

PROGRAMME OF PRIMARY PREVENTION OF HIV/AIDS AND RISK BEHAVIOUR FOR TEENAGERS

LESSON 12. HIV and AIDS

Statement of the problem. Information for the facilitator.

Despite a gradually increasing epidemic nature of spreading HIV infection most of young people and teenagers lack information in this area. The information they receive from various, sometimes incompetent sources, is definitely not enough. This lesson is dedicated to examining different aspects of the HIV/AIDS problem, providing the participants with correct information about this problem and forming an adequate attitude towards it.

Goal:

To find out how informed the participants are about the problem, to discredit myths about HIV/AIDS, to enable participants estimate risk level of HIV infection and to avoid risk situations, also to enable participants to resist social pressure and to say 'no'.

Beginning of work.

'Kaleidoscope' exercise

Goal: actualization of the HIV/AIDS problem

Materials needed: none

Outline: participants form a line, standing behind each other; facilitator reads out the statements, and participants can agree – making a step to the right – or disagree – making a step to the left.

- ✓ HIV and AIDS is the same thing
- ✓ Only people who take drugs and have promiscuous sexual behaviour are at risk of HIV infection
- ✓ There are remedies that can 100% protect from HIV.
- ✓ One may have HIV in his/her blood without realizing it.
- ✓ If one has HIV it is his/her own fault.
- ✓ One can have AIDS and look healthy.
- ✓ HIV positive mother can give birth to a healthy child.
- ✓ HIV positive woman should not be allowed to have children.
- ✓ HIV can be carried around by the insects.
- ✓ There is a risk to get HIV at a manicurist's.
- ✓ AIDS reduces organism resistance to infections.
- ✓ Sexual contact with a drug addict presents a high risk of HIV infection.
- ✓ HIV is transmitted through blood.
- ✓ For people in our town the problem of HIV/AIDS is not an urgent one.
- ✓ Forced HIVtests is the only way to stop spreading the infection.
- ✓ People without symptoms of the disease can be a source of HIV.
- ✓ HIV dies quickly outside of a human body.
- ✓ There is highly effective HIV/AIDS therapy.
- ✓ Women more often get HIV than men.
- ✓ One unprotected sexual contact with a carrier of the virus is enough to get HIV infected.
- ✓ Only adults can be HIV positive.
- ✓ I know what a 'window period' is.
- ✓ To avoid contacts with HI- positive person is to be prudent.
- ✓ Transmission of HIV infection by a person aware that he/she is infected is punished with imprisonment.
- ✓ If the treatment starts at an early stage AIDS can be cured.
- ✓ There are pills that protect from HIV.
- ✓ Test results and HIV-positive diagnosis are medical secrecy.

- ✓ An HIV positive can live to be very old.
- ✓ I am not the kind of person to get HIV.

Work in small groups, mini-lectures, answering the questions

Goal: providing information about HIV/AIDS, clarifying questions that may arise during “Kaleidoscope” exercise.

Materials needed: paper, pens.

Outline, description: each participant is asked to write down on a piece of paper the questions or the aspects of the problem that need to be clarified. Facilitator answers the questions, using the materials of the mini-lecture. Even if there are no questions facilitator informs about HIV, clarifying the issues mentioned in ‘Kaleidoscope’.

Working on the topic

Information for facilitator:

HIV- human immunodeficiency virus, a member of retrovirus family, slow viruses subfamily.

AIDS - acquired immune deficiency syndrome - is developing along with the disease.

HIV infection is a long term disease caused by the human immunodeficiency virus, it can take form 2-3 up to 20 and more years from the moment of infection to death. When getting to the blood flow HIV destroys the certain category of cells that have special proteins on the surface – CD4+ receptors. These are immune cells: T-lymphocytes and macrophages. The virus gets inside these cells and starts propagating, shortening lymphocytes’ lifetime. If a person does not take any measures to fight HIV, then in 6-7 month time on the average his/her immunity – the ability of the body to resist different diseases – considerably reduces, and then AIDS (immune deficiency syndrome) develops. The immunity becomes so weak that a person gets vulnerable for many infections that are called opportunistic. This includes pneumocystis pneumonia, tuberculosis, candidosis, shingles and others. A person with AIDS can often develop cancer (e.g. Kaposi’s sarcoma)

Stages of the disease:

Incubation stage is a period of time between the moment of infecting and the first apparent reactions, when the body starts exhibiting signs of acute infection and/or producing antibodies. This period can last from three weeks to three months, and up to one year in rare cases.

Early symptoms stage can run in three forms:

- asymptomatic;
- acute HIV infection without progression to other diseases;
- acute HIV infection with progression to other diseases.

Latent stage may vary in its duration – from two-three years to twenty and more years, with the average of six-seven years. This period is defined by gradual decrease of CD4+ T-lymphocytes.

Stage of progression of other diseases. With the immunodeficiency of the body it can develop opportunistic diseases. This stage has three sub-stages (A, B and C) depending on how severe the disease is.

Terminal stage (AIDS). The developed diseases become fatal. Even adequately performed antiviral therapy and properly treated developed diseases give no results and the patient dies within few months.

Source of HIV infection is an HIV positive person at any stage of the disease including incubation stage.

HIV spreads everywhere – in all countries and continents. Due to certain biological and social factors women and girls are more vulnerable to HIV infection. It is important to observe every woman's right for fulfilling family life and reproduction. With preventive measures taken in time in 98% cases HIV positive women give birth to healthy children.

HIV is transmitted to a human body in **blood, semen, vaginal fluids**, or from **HIV positive mother to a baby during pregnancy, labour or breastfeeding**.

Possibilities for HIV transmission:

- using non-sterile (previously used and contaminated with HIV-infected blood) syringes and needles for injections; tools for piercing; getting tattoos; manicure or pedicure.
- HIV-infected blood transfusion,
- unprotected sexual intercourse with HIV-positive partner,
- from HIV positive mother during pregnancy, labour and breastfeeding.

HIV cannot be transmitted through:

- kisses,
- insect bites,
- hugging an HIV positive person,
- swimming in a pool, using public toilets,
- working together,
- sharing dishes, utensils or personal care items,
- tears.

Risk groups:

- people with promiscuous sexual behaviour,
- drug users,
- prostitutes,
- blood donors or people working with blood and blood product,
- babies born to HIV positive mothers.

Diagnostics

Presently there are the following methods of laboratory diagnostics of HIV:

- serum diagnostics shows presence of HIV antibodies in blood: fluorescence immunoassay, immunoblotting
- molecular-biological methods: detecting HIV genetic markers via polymerase chain reaction (PCR)

A '**serological window**' period is a period of time after human body is already HIV infected but is not producing antibodies yet. During this period HIV tests will give false negative results.

People who know that they are HIV positive and **intentionally transmit** the infection to others are subject to prosecution by law and up to five year imprisonment.

In a natural environment HIV can **survive** for several hours in dried human body fluids and for several days in fluids rich in viral particle (such as blood and semen). In frozen blood serum the virus remains active up to several years. When heated up to 70-80 degrees Celsius the virus dies in ten minutes. It dies within a minute after exposure to ethanol.

HIV therapy remains the most difficult and in fact unsolved problem, because there are still no remedies that can thoroughly cure HIV patients. (In this context preventive measures are of great

importance). The main measures of HIV therapy are aimed at slowing down the progression of the virus and treating the infections caused by it. Recently developed antiretroviral therapy (ART) allows to prolong the lifetime of a patient and to slow down AIDS progression. People who are getting ART find themselves in difficult conditions because the treatment is an expensive one and not everyone can afford it. It requires taking a lot of medicine with pronounced side effects for life. (For details of medical and biological aspects of HIV/AIDS see Appendix # 5)

Remember: the main protection from HIV/AIDS is **love and faithfulness**.

“An honourable action is the one done out of duty. Faithfulness in observing one’s duty is a virtue worthy of man. Observing one’s duty is universal condition of deserving the good”
Archimandrite Platon Igumnov, “Moral Theology”

“Faithfulness must reach even the deep heart movements as “everyone who gazes at a woman to lust after her has committed adultery with her already in his heart” (Matt 5:28)... Finally the sign of real love is mutual trust when one can ultimately rely of the other... Faithfulness affirms trust. Unfaithfulness, even conjectural one, creates suspicious and jealousy that turn away peace and harmony and destroy happiness in a family...”
M. Olesnitsky, “Moral Theology”

Facilitator’s conclusion:

The problem of HIV/AIDS deserves the most meticulous attention. Every person is at risk of getting this disease. In order to minimize the risk it is necessary to be aware of the risk factors and be able to keep them under control. It is quite possible to stop spreading HIV infection provided that we have the knowledge and understanding, are eager to keep body and spirit healthy and to lead truly spiritual life.

Option 1. Role play ‘Vasilina and Yegor’

Goal: emotional involvement into the problem, developing ability to stand up for one’s grounds.

Materials needed: none.

Description: participants are divided into two or four teams depending on the group size.

The following situation is presented:

Vasilina and Yegor have been dating for six months now. Yegor is longing for intimacy but Vasilina wants to postpone it until after marriage. Every time they see each other Yegor puts Vasilina under pressure. And she is afraid of losing her boyfriend.

One team makes a list of arguments in favour of Yegor, the other – in favour of Vasilina. In one team the participants are assigned roles of Yegor, his friends and relations, in the other – of Vasilina, her friends and relations.

Role playing of the situation described above. The exercise closes with a discussion.

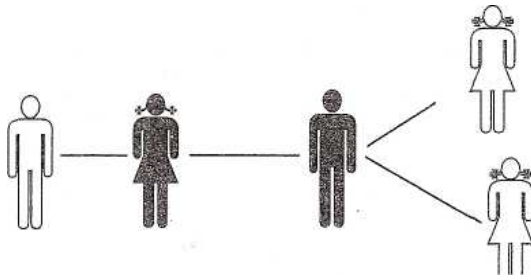
Facilitator’s conclusion:

Each person has a right to say ‘no’ if he/she feels that what is going on contradicts with his/her interests. Of course the refusal will inevitably hurt other people, that is why in the course of the conversation we have to be as tactful as possible but firm.

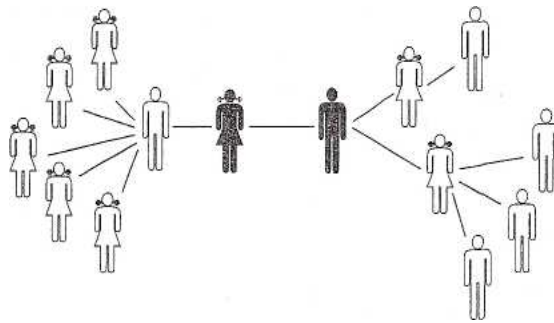
Option 2. Working with ‘Efrosinya and Anufri’ chart

Once upon a time there lived two young people, let’s call them Efrosinya and Anufri. Once they met and fell in love with each other. Never before has either Efrosinya or Anufri had such pure and trust relationship, such love. No doubt this was real love!

Whatever happened with each of them before did not matter at all. Occasional dates, not serious relationships... Besides, there were not many of them. Efrosinya had had just one brief summer fling. Anufri had been intimate with two girls.

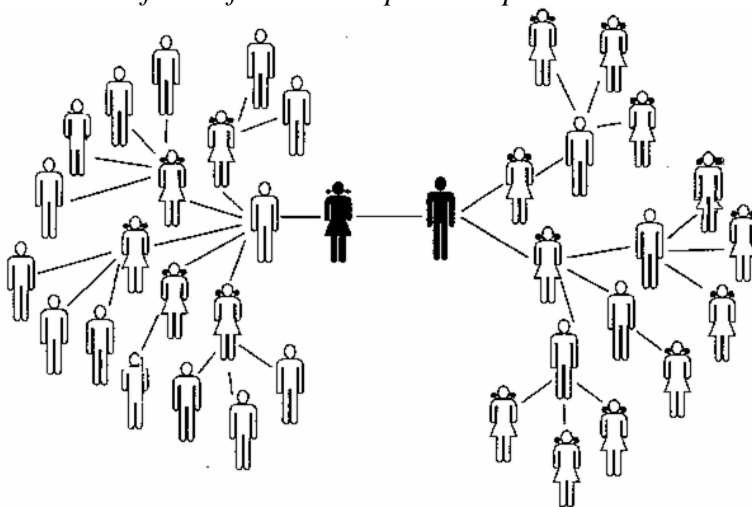


But it turns out that Efrosinya's ex-boyfriend had sexual contacts with many girls: he was generally a futile person. And one of Anufri's ex-girlfriend was very light-minded, that was why he had broken up with her.



His other ex-girlfriend simply moved to another town and they just naturally fell apart. Efrosinya's ex-boyfriend's partners and Anufri's girlfriends – who are quite strangers for our couple in love – also had some sexual contacts in the past.

If we continue to draw this chart we will see that people we draw have definitely not met the main characters. Efrosinya and Anufri haven't even heard of them. And why would we recall them all of a sudden? Because when having sex with someone even very close and beloved we also get in contact with micro flora of all his/her previous partners.



Besides, someone out of the thirty six people on the last chart could easily be a carrier of some sexually transmitted infection (STI), for example HIV, without even knowing about it. That is why nowadays a person who thinks that he/she is safe due to leading an orderly sexual life, still puts him/herself at risk of getting STI. The only way out is being faithful to one's spouse for the entire life and continence before marriage.

Information for facilitator:

“We must learn to discover positive value of chastity, to demonstrate that it is better and more joyful than ‘free love’, i.e. temporary body contact free from faithfulness, from personal and spiritual unanimity, and that finally means free from love itself. In other words Church is against momentary imitations of love that inevitably cause sense of shame, disappointment and fatigue, in favour of true love, the one, everlasting and entire, capturing a person’s soul body and. The ultimate wisdom is to obtain the precious pearl and once and forever to wave away its cheap imitations, because the one is simply incompatible with the other”

Archpriest Nikolay Balashov, “Issues of gender ethic in the light of the Basics of Social Concept of Russian Orthodox Church”. Speech delivered at theological conference “Church interpretation of human being”, Moscow, 05-08.11.2001

Chastity – as it is clear from the word itself – is a wise aspiration towards obtaining and saving integrity, keeping the inner unity of personality which lives in harmony of spirit and body. Chastity indeed covers all areas of human life, that is why it is not right to bring the meaning of this virtue down only to continence. Nevertheless licentiousness is definitely the opposition to chastity. Life in lechery never remains without consequences; it inevitably destroys the harmony and unity of soul. Very few other sins bring as much harm to spiritual health of a person. “Flee immorality,” Paul the Apostle wrote. And that is how he explained his idea, “Every other sin that a man commits is outside the body, but the immoral man sins against his own body”. That means self destruction. Proceeding Paul the Apostle says that it is not enough to honour God only in heart. Nowadays people often say that they believe in God in soul. But our bodies are also sacral, “bodies are temples of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore honour God with your bodies” (1 Cor 6:18-20). While presence of the Holy Spirit in our bodies is incompatible with licentiousness. “Do you not realize that the unrighteous shall not inherit the kingdom of God?” Paul the Apostle would say and repeat this idea again and again (1Cor 6:9-10, Gal 5:19, 21, Eph 5:3-5)

However a person can experience the consequences of lechery in his earthly life. Lechery separated bodily manifestations of gender from the spiritual life, from love, faithfulness, responsibility. Spiritual vision goes weak, the heart hardens and becomes incapable of real ultimate sacrificial love. The happiness of inner harmony, joy of unity in family life become inaccessible for those in lechery. They steal from themselves”.

Archpriest Nikolai Balashov, “And created God a man and a woman: Comments on the Social Concept of Russian Orthodox Church”.

Option 3. Exercise ‘Ranging the cards according to the risk level of getting HIV infection’

Goal: revision of knowledge about HIV infection

Materials needed: cards that say:

- *kiss on a cheek*
- *injection in a medical centre*
- *marital sex life*
- *blood transfusion*
- *using other person’s toothbrush*
- *swimming in a pool*
- *deep kiss*
- *taking care of an AIDS patient*
- *mosquito bite*
- *multiple sex contacts*
- *ears piercing*
- *sharing a room with HIV positive*

- *getting a tattoo*
- *hugging an AIDS patient*
- *using public toilets*
- *bedbug bite*

Description: participants are asked to range cards according to the risk level of getting HIV infection. The cards are put in a line ranging from those meaning 100% infecting risk to those implying impossibility of infection. (See Appendix # 5 for detailed description of HIV transmission ways).

Summing up

Goal: summarizing outcomes of the lesson

Materials needed: none

Description: facilitator draws the participants' attention to the threats associated with various forms of risky behaviour, and also to the fact that the so called safe sex does not guarantee 100% health; underlines the importance of chastity and of being faithful to one's partner.

Participants share their opinion about:

- What was new at the lesson?
- What was surprising, unexpected?

Homework:

Goal: verbalization of experience gained during the lesson

Materials needed: workbook

Description: Participants write an essay on the topic 'Protect yourself from HIV'.