

Educator Sheet 1: Young people have the right to proper education and information about HIV

Guidance for Educators

HIV is a potentially sensitive subject and discussion about it can provoke strong views as well as highlighting the need for additional information. Here are some guidelines:

1. Create a fun activity by dividing learners into five groups. Ask each group to come up with the meaning of the following acronyms and terms: HIV, AIDS, OI, ARV, PLHIV, STI, TB, Viral load, window period. The group that comes up with all the correct answers can win a small prize.
2. Ask learners what are the ways in which HIV is transmitted and not transmitted.

Educators Answers (Definitions)

HIV – Human immunodeficiency virus. The virus that, untreated, leads to AIDS. AIDS is the most advanced stage of HIV infection.

AIDS – Acquired immune deficiency syndrome. Acquired means you catch it. Immune deficiency means your immune system is weakened and can no longer fight off bacteria and diseases; syndrome means a combination of symptoms or illnesses that indicates a particular disorder. If left untreated, AIDS may lead to death. Nobody dies from AIDS itself, but from the illnesses that develop as a result of AIDS.

ARVs – Antiretrovirals. Powerful medicines that can stop HIV from growing in the body. They cannot cure HIV, but can help you live a long and healthy life when taken correctly.

PMTCT – Prevention of mother-to-child transmission

PLHIV – People/person living with HIV

OI – Opportunistic infection. Opportunistic infections are illnesses caused by various organisms, which do not usually cause disease in people with healthy immune systems. People living with advanced HIV infection may have opportunistic infections of the lungs, brain, eyes and other organs. An opportunistic illness common in people living with HIV is tuberculosis or a special kind of pneumonia.

STI – Sexually transmitted infections. An infectious disease that spreads from person to person during unprotected sexual contact.. They can also be passed from mother to baby during pregnancy, delivery and breastfeeding. Sexually transmitted infections (such as syphilis, HIV infection, and gonorrhoea) may be caused by bacteria, parasites, fungi and viruses.

Viral load - is the amount of HIV in the blood of an infected person.

Window period - is the time period from infection with HIV until the body produces enough HIV antibodies to be detected by an HIV antibody test. This generally takes 2-8 weeks, but for some it can take up to six months. During the window period a person can have a negative HIV antibody test despite being infected with HIV. During this period, a person is also more likely to transmit HIV.

Transmission - HIV may be transmitted through contact infected with body fluids (blood, semen, vaginal fluids, breast milk) in the following different ways:

- Through unprotected sex (without a condom) with an infected partner. This includes anal sex (penis in anus), vaginal sex (penis in vagina) or oral sex (penis in mouth; or mouth to vagina; or mouth to anus).
- From mother-to-child during pregnancy, delivery or breastfeeding.
- Through contact with infected blood, for example, by sharing injecting needles or razors with an infected person or receiving a blood transfusion of infected blood.

You cannot become infected by:

- Sharing drinking glasses or eating utensils with an HIV positive person
- Using the same toilet as an HIV-positive person
- Hugging, kissing or shaking hands
- Mosquito or dog bites
- Sharing meals, plates or spoons with a HIV infected person
- Sharing a bed or linen with an HIV infected person
- Kissing, touching or hugging a HIV infected person
- Regular activities of daily life.

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Educator Sheet 2: Adolescence, risk and HIV

Guidance for Educators

This activity is about the risks that adolescents face as they relate to HIV. The very fact of being adolescents puts them at risk because of their developmental stage in life. In addition, other factors such as poverty, gender inequality and cultural issues impact on the levels of risk that apply to adolescents.

1. Ask young people to list down the top 10 reasons that put adolescents at risk of HIV infection on a piece of paper. Collect all the papers, then write up the various risk factors and discuss them with the group.
2. Ask group members to share their experiences of when they were at risk (referring to any of the risk factors already identified).
3. Ask them to brainstorm a list of ways they can reduce the risks they face in relation to HIV.

Educator Answers

Risk factors

- Learning about sex from movies and friends who have more experience.
- Sexual abuse or being coerced into having sex.
- Experimenting with alcohol or drugs, because that is what your friends are doing.
- Having sex because your friends are laughing and saying you are not 'doing the in-thing'.
- Engaging in sex in exchange for food, shelter, nice things, or money.
- Having a sexual relationship with someone much older than you.
- Not paying attention to your health (taking medications) because it is 'uncool'.
- Sharing needles (even in teen rituals such as blood brothers/sisters).
- Rebelling against the rules set by your parents.
- Not having accurate information or someone to talk to who does not judge you.
- Not believing you have a future, so why bother.

Risk reduction options

- Being young makes young people more at risk because they may experiment with sex, alcohol or drugs and try to please their friends. All of these are risky behaviours.
- Avoiding all the behaviours mentioned above. The most serious risks are: unprotected sex (without a condom), exposure to contaminated body fluids and blood and sharing needles that have not been sterilised between each use.
- Girls are more vulnerable because of their biology. During unprotected sex, their genital area is more likely to tear, exposing them to the virus. Girls are also vulnerable when they engage in relationships with older men or in sexual encounters in exchange for food or goods, where they cannot negotiate for safer sex. Girls are also vulnerable to sexual violence.
- If you were born with HIV, you have the responsibility to take care of your sexual, emotional and physical health. This means HIV is an issue for you, as you need to be informed so you can live a full and positive life.
- When taking drugs and alcohol, it is much more likely that young people will engage in unprotected sex. No one can predict the future. Anything can happen – both good and bad - so expect the best and prepare for it by protecting yourself from HIV, STIs and unplanned pregnancy.

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Educator Sheet 3: Young people have the right to know their HIV status and to access youth-friendly HIV testing and counselling services

Guidance for Educators

This activity is about being tested for HIV. If you know your HIV status, it opens up possibilities for both treatment and prevention. HIV still has stigma and fear of death attached to it, which makes it scary to talk about freely. Talking about HIV and sharing one's positive HIV status is one of the most significant actions that can be taken to help control the disease. Here are some activities to engage adolescents to begin discussing the challenges and fears around testing.

1. Ask the group to think about what would make them feel safe in the discussion. Create that safety by giving them small pieces of paper to write down what they would need for a 'safe space' for the discussion. Collect all the papers and write out each aspect on the board or on a flipchart.
2. Agree with the class or group that everyone will adhere to the safe space guidelines.
3. Now hand out small pieces of paper and ask them to write down their fears related to HIV and fold them up, so that their fears remain anonymous. Mix up the papers and then read them out, clustering them on the board or flipchart.
4. Go through each question with the group and discuss possible answers.
5. Most likely the questions will be around what it would mean to receive an HIV positive result, not understanding the HIV test, the procedure itself, where to go for it, and fear of others finding out one's test results.

Educator Answers

- Check the regulations relating to testing consent for young people in your country so that you can advise them whether or not they will need the consent of their guardian in order to have an HIV test.
- Find out where there is safe testing for young people in your community and share this information with the group, giving them the address of the testing centre.
- Get some help if you are not comfortable discussing the fears of learners (school counsellor/social worker/nurse).
- Explain the testing procedure and that they will be asked to give their informed consent for an HIV test to take place.
- Encourage commitment to going for testing.
- Explain that the HIV test is preceded by counselling to help them explore their understanding of HIV, their available support system and what they will do if they get a positive result.
- It is their right to receive counselling as part of both the pre- and post-HIV test process.
- Explain that their HIV test result is confidential.
- Highlight that knowing your HIV status is important as it means that if you are positive, you can seek the necessary treatment, support and information. You can also ensure you do not infect others, or get re-infected yourself.
- Show them the Positive Living diagram in Section 6 of the Young Champions Handbook.

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Educator Sheet 4: Young people living with HIV have the right to decide if, when and how to disclose their HIV status

HIV is linked with stigma and discrimination. Many keep their HIV positive status secret for fear of being stigmatised.

Guidance for Educators

1. Ask learners of a time when:
 - (a) they have witnessed someone being stigmatised, and if
 - (b) they have ever stigmatised someone else.
2. Facilitate a discussion on what the impact was in both cases.
3. Ask learners to come up with suggestions on how to address and reduce stigma. Invite learners to create posters that would convey these messages.

Educator Answers

- Explain what stigma and discrimination are, giving examples related to race, colour, economic status or disability, that the learners are familiar with.
- List the reasons for stigma and discrimination, e.g. fear, ignorance and lack of knowledge on how HIV is transmitted.
- Agree with adolescents on ways to stop stigma and discrimination, such as talking openly about HIV and sharing facts; getting on treatment to stay healthy and prove that living with HIV does not stop someone from doing well in school in sports, or being a productive member of society.
- Remind them that Article 16 of the Childrens Rights Convention says that no child shall be subjected to arbitrary or unlawful interference with his or her privacy, family, home or correspondence, nor to unlawful attacks on his or her honour and reputation.
- Exhibit the posters in the class to remind learners of the importance of an environment free from stigma and discrimination – and invite others from the school and parents to see the posters during an open day or other school event.

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Educator Sheet 5: Young people have the right to know how to protect themselves from HIV (re-)infection

Preventing new infections and re-infection is the most important strategy in tackling HIV. It is important for both young people who are HIV positive, as well as those who are negative, to understand what is needed to protect themselves.

Guidance for Educators

1. Ask participants to share what they know about preventing HIV infection.
2. Ask the group to indicate whether they know what treatment as prevention means? Describe it.
3. Divide the group into five – each group has to work on an area of HIV prevention:
 - Knowing your status – what are the challenges – what are the messages we can use to get more young people to know their status?
 - Dealing with stigma and discrimination – how can we address stigma in schools?
 - Delaying sexual activity – what can be done to help young people delay beginning to have sex?
 - Safer sex counselling – what could be done to get more young people to practice safe sex?
 - What can be done in schools to support young people taking medicines?
 - Psychosocial support – how can we create safer spaces in schools for adolescents to discuss issues related to HIV?
4. Facilitate a discussion on the various areas.

Educator Answers

Refer to Section 5 in the Young Champions Handbook for guidance on each of the issues.

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Educator Sheet 6: Living a positive life

No matter how a young person gets HIV, it is not his or her fault. While a young person may not have chosen HIV, they can still choose to live positively.

Guidance for Educators

1. Ask the group what are the different elements of living positively.
2. Ask participants to share how they live their life positively (even if they are not HIV positive).
3. Divide the group into four. Each group has to work on an area of living positively:
 - Taking medication and taking care of your health.
 - Nutrition and exercise.
 - Taking care of your emotions.
 - Creating a circle of support (psychosocial support).
4. Facilitate a discussion on the different areas.

Educator Answers

Top five tips for young people to live positively:

- Know your status (and your CD4 count) – so go for regular check ups.
- If you are taking ARVs, take them exactly as instructed by your health worker.
- Follow a healthy diet and exercise.
- Have a support circle of friends and family around you that cheer you on.
- Take care of your emotional well-being.
- Always use condoms plus another form of contraception (dual protection) to protect your own health and the health of your partner, as well as prevent unintended pregnancy.
- Helping others makes us feel good about ourselves. Think about joining an HIV support group or participating in another charity work.

Refer to Section 6 in the Young Champions Handbook for guidance on each of these areas.

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Educator Sheet 7: Young people have the right to access treatment and information on HIV treatment

Medicines have been developed that block HIV's ability to replicate (make copies of itself and reproduce) in the body. These medicines are called antiretroviral medicines, or ARVs, for short. When a person living with HIV is given ARVs, the person is said to be on antiretroviral therapy, or ART, for short.

The terms ARV and ART are sometimes used interchangeably, but technically they mean different things. ART includes other aspects such as adherence, having a healthy diet, making sure you do not pass the virus on to others and positive living.

Antiretroviral medicines do not cure HIV, but they keep the virus in check and allow the immune system to recover. Once a person is infected with HIV, the virus remains in their body for life.

A person on successful ART will experience near normal quality of life. Generally, there is no way to distinguish a young person on ART by appearance or activity.

Guidance for Educators

1. Open a brainstorm session with learners on the following issues around ART for young people, e.g. adherence, resistance, side-effects and nutrition and ask:
 - What do they think young people on ART can do to help them adhere to their treatment? How can the school assist them?
 - What are treatment buddies? How can one become a treatment buddy.
2. Discuss how learners and teachers can assist adolescents on ART to stay on their treatment, giving practical examples.
3. Discuss why nutrition is important for adolescents on ART

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Educator Sheet 8: Young people have the right to access health care services, support and education

One of the reasons that many young people do not access services is because the services are hard to get to or not youth-friendly. This is a critical barrier in helping young people and adolescents to reduce their risk of HIV infection and re-infection.

Guidance for Educators

1. Open a brainstorm session and ask participants what are rights and why they are important.
2. Ask them to look at each of the areas of:
 - (i) Services,
 - (ii) Support, and
 - (iii) Education for adolescents around health care. They should identify barriers to access and come up with proposals to address them.
3. Ask the group to develop messages or write letters to their local clinics/councillors to appeal to them to make services more accessible to adolescents.
4. Discuss the area of rights and access, and their role in preventing HIV infection and re-infection.

Educator Answers

Refer to Section 8 of the Young Champions Handbook.

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Educator Sheet 9: Young people have the right to practice safer sex

Although adults continue to believe that talking to adolescents about sex will increase their sexual activity, in practice, many young people are already engaging in unsafe sexual activity with messaging they get from friends, from the media, mobile phones, TV, through their desire to experiment, etc. This results in young people making decisions based on incorrect information and due to peer pressure.

Young people need to be given the space to decide how far their dating and sexual activity should go, based on what they want from life. Giving them accurate information allows them to decide to delay sex, as well as to choose to protect themselves should they decide to have sex.

Guidance for Educators

1. Ask adolescents what are the key messages they get about sex from adults.
2. Ask them what are some of the key questions they have about sex.
3. Ask them what are some concerns they have about sex and HIV.
4. Split them into buzz groups of three and give them one minute to do a quiz on 'what is safer sex'. In that one minute they should list as many safer sex practices as they can.
5. The group that lists the most correct safer sex practices can win a small prize.

Educator Answers

Some messages to give learners during this session include:

- Do not feel rushed into having sex.
- If you have not yet had sex, consider delaying it. Do not begin a sexual relationship until you are ready. Talk together with your partner and agree on the limits of your physical intimacy.
- Masturbation is okay.
- If you are with a new partner, find other safer ways of giving each other pleasure until you are ready to have sex in this relationship. Enjoy other activities together. When you have sex, use a condom correctly every time, even if your partner is also HIV-positive. Condoms prevent HIV transmission and also prevent unplanned pregnancy – but it is also a good idea to use another kind of contraceptive too.
- Drinking alcohol and substance abuse increase the risk of unplanned and unprotected sex.
- Avoid situations or people that may put you at risk of unwanted sex.
- Reduce the number of people with whom you have sex.
- Consider disclosing to trusted people so that they can support you, if you are HIV positive.
- Go for an HIV test together with your partner before deciding to have sex – but still use condoms.
- Talk about what you want and do not want with your partner before you start having sex.
- Rubbing, kissing, cuddling and mutual masturbation are safe.
- Any vaginal, anal or oral sex is not safe sex, unless a condom (plus another form of contraception) is used correctly every time.

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Educator Sheet 10: Young people have the right to be free from violence

Violence or abuse can happen to anyone – it can happen to young people of any nationality, race or family background. It can happen in same-sex relationships as well as in heterosexual relationships. Teenage relationship abuse can also happen after a relationship has finished. Abuse can also be from someone the adolescent knows (family friend or member).

Guidance for Educators

Be aware of participants' emotional reactions to this activity. Some people in the group may know people who have been raped or sexually assaulted. Others may be survivors of rape or sexual assault (or from sexual abuse as children), or still be in an abusive relationship. Doing this activity may remind participants of painful experiences and be upsetting. Let participants know that this is a possibility, and that it is important for people to take care of themselves. Remind the group that it is OK if anyone needs to step out of the activity or the room in order to take care of themselves.

1. Split the group into two to hold a debate on violence against young people. One group should raise points on why young people face violence and the types of violence they face; and the other group should debate on how young people can stay safe from violence.
2. As a group, discuss how sexual violence can place young people at risk of HIV infection.
3. Remind young people that violence or abuse is not acceptable. It is a very serious and sensitive issue. It is also against the law.
4. Ask young people in groups to draw images of the violence and abuse that they are aware of. After they have drawn those images, ask the groups to identify ways of preventing violence against people – both females and males.
5. Ask them to list reasons why young people living with HIV may be abused and how they can make a difference to prevent or report the matter if this is happening to any YPLHIV they know.

Educator Answers

- Remind participants that they have a right to be free from violence.
- Ask everyone to share their pictures and then hold a discussion on violence.
- If anyone in the group needs counselling, tell them where they can go for help.
- Support adolescents by identifying what they can do if they are in a situation where abuse or violence is happening.
 - (a) They can tell an adult they trust.
 - (b) They could go to the police (provide them with information to this effect).
 - (c) They should seek out counselling.
 - (d) They could speak to an NGO that addresses children's and youth rights to find out if there is anything else they can do.
- They should seek services – get an HIV test and post-exposure prophylaxis if needed, as well as test for sexually transmitted infections and access emergency contraception if it is available.

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Educator Sheet II: Young people have the right to have hopes and dreams for the future

Many young people who were infected with HIV from birth are now reaching adulthood. All young people should be encouraged to think about and plan for their futures.

Guidance for Educators

1. Ask each member of the group to think about their dreams for the future.
2. Using old magazines and sheets of flipchart paper, get each person to do a dreamboard that outlines their dreams for the next 5-10 years.
3. Once the group has done that, ask them to share their dream – and help them to break it down into small achievable goals.

Conduct role plays on the sections on:

- Decision-making.
 - Problem-solving.
 - Assertiveness.
4. Facilitate a discussion on key learnings and lessons to take into their lives.

Educator Answers

Refer to Section 10 in the Young Champions Handbook for guidance on conducting this session.

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