, *“All human beings are born free and equal in dignity and rights”*. This holds true for all human beings without distinctions of any kind such as race, colour, sex, disability etc. This is something that is worth emphasising in a society where HIV is common or widespread, and also as persons with HIV/AIDS may be vulnerable to violations of their human rights.

The Respect Program is not only about respecting ourselves. It is also about valuing and showing respect for others, of both sexes equally. It is about showing equal respect for all in society, especially regardless of someone’s HIV Status. In this regard it echoes Article 28 of the African Charter on Human and Peoples’ Rights which states that, *“Every individual shall have the duty to respect and consider his fellow beings without discrimination and to maintain relations aimed at promoting, safeguarding and reinforcing mutual respect and tolerance”*. Thus, claiming rights for ourselves involves an obligation to respect and promote the rights of others.

### Introductory Exercises to Module 4

If students are unfamiliar with the general concepts of human rights, they could view a simplified version of the United Nations Convention on the Rights of the Child, see student worksheet No. 10.

The teacher could ask the students to look at the rights outlined in the Convention and rank which 5 rights they would consider to be most important

**and to give reasons for their choices. Students should be aware that all African Countries (except Somalia) have signed the United Nation Convention on the Rights of the Child.**

**The teaching about human rights in general, and children's rights (i.e anyone under the age of 18) in particular, can have a very positive effect on students in terms of self-worth and self-esteem. Knowing and understanding that they are the holders of rights can be very empowering, and may assist them in formulating arguments/reasons that will assist them in terms of their own protection and the protection of others.**

**A human rights culture in a school, is a culture that engenders attitudes and values based on respect and dignity for all who participate in the life of the school.**

## Student worksheet 10, Module 4 - Introduction to the United Nations CRC

Read the main rights from the United Nations Convention on the Rights of the Child. Choose 5 rights and rank them from 1 to 5 in order of importance. Give reasons for your choices.

All Children, from birth to 18 years, have:

*The right to life;*

*The right to a name and nationality;*

*The right to be with their parents or with those who will care for them best;*

*The right to have ideas and say what they think;*

*The right to practice their religion;*

*The right to meet with other children;*

*The right to get information they need;*

*The right to special care, education, and training, if needed;*

*The right to health care;*

*The right to enough food and clean water;*

*The right to free education;*

*The right to play;*

*The right to speak their own language;*

*The right to learn about and enjoy their own culture;*

*The right not to be used as a cheap worker;*

*The right not to be hurt or neglected;*

*The right not to be used as a soldier in wars;*

*The right to be protected from danger;*

*The right to know about their rights and responsibilities.*

(Adapted by Amnesty International)

Following on from the exercise on the United Nations Convention on the Rights of the Child, in order to reinforce the importance of linking human rights with sexual and reproductive health, the following activity could also be carried out at the beginning of this module.

**What to do:**

1. Give students an example of a human right and an example of what it might mean in the context of their sexual health, e.g.

- **The right to life could mean.....**

The right to refuse sex if a partner will not use a condom

2. Write the following rights outlined in **red** on the board. Ask students in pairs/ groups to look at these rights and say how they might be important to our sexual health, and how we are treated in relation to our HIV status.

3. Add responses of students under each right, and also write or read out the information included here below each right after they have made their own suggestions.

4. Ask students in the same pairs/ groups to give examples of how these rights could be violated.

6. The teacher could also give each group of students a particular right from the sheet, and ask them to prepare a role play to illustrate a situation in which the right is either being respected or denied. The other groups of students in the class are then asked to identify which right is being described in the role play.

5. This exercise could be carried out as a mix and match exercise in the following way if facilities for photocopying will allow. (See student worksheet No 11 and No.12.

The key to the Mix and Match exercise is as follows:

1 = C

2 = K

3 = A

4 = I

5 = B

6 = G

7 = K

8 = L

9 = E

10 = D

11 = F

12 = H

## **Human right examples in relation to our sexual health**

### **The right to live in freedom and safety**

*All people have the right to enjoy and control their sexual and reproductive life, for example, not to be forced to have sex or be made pregnant*

### **The right to equality and to be free of all forms of discrimination**

*People living with HIV have the right to work, to live in their own homes and to go to school*

### **The right to privacy**

*The results of an HIV test should not be told to another person without the permission of the person having the test*

### **The right to freedom of thought, conscience and religion**

*Religion and culture should not force people to act against their wishes in their sexual and reproductive lives*

### **The right to information and education**

*Males and females of all ages should be able to obtain information and education about sexuality, STI's and HIV and AIDS*

### **The right to choose whether or not to marry and to found and plan a family**

*People should make their own decisions about marriage and not be forced into marriage by parents or others without their willing agreement*

### **The right to share in the cultural life of the community**

*People have the right to take part in the life of their community regardless of their HIV status.*

### **The right to health care and health protection**

*Young people should be given the services and condoms that they need to protect themselves from HIV*

### **The right to the benefits of scientific progress**

*People have the right to anti-retroviral treatment for HIV infection*

### **The right to freedom of assembly and political participation**

*Young people have a right to form associations or clubs to campaign for their rights and demand services. People have the right to campaign for HIV treatment*

### **The right to be free from torture and ill treatment**

*Young people have a right to protection from sexual exploitation, rape, abuse, harassment and beating*

*This exercise has been adapted from **Our Future, Preparing to teach sexuality and life skills: An awareness training manual for teachers and community workers. International HIV/AIDS Alliance, 2008***

# Worksheet 11- Module 4, Introduction - Sexual Health and Human Rights

## Human Rights examples in relation to our sexual health

Match a right with a statement that explains that right. The first one is done for you.

1. The right to life could mean.....

*C. The right to refuse sex if a partner will not use a condom*

2. The right to live in freedom and safety could mean.....

3. The right to equality and to be free of all forms of discrimination could mean...

4. The right to privacy could mean...

5. the right to freedom of thought, conscience and religion could mean.....

6. The right to information and education could mean.....

7. The right to choose whether or not to marry and to found and plan a family

8. The right to share in the cultural life of the community could mean.....

9. The right to health care and health protection could mean.....

10. The right to the benefits of scientific progress could mean.....

11. The right to freedom of assembly and political participation could mean...

12. The right to be free from torture and ill treatment could mean....

## Worksheet 12 - Module 4, Introduction Sexual Health and Human Rights

### Statements that match with human rights.....

*A. People living with HIV have the right to work, to live in their own homes and to go to school*

*B. Religion and culture should not force people to act against their wishes in their sexual and reproductive lives*

*C. The right to refuse sex if a partner will not use a condom*

*D. People have the right to anti-retroviral treatment for HIV infection*

*E. Young people should be given the services and condoms that they need to protect themselves from HIV*

*F. Young people have a right to form associations or clubs to campaign for their rights and demand services. People have the right to campaign for HIV treatment*

*G Males and females of all ages should be able to obtain information and education about sexuality, STI's and HIV and AIDS*

*H. Young people have a right to protection from sexual exploitation, rape, abuse, harassment and beating*

*I. The results of an HIV test should not be told to another person without the permission of the person having the test*

*J. All people have the right to enjoy and control their sexual and reproductive life, for example, not to be forced to have sex or be made pregnant*

*K. People should make their own decisions about marriage and not be forced into marriage by parents or others without their willing agreement*

*L. People have the right to take part in the life of their community regardless of their HIV status.*

## Introduction

We cannot tell if any of us has HIV unless we have had an HIV antibody test. Knowing whether you have HIV or not is your first step towards a confident future, but making the decision to seek counselling and testing for HIV may not be easy. You may wonder, how would it help me to know if I am infected or not? What would I do if I found out I was infected with HIV? If I am positive, what will I tell my partner and family? If I am negative, what should I do to remain negative in the future? What do I need to do to get tested? Where I go to get tested?

## Topic 1

Why get tested?

**Aims:** To promote understanding of the importance of being tested for HIV.

**Outcomes:**

As a result of this lesson students should be able to:

- Give reasons why it is important to know your status

**Materials needed:** Camara's Respect Program, Module 4, Topic 1 – Why get tested?

Chalk/ Blackboard. Pen and Paper for students.

## What to do

1. **Discuss** with students at the beginning of this topic, what might be common fears and concerns about taking a HIV test. You could do a spider diagram on the board.
2. **View and listen** to Module 4, Topic 1 on why get tested?
3. Ask students in groups/pairs to **discuss** the advantages that Dr.Monyamane suggested from knowing your HIV status and what it would allow you to do.
4. Other characters in this module give reasons as to why they would be willing to take a HIV test. Read these reasons to students again, or note them on the board. Ask students in pairs or groups **to decide** what they think would be the most important reason to get tested.
5. The point is made that “You are acting responsibly by knowing your HIV status”. Ask students to **debate** this issue.
6. Ask students **to make up a song or a rap** about knowing your status.

## Main Points of Content of Module 4, Topic 1 – Why get tested?

1. Why should a woman get tested for HIV?
2. Scenario with Neo who is afraid to take a HIV test, as she feels that if she were to find out she is HIV positive, it would be too late to do anything about it, and so asks what would be the point of having the test?
3. Dr Monyamane advises that knowing that you are HIV positive allows you to:
  - Make changes to your behaviour that could put you and your partner at risk and allows you to make changes in how you live to allow you to stay healthy longer
  - Immune system monitoring and early treatment can greatly improve long term health
  - If you are considering pregnancy you will know to take advantage of treatments that can prevent transmission of the HIV virus to your baby
  - If you have the test and find out you are HIV negative you may feel less anxious after testing
  - The counselling you receive at the clinic will make you more aware of your sexual life and risks and to make a plan to practice safer sex in the future
  - You can help educate others about HIV, and improve attitudes and behaviours by talking about the disease, your HIV status and your decision to get tested
3. Scenario where different characters give their reasons for wanting to be tested for HIV which include the following statements:
  - I felt that knowing one way or the other would give me peace of mind
  - I decided that just knowing that whether I was positive or negative would make it easier to plan for my future
  - We want to have another baby so we want to make sure that we are not infected
  - I want to protect my partner whether I am infected or not, I want to know what to do to avoid infecting myself and my partner
  - I want to protect myself for the future if I am negative then I want to make sure that I will not put myself at risk of being infected
4. You are acting responsibly by knowing your HIV status.

## Topic 2

### About the Test

**Aims:** To promote understanding of what is involved in taking a HIV test.

**Outcomes:**

As a result of this lesson students should be able to:

- Demonstrate knowledge of HIV test procedure including pre and post HIV test counselling

**Materials needed:** Camara's Respect Program, Module 4, Topic 2 – About the Test. Chalk/ Blackboard.

**Optional:** Pen and Paper for students.

### What to do

1. Students **view and listen** to Module 4, Topic 2, about the HIV test procedure itself.
2. Ask students in pairs/groups **to discuss** the kind of issues discussed in pre-test counselling. Would there be anything that your students think that should be added to this list?
3. Ask students **to list** reasons why it is suggested that you only should take a HIV test after you have had counselling
4. Ask students to prepare a **role play** in which a person comes for a HIV test, and expresses that kind of concerns that they might have, while another student plays the part of the Counsellor who gives out information about the test. Ask students to comment on the role play. How was the person treated? Did they get the right information? Is there anything else that should be added or said?
5. It is important that students understand that the HIV test itself measures antibodies to the virus and that the test has to be done two or more times to confirm a negative diagnosis.

### Main Points of Content of Module 4. Topic 2 – About the Test

1. The character Neo decides to go and have a HIV test and wants to know how to arrange this.
2. She is advised to go to a Voluntary Counselling and Testing Centre (VCT)
3. Neo want to know what is involved in the test and what will happen when she goes to the VCT centre?
4. Neo is advised that the HIV test itself will involve taking a small blood sample and testing it for the presence of antibodies to HIV
5. Neo is advised that people who go for a HIV test are often more ready to examine their behaviour and decide to change it than people who won't not go for a test

6. It is explained that it is for this reason that counselling is provided when you go for a HIV test.

7. Counsellor Ramarou advises that you receive counselling before and after a HIV test. Pre-test counselling happens before a HIV test and helps people to prepare for the results of the test, practice safer sex even if they don't take the test and encourages clients to bring their partners for testing

8. Counsellor Ramarou advises that pre-test counselling deals with the following issues:

- The possible result of the test taking into account past and present sexual life
- The meaning of negative and positive result and how this might affect you
- What you will do if the result is positive or negative and how you will live positively and practice safer sex whatever the result
- Who you can trust to share the test results with and what support you can get
- The fact that you don't have to tell anyone the result if that's what you want
- The fact that you may have several sessions of counselling before you make up your mind whether to have the test or not
- The fact that you may have the test but decide not to go for the results
- The fact that you should only have the test after counselling which allows you to make an informed decision

9. Dr Monyamane advises that the immune system produces HIV antibodies to fight the virus and the HIV testing generally looks for these antibodies in the blood, saliva or urine

10. Antibody test results for HIV are accurate 99.5% of the time.

11. Before you get the results the test will have to be done 2 or more times.

12. Although rapid results are sometimes available, the results may not be available for a few days, so you will have to return to the clinic or test centre to get the results.

### Topic 3

#### After the Test

**Aims:** To assist in understanding the implications of a positive or negative HIV test result

**Outcomes:**

As a result of this lesson students should be able to:

- Demonstrate knowledge that a HIV positive result does not mean that you have AIDS
- Show understanding of what the “window period” means
- Give examples of positive coping skills to deal with a HIV positive result

**Materials needed:** Camara’s Respect Program, Module 4, Topic 3 – After the Test. Chalk/ Blackboard.

**Optional:** Pen and Paper for students.

#### What to do

1. **View and listen** to Module 4, Topic 3, After the test.
2. Ask students which they think might be more important to a person who has been diagnosed HIV positive, practical help or emotional help, and to give reasons for their answers.
3. Counsellor Ramarou mentions certain people with whom you might need to share your test results with. Ask students why doing this would be important.
4. Counsellor Ramarou says that people who test positive for HIV go through a range of emotions at first, including a feeling of hopelessness. Ask students to **explain** why a person who is diagnosed HIV positive is not in a “hopeless” situation.
5. While discrimination is not mentioned in this topic, it is obviously something many people fear will happen to them if their HIV positive status is known. They may feel that they will be discriminated against by their friends, family members, or by their employers. Ask students in pairs/groups to come up with **a list of actions** they could take to support a person who is HIV positive. This could be done in groups from the point of view of a partner, a family member, a friend, an employer, a health care worker, a community leader. The suggested actions could form the basis of a **role play**.
6. See worksheet in Resource Section of Respect Program called “**Caring for someone living with HIV**” for more information
- 7, Students could **discuss** whether the attitude of the community in general is helpful towards people who are HIV positive or not. If attitudes are negative or unhelpful what can young people do to change this situation?
8. What does Counsellor Ramarou say is important to focus on if a person is HIV positive? Ask students if they have any other suggestions to add to the advice given.
9. Check for understanding of the meaning of the “window period”.

### Main Points of Content of Module 4. Topic 3 – After the Test

1. The character Neo wonders what it will be like to go back to the VCT centre to pick up the results of a HIV test, and wonders:

- How will it change her life?
- Would it be better not to know?

2. Neo is told that when you return to the VCT centre to get your HIV test result you will meet your counsellor again. Regardless of the results of your test your counsellor will be available to give you support and advice.

3. If HIV antibodies are found in your body then you are said to be HIV positive. It does not mean that you have AIDS. People only get the illnesses related to AIDS when HIV has reduced our immune system so much that you can't fight bacteria and viruses.

5. If you are HIV positive your counsellor will tell you what that means, and give you advice on treatments and support available.

6 You will also get emotional support while you are dealing with the news, and help to decide who to tell and how to tell them. You should first tell people who you know will be supportive, as well as people who might also be at risk from the virus like sexual partners. Your first reaction might be:

- Denial
- Anger
- Fear
- Sadness
- Hopelessness
- Guilt

However, while these are all difficult feelings and emotions, they will pass.

8. A positive result affects your relationship with your partner, family, friends, employers, health care providers.

9. While more and more people are learning about HIV/AIDS there is still a lot of fear and misunderstanding of the virus, if you receive a positive result, you need to be prepared for this.

10. If you are HIV positive, it is important to focus on 3 things:

- It takes a long time to become ill
- Staying healthy is very important
- Research is being done into new treatments all the time

11. If no HIV antibodies are found in your blood, you are said to be HIV negative. A negative result does not mean that you are immune, you can still get HIV in the future, and may need to change your behaviour so you don't get it in the future.

13. The window period is a period of about up to 3 months after your negative result.

14. It usually takes 2-3 months for the HIV antibodies to show up so for this reason if you are given a negative result, you will need to get a second test after 2 or 3 months in order to confirm this result.

15. During the window period you can transmit the virus to someone else if you are infected.

- 16. All results are treated confidentially and you can choose to take the test anonymously**
- 17. Depending on your life style or sexual behaviour you may need to take the test periodically.**
- 18. Remember there are clear benefits to early medication attention if you have the HIV virus.**

## Module 5

This module concentrates on strategies to live successfully with HIV.

- ✓ [Introduction](#)
- ✓ [Antiretroviral Therapy](#)
- ✓ [Lifestyle changes](#)
- [Summary](#)

### Introduction



It is difficult to find out if we are HIV positive, but we can learn to live with this. We will need support from family and friends so that we do not have to carry the burden alone. We can learn to live positively with the HIV infection. If we think and talk about “living positively with HIV” rather than “dying of AIDS”, then we can reduce fear and this will make us all more hopeful about the future. If your HIV test result shows that you are HIV positive, you will need to make changes to your lifestyle, and you need to know about treatment options, if and when you need them. You will need to make changes to your life style, sexual behaviour, and will need advice on how to stay healthy as long as possible.

### Topic 1

#### Antiretroviral Therapy

**Aims:** To assist in understanding the lifecycle of the HIV virus and how Antiretroviral Therapy works

**Outcomes:**

As a result of this lesson students should be able to:

- Explain when AVR’s should be given to a person who is HIV positive
- Explain the benefits of AVR therapy
- Understand the life cycle of the HIV virus

**Materials needed:** Camara's Respect Program, Module 5 Topic 1 – Antiretroviral Therapy. Chalk/ Blackboard.

**Optional:** Pen and Paper for students.

### **What to do**

1. Students **view** and **listen** to Module 5, Topic 1 on Antiretroviral Therapy.
2. **Ask** students when and why antiretroviral therapy is given to a person?
3. **Ask** students to **explain** the life cycle of the HIV virus. Students could present this visually in a **drawing** or a **chart**.
4. **Ask** students to **explain** how AVR's can help a person who is HIV positive?
5. Ask students to **explain** what the side effects of taking these drugs might be?
6. Students should be aware that sometimes in the past, various diseases or plagues like for instance the Black Death ( a disease caused by a bacteria carried in the blood of black rats and fleas who lived off rats) in Europe in the 14<sup>th</sup> were seen as being sent from God to punish sinners. Even when HIV/AIDS emerged in the early 1980's in America and Europe some people had this same attitude and belief.
7. Ask students **to discuss** why this type of belief may be unhelpful, (it may lead to judgemental attitudes towards HIV positive persons) and conversely **to discuss** the benefits there are in understanding the scientific basis of the virus.
8. Ask students **to discuss** in the light of their knowledge of the HIV virus and its lifecycle what place traditional medicines have in its treatment?

### **Main Points of Content of Module 5. Topic 1 – Antiretroviral Treatment**

1. The character Puleng asks Dr. Monyamane about AVR's – Antiretroviral Treatment.
2. Dr Monyamane advices that ARV's are prescribed to people when someone has tested HIV positive.
3. AVR's are given when the number of immune cells in the person's body called CD4 gets very low. They boost the immunity by slowing down the multiplication of HIV in the blood. This protects the white blood cells that fight off bacteria and viruses.
5. Dr Monyamane explains to Puleng that ARV's are not a cure for HIV or AIDS however; they make it possible for a person with AIDS to live a long time and improve their quality of life.
7. HIV infection is a life long illness and ARV's need to be taken strictly as prescribed, under medical supervision for the rest of your life.
8. Dr Monyamane advices that ARV's are not generally prescribed straight away. In order to understand when a person needs to start ARV treatment, you need to understand something of the life cycle of the HIV virus.
9. HIV infects cells in the immune system and turns the cells into virus factories, one virus can create millions of copies of itself, using the body's own cells for this purpose.

**10. the cells that HIV targets are called CD4 cells, which are an important part of the immune system. ARV treatment will start when the healthy CD4 count goes below 200 and/or once you have an AIDS defining illness.**

**11 ARVs will not get the virus out of your body but the benefit of taking ARVs includes the following:**

- **Functioning of the your immune system will be restored and protected**
- **Production of the virus will be able to be controlled**
- **Your health will be improved and ultimately you life will be prolonged**

**11. Puleng asks if there are side effects to taking these drugs and is advised that even if the drugs are being taken correctly, side effects may include:**

- **Diarrhal**
- **Tiredness**
- **Headaches**

**However, these do not mean that the drugs are not working.**

**12. For ARVs to be effective they need to be taken strictly according to your medical doctor's instructions, regardless of side effects. If someone experiences some of these side effects they will need to discuss this with their doctor who will help to manage them.**

## Topic 2

### Lifestyle Changes

**Aims:** To assist in understanding the importance of Life Styles Changes that can be made in order to live positively with HIV

**Outcomes:**

As a result of this lesson students should be able to:

- Give examples of changes that can be made in your diet in order to live more healthily with HIV
- Give examples of other actions that a person who is HIV positive may take in order to avoid illnesses associated with HIV

**Materials needed:** Camara's Respect Programme, Module 5 Topic 2 – Chalk/ Blackboard. Worksheet 06 called 'Food for Life, A simple guide to nutrition and HIV' in the Resource Section of the Respect Program.

**Optional:** Pen and Paper for students.

**What to do**

1. **View and listen** to Module 5, Topic 2 on life style changes
2. **Ask** students how Dr Monyamane explains what living positively with HIV means?
3. The importance of diet is mentioned in relation to staying healthy if you are HIV positive. What things are especially important? Ask students to **view**, worksheet 06 called 'Food for Life, A simple guide to nutrition and HIV' in the **Resource Section of the Respect Program**. The following items are mentioned – selenium, zinc, vitamin A, Cayenne pepper, chillies, curry, calcium, magnesium, garlic and ginger. After viewing this worksheet, the teacher could do a **rapid fire quiz** and ask the students to say why each of these are important in terms of protecting the body, and what food stuffs they can be found in.
4. Diet aside, what other kind of actions would be beneficial to a person who is HIV positive? What kind of actions would be potentially harmful?
5. If sexual behaviour patterns are not changed and a person becomes re infected with a different strain of the virus, what might happen in relation to ARV's?

### Main Points of Content of Module 5 Topic 2 – Life Style Changes

1. Millions of people throughout the world are living with HIV. HIV though presents important life challenges.
2. In addition to ARV's which have been discussed, and which are becoming increasingly effective, managing one's exercise and nutrition can contribute to increased health.
3. Dr. Monyamane explains to Puleng what living positively with HIV means.

**Positive living means having a healthy and safe life style coupled with a positive attitude towards being HIV positive. It means taking charge of your life, managing your health and life constructively and believing in the future.**

**4. Dr Monyamane explains to Puleng changes that a HIV positive person can make in their life style in order to prolong their health. These include the following:**

- **A good diet is a very important element of a healthy life style, especially for somebody living with HIV and should include fruit, vegetables, rice, bread, chicken and fish**
- **Avoid junk food which has lots of salt and sugar and fat of no nutritional value**
- **Drink lots of fluids is crucial, especially clean water.**

**Further advice is given in the ‘Food for Life’ leaflet in the Resource Section of the Respect Programme.**

**8. Importance of regular health checks is stressed. Visit the doctor every 3 to 4 months. A person living with HIV can get sick very easily, but most of these illnesses can be easily cured if they are treated early. Further steps that can be taken include:**

- **If a HIV positive person smokes, they should stop.**
- **If a HIV positive person drinks alcohol they should stop.**
- **They should get enough sleep and rest**
- **Living with HIV can be stressful so make time to relax and find ways to reduce stress like though counselling, meditation, exercise and rest**

**9. Hygiene is of up most importance, keeping a clean home and a clean cooking area so that you can avoid germs which result in illness.**

**10. Changing sexual behaviour to avoid becoming re infected with a different strain of the virus, as this can make AVR’s less effective**

**11. Keeping a positive attitude is especially important to someone living with HIV.**

**12. All of this advice is relevant to anyone who wants to maintain a healthy lifestyle but especially for someone who is HIV positive.**