



LEARNING

ABOUT

HIV

**AN ACTIVE LEARNING PROGRAM
FOR CHILDREN IN GRADES 3 to 5**

Teacher's Guide

Note to Teachers

The activities in this program have been developed for use in a partnership between the school and home. To reinforce the ideas and skills that are learned in the classroom, your students are encouraged to discuss the lessons with their parents or guardians. In addition, three of the activities in this booklet have been assigned as homework. In the field test, parents were extremely receptive to this program. We hope that you will encourage their involvement.

This program is supported by a Student Booklet.

Produced by:
Canadian HIV/AIDS Information Centre
a program of the
Canadian Public Health Association

Student Booklets are free for classroom use in Canada. To order, contact:
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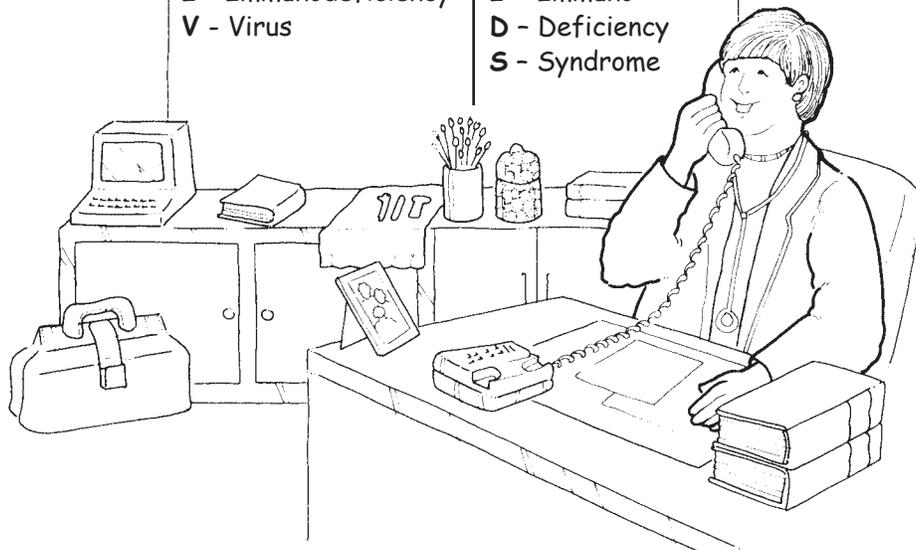
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STOP THE SPREAD OF HIV

HIV means
H - Human
I - Immunodeficiency
V - Virus

AIDS means
A - Acquired
I - Immuno-
D - Deficiency
S - Syndrome



Introduction

In response to a need for age-appropriate information on HIV (Human Immunodeficiency Virus) and Acquired Immunodeficiency Syndrome (AIDS) for children aged 8 to 11, the Canadian HIV/AIDS Information Centre, a program of the Canadian Public Health Association, with financial support from Health Canada, produced this program for children in Grades 3 to 5.

“Learning about HIV” helps parents and educators talk with children about HIV/AIDS. It focuses on life skills that will help young people understand the facts about HIV and AIDS, make healthy lifestyle decisions and learn to respond to people with HIV or AIDS in a caring manner. The program consists of a child-centred activity booklet called “Learning about HIV” and this supporting Teacher’s Guide. Each student receives a copy of the “Learning about HIV” booklet. Most of the activities are completed in class; however, homework activities have been included to encourage parental involvement in the program and to help strengthen the partnership between home and school.

The program can be used by other educators, such as public health nurses or mental health professionals. Parents may also want to use the booklet to help their children better understand HIV, if no program about HIV is being offered at school.

Please note that this program has been designed to complement or supplement an existing sexuality program or to be used with a unit of study on health and life skills. It is not a comprehensive sexuality program.

Why Teach Children About HIV?

Do children aged 8 to 11 need to know about HIV? Will discussing it give them yet another worry? These were two of the most frequently asked questions during the development of this program.

There are a number of valid reasons for beginning HIV education in the lower grades:

1. HIV is a serious disease that is spreading rapidly throughout the world. It has become a fact of modern life. Most children have already heard about HIV or AIDS from the media, adult conversations or their peers. Knowledgeable teachers, public health workers and parents who have access to well-designed, age-appropriate learning materials will be able to help children acquire a better understanding of HIV and people living with HIV/AIDS, and help children develop the skills they need to make healthy lifestyle decisions.
2. Because children have a natural and intelligent curiosity, they have questions about HIV. Two frequently asked questions are “How do you get HIV?” and “Will my parents get HIV?” The information in this program will help dispel some of the fears and confusion that many children have or may develop about HIV. It will reassure children that they are relatively safe. For example, it emphasizes that most children are not at high risk because most do not use injection drugs that involve needle sharing and they are too young to have sexual relationships. (Note: Children who have been sexually abused may have deeper concerns which need to be dealt with by experienced counselors.)
3. As the prevalence of HIV rises, it is increasingly likely that children will know someone who has the disease. This program will help them respond with respect and compassion to people with HIV/AIDS. They will be less likely to criticize or tell cruel jokes, or to perpetuate the stigma that people living with HIV/AIDS face on a daily basis.
4. The 2003 Canadian Youth, Sexual Health and HIV/AIDS Study found that about one-half of Canadian young people have had sexual intercourse by age 16 and that less than a quarter of adolescents who have sexual intercourse use a condom. Providing 8- to 11-year-olds with a solid knowledge base, decision-making skills and a support network will better equip them to handle the approaching pressures of adolescence. This includes pressure to use tobacco, alcohol or other drugs, and to engage in sexual activity.

Learning Outcomes

“Learning about HIV” is designed to increase knowledge and influence attitudes and behaviour. Upon completing this program, the student will be able to:

Knowledge

- explain what HIV and AIDS mean
- understand that HIV is a virus that weakens the immune system
- identify ways in which HIV is transmitted and differentiate between facts and myths about the transmission and prevention of HIV
- identify ways to protect themselves from contracting HIV

Attitudes

- feel confident that HIV is difficult to contract and that children are relatively safe from getting HIV
- gain comfort in thinking and talking about HIV in a supervised environment
- examine their attitudes toward people with HIV/AIDS

Behaviour

- use a problem-solving approach when faced with situations that require a decision
- role play responsible decision-making
- respond to people with HIV/AIDS in a caring and compassionate manner
- apply communication skills in the sharing of ideas and activities in small groups

Why Use This Program?

“Learning about HIV “ is designed for easy use by teachers and other health educators. It reflects current educational thinking and uses a variety of methods to accommodate the different learning styles of children. The program is child-centred and allows for individual, small-group and large-group work. It integrates elements of language arts, drama and visual art, and can be incorporated into various lesson plans. See page 15 for a list of ideas.

Involving Parents

A partnership between the home and the school will ensure the effectiveness of this program. Because parents play a vital role in educating children about health, “Learning about HIV” has been designed so that students will do some activities with their parents or guardians.

Since HIV is a sensitive subject, parents should be involved at all stages of the program. It is recommended that you send a letter home indicating your plans (see Appendix 1 for a sample letter). You may also want to host a parents’ evening to discuss HIV and the content of this program.

Providing a Safe Learning Environment

The topic of HIV should be covered sensitively, tactfully and in an unbiased manner. Acknowledge that feelings of embarrassment and fear may be present and encourage students to ask questions. Tell students that these feelings are OK and that there will be times when laughter is appropriate and other times when it is inappropriate. It is important that all questions and opinions be respected.

Since students may feel too embarrassed to ask questions in class, provide a “Question Box” for students to write down their questions. Tell the students you will answer all their questions and will keep the questioner anonymous. Information on how to use a Question Box is in Lesson 1, and Appendix 6 includes some common questions and suggested answers.

Please be aware that as the prevalence of HIV increases, it is more and more likely that a student will know someone who has contracted the disease. Therefore, it may be important to be selective in your answers, so that a child does not feel unnecessarily burdened with a situation over which he or she has no control. It is also possible that some children in your class may be HIV positive. These situations will require special attention. (See resources listed in Appendix 7.)

When to Use This Program

It is recommended that this program be part of a comprehensive health education or family life program. A comprehensive program lays a solid foundation that helps young people develop healthy attitudes toward sexuality. Sexuality or family life programs based on sound principles provide students at this grade level with the skills and understanding they need to make responsible decisions.

Teachers should recognize that students may link illness and death with sexuality; it will be important to reassure students that HIV is hard to get.

Time Requirements and Optional Approaches

Depending on the time you have available, there are three options for teaching this unit:

1. *As part of a language arts and health education program*

The narratives, some of the vocabulary activities, the role-playing segment and some of the follow-up activities have been designed for integration into a language arts program. It is especially appropriate for the program to be used as a whole language unit, including independent research by the students. This method requires approximately 200 minutes of class time; however, the time can be divided between language arts and health education.

2. *As part of a health education program*

You may teach this program within the time allotted for health education. This method allows for the HIV program to become part of a unit of study on sexuality or infectious diseases. It will require the same amount of class time as the first method.

3. *Partial program*

If your students already possess some knowledge about HIV or if some of the activities are not appropriate to their skill level, you may wish to use only some of the activities.

If it is difficult to schedule 200 minutes of class time, consider assigning more of the activities as homework or using them in reviews. For example, Activity 10, the gameboard, could be used at home or in the classroom at a later time.

In addition to the activities in the Student Booklet, supplementary activities are included in this Teacher's Guide.

How to Use This Program

Depending on the learning abilities of your class, this program has been designed to allow for individual, small-group and large-group work. After introducing the topic of HIV (see the section on lesson organization), give a copy of the booklet "Learning About HIV" to each student.

It is recommended that you collect the booklets at the end of each lesson, unless you are having the students take them home to complete an assignment with their parents. On completion of the program, allow your students to keep the booklets.

Wherever possible, it is recommended that you have students work in small groups and then hold large-group discussions after completion of the activity.

Please review the Student Booklet in detail before distributing it. It is also recommended that you review the previous lesson and discuss the intent of each new activity as you introduce it.

“Learning about HIV” at a Glance

Student Booklet

1. Introductory narrative: “The Health Project”
- *2. Quiz: “HIV/AIDS: Fact or Fiction”
3. Dialogue: “Checking it Out with Dr. Lee”
4. Fill in the blanks: “Checking up on the Immune System”
- *5. Cartoons: “Getting Rid of Rumours”
- *6. Crossword puzzle: “Preventing the Spread of HIV”
7. Decision making: “The I.D.E.A. Problem Solver”
8. Second narrative: “Kate’s Visit”
9. Concluding narrative: “Knowing Who’s in Charge”
- **10. Board game: “On the Road to Good Health: Knowing the Facts about HIV”

*homework assignments

**optional, review or used at home

Lesson Organization and Content

The activities in the Student Booklet can be broken down into five lessons plus homework assignments. The following breakdown is recommended.

Lesson 1 (40 minutes)

Introductory Activity (10 minutes)

Tell your students that the class is going to learn about an infectious disease (i.e., a disease caused when bacteria or a virus invades the body). Have the class think up different infectious diseases, such as measles, mumps, cold, flu, chicken pox, HIV, and so on. Pay special attention when HIV is mentioned, and tell students they will be spending the next few lessons learning more about this disease.

Inform your students that they will be getting a special workbook on HIV that they will be able to keep. Let them know that you would like them to ask questions about HIV and, if they prefer, they can put their questions into the “Question Box”. Tell students you will answer all their questions and that any questioner who uses the box will be kept anonymous. Try to answer questions on a daily basis.

Most of the answers to students’ questions can be found in the Student Booklet itself. However, should students ask additional questions, such as “What is sex?” or “What does gay mean?”, you can find some suggested answers in Appendix 6 of this Teacher’s Guide. You may

also want to refer to booklets and pamphlets that are available from your local health department or the Canadian Public Health Association (see Appendix 7). If you expect questions of a very sensitive nature, such as “What is anal intercourse?” or “What is a condom?” you may want to discuss your potential responses with a parents’ advisory committee or home and school association before you begin the program.

In responding to children’s questions, give a straightforward and concise answer whenever possible. To protect the anonymity of the questioner, the teacher, not the students, should read the questions, paraphrasing them if necessary. If you do not know the answer, tell your students that you will try to find it. If the question is crude or deliberately designed to embarrass or make the class laugh, say that you will only answer “real” or “sincere” questions. Be aware, however, that students may not know the correct terminology and may use a slang term in a question. In this case, the question is legitimate and provides a good opportunity for you to teach the correct terminology.

Introduce the fictional family, using the portrait on page 1 as a guide. Tell students that they and Kate will be the stars of this program.

Introductory Narrative: “The Health Project” (30 minutes)

Student Activity 1 uses a language arts base to introduce the topic of HIV. It combines reality and humour in a family life situation to stimulate interest in the topics of sexuality and HIV.

Depending on the learning ability and interests of your class, choose one of these methods:

1. read the introductory narrative OR
2. have the students read the narrative independently OR
3. have the students role play the different characters in the narrative

As a class, discuss the narrative, using the questions at the end of the story as a guide.

If time permits, you may want the students to try the “HIV/AIDS: Fact or Fiction” quiz (Activity 2) before they take it home.

Homework Assignment

HIV/AIDS: Fact or Fiction (Activity 2)

This homework activity has been designed to stimulate interest and discussion about HIV and AIDS. Encourage your students to complete the quiz on their own, then have a parent or guardian try the quiz and discuss the answers. On the next day, review the homework assignment in class.

On completing the “Learning about HIV” program, you may want your students to try this activity again to encourage a perfect score.

Lesson 2 (40 minutes)

Dialogue: “Checking It Out with Dr. Lee” (20 minutes)

Student Activity 3 is designed to provide students with basic information on HIV and how it is transmitted. Pair the students up and have them role play the conversation with Dr. Lee. You may wish to have them repeat the dialogue, in reverse roles. Ensure that your students understand the meaning of HIV and how the virus leads to AIDS. It is also important that students understand that everyone has a responsibility in preventing the spread of HIV.

Near the end of the dialogue, Dr. Lee tells Kate that she doesn't have to worry about getting HIV because she is too young to have sex. This may be a good opportunity to indicate to students that sexual activities require mature judgement, and suggest they continue the discussion with their families for guidance.

In this scenario, Dr. Lee is Kate's neighbour. Dr. Lee is Chan's mother, and Chan is a good friend of Kate. In your students' situation, they may not have a neighbourhood doctor to talk to. Ask students who they could contact for information on HIV (e.g., community health nurse, school nurse, information hotline or public health department).

Word Search: “Searching for Diseases Caused by Viruses” (Optional)

To help students understand that some illnesses are caused by viruses, you may want to use the word search for diseases caused by viruses (Appendix 2). This could also be assigned as homework.

Fill in the Blanks: “Checking up on the Immune System” (20 minutes)

Student Activity 4 is designed to help students understand the immune system and how it weakens as HIV attacks it. This activity can be done individually or in small groups. You may want to do a vocabulary check or have your students look up selected words in the dictionary before you begin. After your students have finished the activity, provide the answers and discuss any difficult parts.

Use the “boy in the bubble” story to help explain the immune system. Please ensure that students do not associate the story with HIV.

David, a boy from Texas, was born without an immune system. He lived in a series of plastic bubbles because his body could not fight off germs. He breathed filtered air and could only eat sterilized food. While he never got sick, David could never be touched by anyone, play outdoors or go to school. When David was 12 he was given a bone marrow transplant and allowed to live outside the bubble. Tragically, David became infected with a virus and died four months later. Life is impossible without a healthy immune system.

Homework Assignments

Getting Rid of Rumours (Activity 5)

Preventing the Spread of HIV (Activity 6)

The cartoon drawings in “Getting Rid of Rumours” will help students understand that HIV cannot be spread by casual contact. Students should independently check out the drawings to determine how you cannot get HIV and then fill in the missing action word(s) under each drawing. The picture of Kate’s dog has been added because many children in the field test schools were worried about their pets. There is no evidence that dogs or other pets can get HIV. Students should discuss their answers with their parents or guardians.

Activity 6 will help students understand that the spread of HIV can be prevented. Ask your students to complete the crossword puzzle independently and then have their parents or guardians check to see whether the puzzle has been filled in correctly. The answers to the puzzle questions should also generate discussion between parents and their children. (See Appendix 3 for the answers.)

On the following day, review the homework assignment in class.



Lesson 3 (40 minutes, or 80 minutes if role playing is used)

Decision Making: “The I.D.E.A. Problem Solver”

Activity 7 provides children with a model for solving problems and making decisions. You may wish to utilize two classes on this activity, especially if role playing is used.

Give each student a blank copy of “The I.D.E.A. Problem Solver” (Appendix 4). Explain how the I.D.E.A. Problem Solver works and go through the following example with them:

“Rick’s older brother works very hard to stay healthy. He eats healthy foods, exercises regularly and does not smoke. But he isn’t sure how to protect himself from HIV. He wants to get some information on HIV. What should he do?”

Sample Solution

I = Identify the problem

Rick’s brother needs information about how to protect himself from HIV.

D = Describe all possible solutions

- a. Get information by calling an information hotline.
- b. Get information by calling his family doctor.
- c. Ask the school nurse for information.
- d. Speak with a trusted adult for information.

E = Evaluate each solution

- a. This idea is okay but Rick’s brother prefers written information.
- b. This idea is okay but his family doctor is hard to reach.
- c. The school nurse comes to the school every morning and is easy to talk to.
- d. A trusted adult is a good idea, but may not have all the information.

A = Act on the best solution

Talk to the school nurse when she comes in on Monday and ask her for some pamphlets on HIV.

In the evaluation component of the problem-solving technique, it is important to point out to students that they should consider the morals and values aspects of each solution: Would my solution hurt anyone? Would my parents think this is a good solution? (Please note that this method can be used in other health areas such as sexuality, alcohol and drugs, etc.).

Have students work in small groups and assign one or two of the case studies to each group. Each small group should select a leader to direct the group. Afterward, the leaders will read their case studies to the rest of the class and explain their solutions. Other class members may comment, providing other suggestions or solutions.

If you have a mature class, you may want to consider assigning the optional case study on sexuality (in Appendix 5) to all the small groups. This case is about Beth, who is feeling the pressure to have sex. You may indicate to your class that learning to make decisions in this case study now can help them later in life when they may feel pressured to have sex.

Students aged 8 to 11 generally like to role play. The case studies in Activity 7 give students an opportunity to act out the situation and the desired response (see guidelines below). If the case study dictates an assertive position, help students practise an assertive response (if it is culturally appropriate). For example, eye contact, standing tall and straight, head up, squaring the shoulders and speaking firmly (not aggressively) are characteristics of an assertive response for most cultural groups.

Guidelines for Role Playing

- Everyone in the group must be involved.
- Use your imagination, but be sure to follow the case study.
- In the skit, the problem must be identified and all the possible solutions described.
- The best solution should be acted out.
- Practise the skit.
- Have one person set the scene (introduce the skit to the audience).

Lesson 4 (40 minutes)

Second Narrative: “Kate’s Visit”

Activity 8 is a lesson that will help students respond to people living with HIV or AIDS in a sensitive and caring manner.

Depending on your class learning ability and interests, this story can be read by you, assigned as independent reading or role played. Afterward, use the discussion questions at the end of the story to help students assess their attitudes toward people with HIV or AIDS.

Lesson 5 (40 minutes)

Concluding Narrative: “Knowing Who’s in Charge” (10 minutes)

Read or have the students read Kate’s final dialogue in Student Activity 9. Ask the students the following questions:

- Would you now be able to prepare a project on HIV?
- Why does Kate feel safe now from getting HIV?
- Who is responsible for making most of your health decisions?
- Do you think you will be able to make healthy decisions about HIV?

Board Game: “On the Road to Good Health: Knowing the Facts about HIV” (30 minutes)

Student Activity 10 is designed to help students summarize their knowledge and attitudes about HIV and AIDS by using a board game. Small groups of three or four students can play the game using a single die and buttons as markers. If time does not permit, this lesson can be assigned as homework or used later in the year as a review.

When students have completed all the activities, allow them to keep their booklets. Please have the students thank their parents or guardians for their participation in this program.

Follow-up Activities

The following ideas can be used as review activities. Have students

- create posters about HIV
- write their own narrative or play about an HIV situation
- collect newspaper and magazine articles to create a scrapbook on HIV and AIDS
- use magazine and newspaper pictures to create a collage on how people cannot get HIV (similar to Activity 5)
- create an HIV information puzzle (on computer or by hand)
- develop a board game similar to the one in Activity 10
- develop a “Trivial Pursuit” type of game that covers the facts about HIV and AIDS (a student draws a question and is allowed to move forward if he or she can give the correct answer)

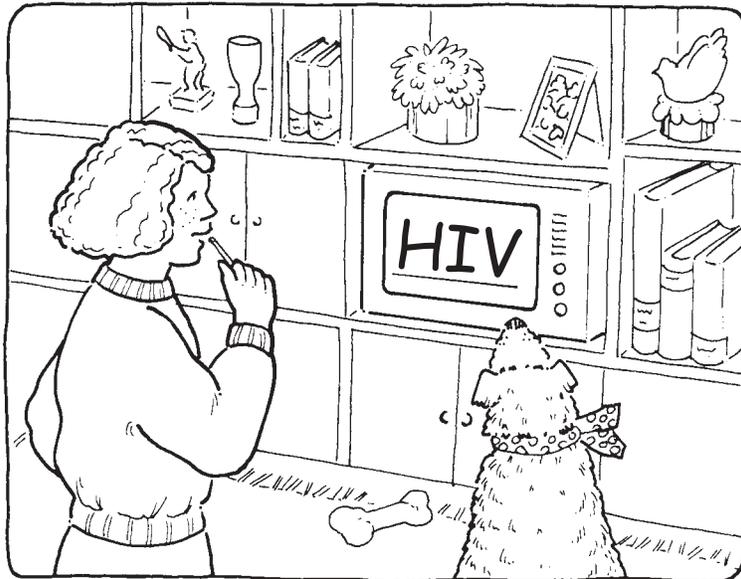
Congratulations!

Lastly, congratulate yourself. You have played a major role in helping your students learn about HIV/AIDS and how to protect themselves. The Canadian HIV/AIDS Information Centre appreciates the time and effort you have put into this program.



APPENDICES

- Appendix 1 Sample Letter to Parents
- Appendix 2 Searching for Diseases Caused by Viruses
- Appendix 3 Answers to Word Search and Crossword Puzzle
- Appendix 4 The I.D.E.A. Problem Solver
- Appendix 5 “Beth Needs Your Help”
- Appendix 6 Common Questions and Responses for Children Aged 8 to 11
- Appendix 7 Resources
- Appendix 8 The Original Project Team



Appendix 1

Sample Letter to Parents

** If you are planning to have a parents' evening, add a paragraph inviting parents to attend a brief presentation and discussion. This meeting could be part of a home and school or parents' advisory committee evening. An expert could be invited to lead a discussion on how to talk to children about sensitive issues such as HIV and AIDS.*

Dear Parents or Guardians:

We will soon be starting an HIV education program that will

- alleviate any fears children may have about getting HIV
- provide them with factual and reliable information
- answer their questions about HIV and AIDS
- help them develop the skills they need to make decisions good for their health
- help them develop a caring attitude toward people living with HIV or AIDS.

There are a number of reasons for introducing the program at this particular age level. HIV is a serious disease that is spreading rapidly throughout the world, and infection rates are still increasing in Canada. Most children have heard about HIV and AIDS from the media, adult conversations or their peers. Many children are asking questions and some have fears about getting the disease. Also, as the prevalence of HIV increases spreads, it is quite possible that children will know someone personally who has contracted the virus.

The program that we will be using has been developed by the Canadian HIV/AIDS Information Centre (a program of the Canadian Public Health Association). Educators have found the program to be sensitive, age-appropriate and educationally sound. Students involved in the field test found the activities interesting and helpful. It will take three to five lessons to complete the program.

Each child will be given his or her own copy of a booklet called "Learning About HIV". Each day, students will work through the activities either individually or in small groups. In addition, a Question Box will be provided so that students can submit anonymous questions. All their questions about HIV will be answered.

We think it is important for parents to be informed and involved in this program; helping students learn about HIV should be a partnership between parents and the school. To enable this partnership to strengthen, your child will be encouraged to bring home his or her learning booklet and to discuss the lessons with you. This will help reinforce the ideas and skills that are covered in the classroom. In addition, three of the activities will be assigned as homework. These are easy assignments which involve identifying drawings and completing a true or false quiz and a crossword puzzle. We hope that you will check the answers with your child and discuss some of the ideas that are presented in the assignments.*

Our aim is to inform and discuss in an educational, yet caring manner. Should you have any questions or need more information about this program, please do not hesitate to call me.

Yours sincerely,

Principal

Teacher

Appendix 2

Searching for Diseases Caused by Viruses

Kate has just learned that HIV is a germ called a virus. There are many types of viruses, and different viruses are passed from person to person in different ways. HIV is an infectious disease. One of the important things about infectious diseases is once you learn about how they spread, you can also learn how to keep from getting them, so that you can stay healthy.

In the word search below, find the different diseases caused by viruses and the methods of transmission (how they are spread).

THE SEARCH

C Y X R U A X U X M A J B Y G S G E G
R I T B F Q S O X M R Z C U C S Z N Z
D S N G S B M N P S D L O C M E K R G
V F P Q N V C V E N Q J I Z G L I O L
D Y D M O I L O P E E D X S Z S S B N
O C R G U V D G W R Z K S P D A S R O
T K L U R M R A L I M I C I K E I I W
U G W L O L B G Y R K Z N I K M N A X
K E S F L V J Y F E M G P G H G G K M
G Y E V K L P Z C J Y E A C X C T Y A
T O U C H I N G K P H Y E F W F Y O B

DISEASES

FLU
COLDS
CHICKENPOX
MEASLES
POLIO
MUMPS

WAYS VIRUSES SPREAD

KISSING
TOUCHING
SNEEZING
AIRBORNE

How could you protect yourself from getting these viruses? Dr. Lee says that most of these viruses are spread through the air, by skin contact or through water. HIV IS NOT SPREAD IN THESE WAYS. Do you remember how HIV is transmitted?

Appendix 4

The I.D.E.A. Problem Solver

Identify the problem.

Describe all possible solutions.

A. _____

B. _____

C. _____

Evaluate each solution (what is good or not good about each solution).

A. _____

B. _____

C. _____

Act on the best solution (choose the best solution).

Appendix 5

“Beth Needs Your Help”

Beth is 13 years old and has asked you for advice. Her boyfriend is pressuring her to have sex, saying that “All the kids are doing it.” Beth doesn’t want to, but she doesn’t want to lose her boyfriend. Lead Beth through the I.D.E.A. problem-solving process. Help her arrive at a wise, responsible decision.

1. **I**dentify the problem.

2. **D**escribe all possible solutions.

3. **E**valuate each solution.

4. **A**ct on the best solution.

Appendix 6

Common Questions and Responses for Children Aged 8 to 11

The answers to most of the questions that students will have can be found in the text of the student booklet “Learning about HIV”. However, children’s natural curiosity may lead them to ask additional questions. Listed below are some typical questions and suggested responses. When responding, try to provide a concise and straightforward answer.

These responses are not meant to be taught as information but rather as suggested approaches to more difficult topics should they arise as questions or points of clarification. Depending on how your community may react, you may want to have certain questions discussed by a parents’ advisory committee before you teach the program.

1. What is HIV and AIDS?

HIV stands for Human Immunodeficiency Virus.

AIDS stands for Acquired Immunodeficiency Syndrome.

2. When will HIV cause people to get AIDS?

HIV attacks the immune system (the body’s defence system against disease). If a person gets infected with HIV, it usually takes several years for the virus to multiply and cause serious damage to the immune system. After time, the immune system will no longer be able to defend the body from deadly infections, diseases or cancers. This is when a person is said to have AIDS.

3. What is sexual intercourse (“having sex”)?

Sexual intercourse or having sex is a type of physical contact between two people which involves their genital organs. Sex can be part of an intimate and loving relationship between mature individuals.

4. What does “heterosexual” mean?

A person who is attracted to people of the opposite gender is called heterosexual. Some people use the word “straight” when referring to people who are heterosexual.

5. What does “gay” mean?

A gay, or homosexual, person is attracted to people of the same gender.

6. Is HIV only a homosexual (gay) disease?

No. With HIV, it doesn’t matter who you are – man or woman, heterosexual or homosexual. It matters how you behave regarding sex and injection drug use.

7. How do gay men get HIV?

Just like anyone else. Any person can get HIV if they have unprotected sex, including vaginal, oral, and anal sex, or by sharing needles with someone who has HIV. Some gay men have unprotected anal or oral sex, and some share needles for injecting drugs.

8. What is anal sex (intercourse)?

HIV infection can be spread through both anal and vaginal intercourse, as well as through oral sex. Anal sex is the insertion of the penis into the anus of the sexual partner. This is known as a “high risk” behaviour, especially if a condom is not used as a barrier.

9. What is oral sex?

Oral sex is the licking or sucking of the male penis or the female vulva and vagina. This is considered to be a “low risk” behaviour for transmitting HIV, but can be a high risk behaviour for transmitting other sexually transmitted infections.

10. What is masturbation?

Masturbation is touching your own body to give yourself sexual pleasure. There is no risk of getting HIV or any other disease or illness if you are only touching your own body.

11. What is a condom? How does a condom protect you from getting HIV?

A condom is a thin piece of latex rubber which covers the entire penis during sexual intercourse. It can prevent the transmission of HIV from one person to another if it is used properly. It can also be used to prevent pregnancy since it stops the male’s sperm from reaching an ovum (egg) in the female’s body.

12. What happens to a person when he or she gets HIV?

When someone first gets infected with HIV, the person usually feels well for many months and possibly years. But, gradually, as the virus damages the immune system, the person may feel tired, lose weight, and develop skin rashes and swollen glands. There are many medications available that can help people to live longer and more healthy lives with HIV. Eventually the person with HIV may get sick with cancer, pneumonia or even brain damage. The advanced state of the disease is called AIDS. Even in this stage of sickness, people can recover to some extent and live for several years. Sooner or later, however, most people with AIDS get too sick for the medication to work, and then they die.

(Note: The early symptoms are so general and common that some children who experience these symptoms may think they have HIV. Reassure students that these symptoms are also caused by less serious illnesses. For people with HIV, these symptoms often do not go away.)

13. How does a person know if he or she has HIV?

The only way to know is to get a special blood test. People should talk to their doctors if they are worried about HIV.

14. How did the children who have HIV get it?

If a woman who has HIV becomes pregnant, there is a chance that she will pass the virus on to her unborn child. The baby may also get infected while it is being born or through the mother's milk. Currently, very few children in Canada have HIV.

15. How long do you live if you have HIV or AIDS?

Starting from the time people first get infected, most will live 10 to 20 years, some shorter, some longer. From the time when they are said to have "full-blown AIDS", the average time is shorter, 1 to 2 years.

16. Will there ever be a cure for HIV or AIDS?

Scientists all over the world are looking for a cure and a way to prevent HIV. They have not yet found a cure or a vaccine. However, they are learning more and more about this disease every day. It is hoped they will discover a cure and a vaccine. There are drugs available now that help relieve some of the effects of HIV. These drugs also help people with HIV or AIDS live longer, but do not cure HIV or AIDS.

17. Can you get HIV from "French kissing"?

No cases of infection through "French kissing" or "open-mouth kissing" have been reported. Most experts agree that kissing is OK and does not spread HIV because there is not enough virus in the saliva of an infected person to spread the infection to someone through a kiss. There are no reported cases of family members becoming infected from kissing a person with HIV.

18. Can I get HIV from a blood transfusion?

The chance of getting HIV through a blood transfusion is very small since all blood is now tested and treated. You cannot get HIV by donating blood, since only new, sterilized needles are used.

Appendix 7

Resources

Canadian HIV/AIDS Information Centre

Canadian Public Health Association

400 – 1565 Carling Avenue, Ottawa, ON K1Z 8R1

Tel.: (613) 725-3434

Toll-free in Canada: 1-877-999-7740

Fax: (613) 725-1205

E-mail: aidssida@pha.ca

www.aidssida.cpha.ca

The mandate of the Canadian HIV/AIDS Information Centre is to provide information on HIV prevention, care, and treatment to community-based organizations, health and education professionals, resource centres and others with HIV and AIDS information needs in Canada. At the Information Centre, we have a specific focus to support Canadian activities in the area of HIV prevention.

We distribute over 850,000 posters, pamphlets and manuals every year; and we maintain Canada's largest library collection of over 20,000 HIV/AIDS resources. All our services are available in both English and French.

We invite you to visit our web site at <http://www.aidssida.cpha.ca> to find out more. From this site, you can search our entire Library collection (go to “Resources” and then click on “Look for stuff we can lend you”).

The entire Distribution collection can be searched from our web site (go to “Resources” and click on “Look for stuff we can send you”). We've made ordering easy for you – phone, fax, or e-mail us, or use our new online ordering service.

We also have an extensive collection of electronic documents (go to “Resources” and click on “Electronic Documents”).

Canadian AIDS Society

309 Cooper Street, 4th floor, Ottawa, Ontario K2P 0G5

Tel.: (613) 230-3580

Toll-free in Canada: 1-800-888-1058

Fax: (613) 563-4998

E-mail: casinfo@cdnaids.ca

www.cdnaids.ca

The Canadian AIDS Society (CAS) is a national coalition of 115 community-based AIDS organizations across Canada. We are dedicated to strengthening the response to HIV/AIDS across all sectors of society, and to enriching the lives of people and communities living with HIV/AIDS.

Canadian AIDS Treatment Information Exchange

505 – 555 Richmond Street West, Toronto, Ontario M5V 3B1

Tel.: (416)-203-7122

Toll-free in Canada: 1-800-263-1638

Fax: (416) 203-8284

E-mail: info@catie.ca

www.catie.ca

The Canadian AIDS Treatment Information Exchange (CATIE) is Canada's leading non-profit, community-based provider of free, confidential, up-to-date treatment information for people living with HIV and AIDS, their families, caregivers and health-care providers.

AIDS Hotline Numbers:

Alberta	1-800-772-2437
British Columbia	1-800-661-4337
Manitoba	1-800-782-2437
Newfoundland & Labrador	1-800-563-1575
New Brunswick	1-800-561-4009
Northwest Territories	1-800-661-0844
Nunavut	1-800-661-0795
Eastern Arctic	1-800-661-0795
Nova Scotia	1-800-566-2437
Ontario	English: 1-800-668-2437
	Français : 1-800-267-7432
Prince Edward Island	1-800-314-2437
Quebec	Contact your local AIDS Service Organization or CLSC.
Saskatchewan	1-800-667-6876
Yukon	1-800-661-0408, x 8323

In addition to federal, provincial and territorial health departments, most local health departments have resources on HIV/AIDS.

Appendix 8

The Original Project Team

Dr. David Walters was director of the Canadian Public Health Association AIDS Program.

Peggy Edwards, the project manager, is a health promotion consultant, editor and writer.

Robert Zacour is a curriculum coordinator responsible for health promotion programs with the Ottawa Board of Education and other clients. The author of two health textbooks, Mr. Zacour served as the principal writer for this project. Mr. Zacour has developed and implemented a number of nationally used health curricula, including smoking prevention and personal safety programs.

Paul Tomlinson and **Dorothy Strachan** are experienced educators and designers of innovative learning tools in health and fitness. They have been involved in the development of over 20 books and manuals as well as numerous articles in health-related areas.

Karen Cunningham is an Ottawa artist who has designed and illustrated several publications for national distribution. One of her primary areas of interest is illustrations for young children.

Heidi Liepold, National HIV Prevention Program Consultant, represented Health Canada on this project.