

Teachers' Guide





Teachers' Guide for the Reference Material on HIV, AIDS & STI for High School Students First edition

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Purpose

The *Reference Material on HIV, AIDS and STI for High School Students* aims to increase the knowledge of students on what HIV, AIDS and STI are; HIV and STI transmission and prevention; the Philippine HIV Law; the HIV situation in the Philippines as well as HIV and STI services available in the country.

The *Teachers' Guide* is designed to assist teachers who will be using the Reference Material as their main teaching tool. It provides answers to Reference Material activities; further explains topics discussed in the lessons; and contains optional activities (not found in the Reference Material) that the teacher might want to use.

Target users

The *Reference Material on HIV, AIDS and STI* for High School Students is designed for Grade 8 MAPEH students with prior knowledge about key concepts listed in each lesson. However, the entire Reference Material, or parts of it, can also be used by students from other grade levels and for other subjects as deemed fit by teachers.

This accompanying Teachers' Guide is for high school MAPEH teachers who will be using the Reference Material on HIV, AIDS and STI for High School Students. Other teachers and school personnel who need a reference in teaching topics on HIV, AIDS and STI may also benefit from this guide.

How to use this Teachers' Guide

At the start of each lesson, references, pre-requisite concepts, lesson objectives and lesson outlines are presented. There is also a box of "Points to Emphasize to Students" to help teachers prioritize the most important concepts in each lesson that they cannot leave out.

The *left side* of each sheet is a copy of the actual page in the Reference Material. Meanwhile, the *right side* of each sheet includes answers to the activities, explanations, and additional information that might be helpful in answering questions that your students might raise during discussions.

There are optional activities at the end of some of the lessons. Moreover, at the end of the guide, glossary, flip cards of common STI, refusal skills discussion, and sample tests (with answer keys) may also be found.

Human Immunodeficiency Virus (HIV) & other Sexually Transmitted Infections (STI)

After each lesson, you should be able to demonstrate a deeper understanding of the Human Immunodeficiency Virus (HIV), Acquired Immunodeficiency Syndrome (AIDS), and other Sexually Transmitted Infections (STI) by:

Lesson 1. Introduction to HIV and AIDS (30-40 minutes)

- 1. Explaining what HIV is and how HIV infection affects the body
- 2. Discussing the symptoms of HIV infection
- 3. Differentiating HIV from AIDS
- 4. Explaining Antiretroviral Therapy (ART)

Lesson 2. Transmission and prevention of HIV infection (30-40 minutes)

- 5. Explaining how HIV is transmitted
- 6. Enumerating the steps in the prevention and control of HIV transmission
- Discussing the importance of abstinence as the most effective way of preventing HIV infection

Lesson 3. Sexually Transmitted Infections (30-40 minutes)

- 8. Describing common symptoms of sexually transmitted infections (STI)
- 9. Explaining the relationship between STI and HIV infection
- 10. Discussing STI prevention and treatment concepts
- 11. Making decisions on what to do to prevent or address STI and HIV infection

Lesson 4. Available HIV & STI services and assessment of risk (30-40 minutes)

12. Identifying the different HIV and STI services available
 13. Assessing one's risk for HIV and STI
 14. Applying decision-making skills in managing sexual health-related issues

Lesson 5. HIV law and the Philippine HIV situation (30-40 minutes)

15. Describing government policies for the prevention and control of HIV and AIDS (RA 8504 or Philippine AIDS Prevention and Control Act)

- a. Voluntary HIV Counseling & Testing with written informed consent
- b. Confidentiality
- c. Discrimination
- 16. Interpreting data on the current status of HIV in the Philippines
- 17. Reflecting on the trend of the HIV situation in the country

Optional Activities Glossary References Acknowledgements



Lesson I: Introduction to HIV and AIDS

References

https://www.aids.gov/hiv-aids-basics/hiv-aids-101/what-is-hiv-aids/

http://www.nejm.org/doi/full/10.1056/NEJMoa0802905#t=article

http://www.who.int/diagnostics_laboratory/documents/guidance/pm_module1.pdf

- http://www.hematology.org/Patients/Basics/
- http://www.cdc.gov/hiv/basics/whatishiv.html
- http://www.who.int/hiv/en/
- http://www.merriam-webster.com/dictionary
- HIV, AIDS & ART Registry of the Philippines (Epidemiology Bureau, Dept of Health, 2016)

Pre-requisite Concepts: communicable disease prevention and control, chain of infection, immune system

Lesson Objectives

- 1. Explaining what HIV is and how HIV infection affects the body
- 2. Discussing the symptoms of HIV infection
- 3. Differentiating HIV from AIDS
- 4. Explaining Antiretroviral Therapy (ART)

Lesson Outline (30-40 minutes)

- Importance of understanding HIV and AIDS concepts
- What is HIV?
- Illustrating the effects of HIV on our body
- Symptoms of HIV
- Differentiating HIV from AIDS
- Treatment for HIV: Antiretroviral Therapy (ART)

POINTS TO EMPHASIZE TO YOUR STUDENTS:

- HIV infects humans only.
- HIV attacks the immune system of a person which makes the person not able to fight infections. (See illustration on page 3 of this guide)
- HIV infection has no specific symptoms.
 - $\circ~$ A person with HIV can look healthy for years, and still transmit the infection.
 - Once the immune system weakens, the body may have different signs and symptoms depending on the infection that is attacking the body.
- There is no cure for HIV infection.
- Antiretroviral (ARV) drugs prevent the replication of the virus in the body, but do NOT cure HIV infection.
- HIV is a deadly virus, but taking ARV daily can prolong the life of a person with HIV.
- HIV and AIDS are not the same.
 - Acquired Immunodeficiency Syndrome (AIDS) is a condition of a person infected with HIV when the immune system is already weak or destroyed and the body can no longer fight common infections. Not all people with HIV have AIDS. (See discussion on page 4 of this guide).

Lesson I. Introduction to HIV and AIDS

Importance of understanding HIV and AIDS concepts

There is an increasing number of people with HIV in the Philippines. 2016 estimates from the Department of Health (DOH) show that **62% of new HIV infections come from young people, 15 to 24 years old**. This is why it is important for you to understand concepts on HIV and AIDS which will be discussed throughout the five lessons in this reference material.

Additional information about the current situation of HIV in the country will be discussed in Lesson 5.

What is HIV?

The **immune system** is a collection of cells and substances that defends the body against foreign substances (virus, bacteria, or other germs) called **antigens**, and helps keep the body healthy. When antigens enter the human body, the immune system produces **antibodies** in the blood to fight the antigens.

The immune system can be compared to an army guarding the country and protecting it from foreign invasion. It is composed of white blood cells, called T-lymphocytes and B-lymphocytes, which perform the role of an army. Among the T-lymphocytes are cells called **Cluster of Differentiation 4 (CD4)**.

The **Human Immunodeficiency Virus or HIV** is a virus that attacks these CD4 cells and weakens the immune system. Once HIV enters the cell, it uses this cell to make copies of itself - a process known as *replication*. Over time, the copies of the virus increases in the body which cause more CD4 cells to be destroyed. When this happens, the immune system can no longer defend the body from antigens. This condition is called **Acquired Immunodeficiency Syndrome or AIDS**.

Figure 1. How HIV attacks the antibodies of an infected individual



Source of illustration: Avert, http://www.avert.org/about-hiv-aids/how-infects-body

Importance of understanding HIV and AIDS concepts

HIV infections are increasing rapidly in the Philippines, and 62% of new infections are occuring between the ages of 15-24 years. Your students are, or will become, part of this age group. To empower them to avoid risky behaviors, they need to have the correct understanding of the concepts of HIV transmission and prevention as well as the HIV and STI services available in your locality.

Moreover, Republic Act 8504, mandates schools to teach students the basics about HIV. The next five (5) lessons in the Reference Material will help your students understand the basic concepts about HIV, AIDS and STI.

What is HIV?

Human Immunodeficiency Virus (HIV) is a virus that attacks the immune system of the body.

The assumption of this lesson is that your students already have some background on the immune system in previous Science and Health topics. Assess this quickly. If your students are having difficulty understanding the function of the immune system, you can explain that the immune system is like a huge army guarding and protecting the body. For healthy people, this army is great in number; strong and able to defeat the infections that attack the body. However, **HIV weakens this army, diminishes its numbers, and makes it unable to defend the body against infections**.

A CD4 cell, or Cluster of Differentiation 4 cell, is a type of white blood cell (versus a red blood cell). You can quickly review the two types of blood cells with your students.

- **Red blood cell** carries oxygen from the lungs to rest of the body; collects carbon dioxide from the body and brings it to the lungs to be exhaled.
- White blood cell protects the body by fighting infections.

It is important to emphasize to your students that HIV destroys the white blood cells (specifically the CD4 cells) and makes the immune system not able to fight infections.

Illustrating the effects of HIV on our body



Illustrating the effects of HIV on our body

This section aims to help explain to your students how HIV infects the body. These illustrations have been simplified to describe the role of CD4 in the body and how HIV affects the CD4 cells, and eventually, the body.

You may explain to your students that in the illustration, Body and CD4 are like best friends. CD4 protects Body, his friend, from the enemies (i.e. common infections). Follow the story in the illustration and help your students understand what happens when HIV infects the body.

RECOMMENDED FURTHER READING FOR TEACHERS ON HIV INFECTION

It is difficult to explain to students the effects of HIV without understanding the progression of HIV infection, from initial infection to death. The illustration on the right shows the progression of HIV infection, which is divided in 4 stages. However, your students do not need to memorize all the stages of HIV progression. You may choose to emphasize the following to your students:

- HIV is a deadly virus.
- If the person is not taking antiretroviral (ARV) drugs, it takes about 5-10 years from HIV infection to death. (Source: http://www.who.int/features/ga/71/en/)
- As HIV replicates and increases in number inside the body (also called a high viral load), the immune system weakens.
 - Knowing a person's CD4 cell count is a way to measure the strength of a person's immune system. A low CD4 count means the immune system is already weak and not able to fight infections.
 - High viral load (HIV has multiplied in the body) = Low CD4 counts (weak immune system)
- Once the CD4 count is very low, the person can have many infections. This condition is called AIDS.
- A person with HIV dies of the infections that the body cannot fight. Tuberculosis and severe
 pneumonia are the most common causes of illness and death among people with HIV.
- ARV prevents the replication of HIV in the body and prevents the immune system from becoming weak. Taking ARV daily will prolong the life of a person with HIV.

Progression of HIV infection & its effects on the immune system

The normal CD4 cell count is >1,000 cells/mm³. Patients with HIV infection have decreasing CD4 cell counts. When the CD4 cells are too low, this makes the body too weak to defend itself. It becomes prone to infections. Once the CD4 cell count reduces to <200 cells/mm³, the likelihood of people with HIV having many infections is higher. These infections are called **opportunistic infections (OI)** because they take advantage of the body's weak immune system. When the body is attacked by many infections at once, this syndrome is called Acquired Immunodeficiency Syndrome (AIDS).

The illustration on the right shows that as the levels of HIV increases in the body (red line), the levels of CD4 decreases (blue line). So as the HIV infection progresses in a person, the body's immune system becomes more weak.



Source: http://www.who.int/diagnostics_laboratory/documents/guidance/pm_module1.pdf

Stage 1: When the person is newly infected with HIV, the viral load or the amount of HIV in the blood is high. At this time, the immune system of the person is still ok, and the number of CD4 cells is still >1000 cells/mm³. The person infected with HIV has no symptoms and looks seemingly healthy during this stage, but is very infectious.

Stage 2: The viral load goes down temporarily. HIV starts weakening the immune system and the number of CD4 cells starts to decrease. During this time, the person may have occasional rashes, respiratory infections (cough and colds), and unexplained mild weight loss.

Stage 3: The viral load increases and continues to weaken the immune system. The CD4 cell count is now low and continues to decrease. During this time, the person becomes sickly because the body is unable to fight off infections like diarrhea, tuberculosis, pneumonia, and severe oral candidiasis ("singaw"). The person can also have severe weight loss and prolonged fever.

Stage 4: The viral load is now very high and the number of CD4 cells is <200 cells/mm³. This is the time when a person is said to have AIDS, which is a constellation of infections due to a very weak immune system. The person can have life-threatening pneumonia, chronic diarrhea, all kinds of tuberculosis (affecting the bone and the brain), eye infections, a cancer called Kaposi's Sarcoma and many more opportunistic infections. *Stage 4 does not necessarily lead to death*.

Symptoms of HIV

A person infected with HIV may look physically healthy and well even if the virus is already inside his or her body.





Symptoms of HIV

Medically, the term 'sign' is different from 'symptom'.

- A 'symptom' is what a patient subjectively feels or notices (e.g. headache); while
- A 'sign' is something a trained health care provider objectively observes the patient to have (e.g. rashes).

To simplify the terms used for your students, the Reference Material uses the term 'symptom'. However, you can use the term 'signs', or 'signs and symptoms', as well.

It is important to emphasize to your students that a person with HIV can also look and feel healthy because there are NO specific symptoms of HIV infection, especially at the initial stages of infection. However, even though NO symptoms may be present, the person with HIV infection can still transmit the virus to another person.

People who engage in risky sexual behavior or inject drugs (this will be discussed in more detail in Lesson 2) cannot assume that they do not have HIV just because they feel and look healthy, or because they or their partner do not show any symptoms.

These infections that attack people with HIV are often curable when immediately treated with proper medications but HIV infection itself cannot be cured. People with HIV should see their doctors regularly to receive appropriate diagnosis and treatment of these infections.

Since the immune system of a person with HIV eventually weakens, he or she is easily attacked by different infections that a healthy person (with a strong immune system) can normally fight.

Most of these infections are curable - making it important for HIV-positive people to regularly see their doctors. However, HIV infection itself is not curable.

A person with HIV whose immune system is already weak and is attacked by infections may have symptoms ranging from frequent or chronic diarrhea, severe weight loss, on-and-off fever, cough, night sweats to a severe lifethreatening illness.

Consult a doctor immediately for further diagnosis if you experience any of the symptoms described below.



Remember, HIV infection itself has **NO specific symptoms**. Therefore, a person may already be infected with HIV even if **he or she looks physically healthy and well.** The only way to know if a person has HIV is to get an HIV test.

Key Concept

Some symptoms may appear as shown in the illustration on page 4 of the reference material.

It is important to emphasize to your students that:

- HIV does not have specific symptoms. The symptoms of a person with HIV DEPENDS ON THE INFECTION present in his or her body.
- These infections that attack the body are often curable, but HIV is not.
- It is only through HIV testing that people can be certain if they are infected with HIV or not.

Differentiating HIV from AIDS

Acquired Immunodeficiency Syndrome (AIDS) is a condition of a person infected with HIV when the immune system is already weak or destroyed and the body can no longer fight common infections.

HIV infection **MAY LEAD** to AIDS but a person with HIV **DOES NOT NECESSARILY** have AIDS.

 $\pmb{\mathsf{H}}$ – $\pmb{\mathsf{Human}}$: because this virus can infect human beings ONLY. Animals and mosquitoes cannot have HIV.

I – Immunodeficiency: because the virus causes a deficiency or a failure to work properly in the body's immune system. The body becomes weak and not able to fight infections.

V – Virus: because this organism is a virus, it is not able to reproduce by itself. It reproduces by taking over the machinery of the human cell.

As **HIV** increases in the body, the immune system becomes even weaker. This makes it difficult for the body to fight infections. When there are many infections present at the same time, the condition is called **AIDS**.

A – Acquired: because it is a condition transmitted from person to person. It <u>cannot</u> be inherited or passed through genes.

I – **Immuno**: because it affects the body's immune system, which functions to fight germs such as bacteria and viruses.

D – **Deficiency**: because it makes the immune system not able to work properly, making the body unable to fight infections.

 ${\bm S}$ – Syndrome: because a person with AIDS may experience a wide range of symptoms due to different diseases and infections.

Guide Questions

- 1. Do all people with HIV also have AIDS?
- 2. Can a person without HIV have AIDS?

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Differentiating HIV from AIDS

It is important to emphasize to your students that HIV and AIDS are **NOT** the same.

HIV is the virus. AIDS is a condition that happens when the immune system of a person with HIV becomes very weak and is attacked by many infections. All people who have AIDS have HIV infection; but a person with HIV does not automatically have AIDS.

Also, HIV is a permanent infection. There is no cure for it. A person with HIV has the virus for life. Meanwhile, AIDS is a condition which can be temporary if:

- the different infections attacking the body (e.g. tuberculosis, pneumonia, etc.) are treated and cured appropriately; and
- the replication of HIV is slowed down through Antiretroviral Therapy (ART).

However, if the infections are left untreated and ART is not started, AIDS can lead to death. ART will be discussed further in the next section of this lesson.

You may also refer to the "Recommended Further Reading for Teachers" on page 4 of this Teacher's Guide – which explains that **AIDS is the 4th stage of HIV infection.** However, AIDS does not necessarily lead to death and can be temporary (as discussed above).

Guide Questions

Ask your students to answer the guide questions. Let some students share their answers with the class.

- Do all people with HIV also have AIDS? No. Not all people with HIV have AIDS.
- 2. Can a person without HIV have AIDS? No. AIDS develops from HIV infection.

Treatment for HIV: Antiretroviral Therapy

At present, there is **NO VACCINE** available to prevent HIV infection.

There is also currently **NO CURE** for HIV that would <u>eliminate</u> the presence of the virus within the human body. A person who gets infected with HIV will have HIV for life. However, there is **treatment** available that <u>slows down</u> the spread of HIV.

The treatment is called **Antiretorviral** (*anti* • *retro* • *viral*) **Therapy** (**ART**) which uses medicines called **antiretrovirals** (**ARV**). These medicines are needed to slow down the replication of the virus, preventing the CD4 cells to be destroyed. Having enough CD4 cells allows the immune system to fight infections.

Without ARV, a person with HIV may die of infections within 5 to 10 years. Taking ARV every day will prolong the life of a person with HIV. ART will be discussed further in Lesson 4.



Treatment for HIV: Antiretroviral Therapy

There is no vaccine that can prevent HIV infection. Attempts to develop a vaccine have been done in different countries; however none have been successful so far.

It is important to distinguish CURE from TREATMENT.

- **Cure** (*noun*) a complete or permanent solution or remedy; something (such as medicines) that stops a disease.
- **Treatment** (*noun*) a substance or technique used to care for a sick patient; deal with a disease medically or surgically; may not be a permanent solution.

Cure is a permanent solution. There is nothing that can permanently remove HIV from the body of a person infected with the virus. However, there are antiretroviral (ARV)¹ drugs that prevent the replication of the virus in the body. This treatment is called **Antiretroviral Therapy (ART)**.

A person with HIV needs to take ARV daily for life. If he or she stops taking ARV, the virus will again multiply and destroy the functionality of the immune system – causing different bacteria, viruses and germs to infect the body. Taking <u>ARV every day will prolong the life of a person</u> with HIV but <u>ARV will not remove HIV from the body</u>.

The illustration below which is found on Page 7 of the Reference Material is the continuation of the cartoons on Page 2. It shows the effect of taking ARV daily on the body of a person living with HIV. However, emphasize to your students that <u>ARV will not cure HIV infection</u>.



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¹ HIV is a retrovirus (from "reverse transcriptase virus") so drugs against HIV are called antiretroviral drugs (ARV).

To continue our story from page 2, this is what happens to the body when a person with HIV starts taking Antiretroviral (ARV) medicines everyday.



Guide Questions

- 1. Can a person with HIV get cured?
- 2. Is HIV a deadly virus?
- 3. Of the things you learned today, what will you share with your friends about HIV and AIDS?

Guide Questions

Ask students to answer the guide questions. Let some students share their answers with the class.

1. Can a person with HIV get cured?

No. There is NO CURE for HIV infection yet. But a person with HIV can be TREATED with a combination of medicines called antiretrovirals (ARV) to slow down the effects of HIV on the immune system. An HIV-positive person on Antiretroviral Therapy (ART) is still HIV-positive but is more likely to be able to fight infections.

It is important to emphasize to your students that there is NO CURE for HIV. HIV is a **life-long infection**. That is why it is important to understand what HIV is and how it can be prevented.

RECOMMENDED FURTHER READING FOR TEACHERS

In 2008, a Berlin patient, Timothy Ray Brown, who was HIV-positive and was also diagnosed with Acute Myeloid Leukemia, had complex life-threatening treatment for his leukemia as well as a stem cell transplant from a donor with a very rare genetic mutation (CCR5 delta 32) that resisted HIV infection. When he was tested for HIV, the virus was undetectable in Timothy Brown. However, efforts to replicate this procedure in other patients have failed. There is still no cure for HIV.

(Source: http://www.nejm.org/doi/full/10.1056/NEJMoa0802905#t=article)

2. Is HIV a deadly virus?

Yes. HIV is a deadly virus. HIV infection lowers the body's immune system and makes a person very prone to infection. If the infections are severe or not treated, these infections can lead to death. Examples of life-threatening infections are Tuberculosis and severe pneumonia. However, if these infections are treated early, these infections can be cured and would not end in death. Taking ARV prevents the immune system from becoming weak and allows the body to fight these infections.

3. Of the things you learned today, what will you share with your friends about HIV and AIDS?

Encourage your students to share what they found interesting about the lesson. Probe why they found these interesting and why they would share it with their friends. Encourage them to ask questions they did not understand about the lesson.

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Lesson 2: Transmission and Prevention of HIV Infection

References

http://www.who.int/hiv/en/ http://www.who.int/hiv/topics/mtct/en/ http://www.who.int/maternal_child_adolescent/documents/9789241596596/en/ http://www.merriam-webster.com/dictionary http://www.cdc.gov/hiv/basics/transmission.html http://www.cdc.gov/hiv/basics/prevention.html https://aidsinfo.nih.gov/education-materials/fact-sheets/21/51/hiv-treatment--the-basics https://www.aids.gov/hiv-aids-basics/just-diagnosed-with-hiv-aids/treatment-options https://www.aids.gov/hiv-aids/what-is-hiv-aids/myths-about-hiv-aids.html http://www.aidsmap.com/hiv-basics/Transmission/page/1412438/ https://www.unicef.org/programme/breastfeeding/hiv.htm http://www.thebody.com/Forums/AIDS/Meds/Q202006.html http://lambskincondoms.org/http://pdf.usaid.gov/pdf_docs/Pnabs065.pdf Pre-requisite Concepts: body fluids, chain of infection, reproductive system

Lesson Objectives

- 5. Explaining how HIV is transmitted
- 6. Enumerating the steps in the prevention and control of HIV transmission
- 7. Discussing the importance of abstinence as the most effective way of preventing HIV infection

Lesson Outline (30-40 minutes)

HIV Transmission

- Four body fluids
- Four principles of HIV transmission: ESSE
- Four ways to transmit HIV Activity 1.All about HIV: True or False

Prevention of HIV

Activity 2. Preventing HIV transmission

• The ABCDE of HIV prevention

Optional Activities: Human activities and body fluids Reducing the risk of HIV infection

POINTS TO EMPHASIZE TO YOUR STUDENTS:

• Three 4s:

- $\circ~$ 4 body fluids that can transmit HIV: blood, semen, vaginal fluids and breast milk
- $\circ~$ 4 principles of HIV transmission: E-S-S-E
- $\circ~$ 4 ways to transmit HIV:
 - Unprotected sexual intercourse
 - HIV-positive mother-to-child
 - Sharing of HIV-contaminated needles
 - Transfusion of HIV-contaminated blood and blood products
- ABCDE of HIV prevention

Lesson 2. Transmission and Prevention of HIV Infection

HIV Transmission



For HIV transmission to occur, there are three FOURs that you must remember:

- 4 BODY FLUIDS that can transmit HIV
- 4 PRINCIPLES of HIV transmission
- 4 WAYS to transmit HIV

HIV transmission requires the **exchange of body fluids containing the virus**. In the body, there are <u>4</u> **BODY FLUIDS** that carry high concentrations of HIV.

None of the usual daily interactions like talking, coughing, shaking hands, or hugging involve the exchange of *blood, semen, vaginal fluids, or breast milk.* Thus, you will not get infected with HIV through daily interactions with people with HIV.

4 BODY FLUIDS:	
Blood	
Semen	
Vaginal fluids	
Breast milk	

HIV Transmission

Data from the different surveys in the Philippines show that young people 15 to 24 years old have low knowledge on how HIV is transmitted and prevented. Thus, the second lesson is important so we can start teaching Filipinos about HIV at an early age. It is also important to provide accurate information about HIV and correct misconceptions young people currently have.

Transmission (*noun*) is the act or process by which something is spread or passed from one person or thing to another; [**transmit** (*verb*)]

<u>HIV</u> is a virus that is **<u>transmitted</u>** from one person to another <u>person</u> through four body fluids.

Four Body Fluids that can transmit HIV

There are four body fluids that have a high concentration of HIV: blood, semen, vaginal fluids, and breast milk. Other body fluids like saliva, sweat, tears, or mucus cannot transmit HIV.

For further discussions on the four body fluids that can transmit HIV, please see the table on pages 16 to17 of this Teacher's Guide.

For HIV to be successfully transmitted from a person with HIV to another person, it must meet the <u>4 PRINCIPLES</u>: **E-S-S-E**.



Figure 2. The four principles of HIV Transmission

The body fluid containing HIV must first <u>EXIT</u> the body of a person with HIV. Once HIV exits the body, it must be in conditions in which it can <u>SURVIVE</u>. HIV is a virus. Just like all living things, HIV must be in the right environment to survive. Otherwise, it will not live long outside the human body.

Also, <u>SUFFICIENT</u> quantities of HIV must be present to cause infection. Blood, semen, vaginal fluids, and breast milk are the four body fluids that contain high concentration of the virus. Finally, HIV must <u>ENTER</u> the bloodstream of another person to infect him or her.

From the term HUMAN immunodeficiency virus (HIV) itself, HIV needs to be transmitted from one person to another person. **It cannot be transmitted through mosquitoes or other animals.** If mosquitoes bite a person with HIV, they cannot spread HIV because the virus is broken down in their stomach and therefore, <u>does not survive</u> in their bodies. Moreover, only the saliva of mosquitoes is involved when drawing blood from a host.



Four Principles of HIV Transmission

It is important to emphasize to your students that for HIV transmission to take place, the E-S-S-E principles should be met.

EXIT – the virus has to exit the body of the person with HIV. HIV only infects humans. It <u>cannot</u> <u>infect mosquitoes</u> and other animals. So HIV has to exit the human body in order to infect another person.

SURVIVE – HIV easily dies outside the body. For HIV to survive after exiting a person it has to immediately enter another person. Furthermore, changes in temperature (too far from the normal body temperature) can also cause the virus to die faster. <u>HIV cannot survive in swimming pools or toilet bowls; it also cannot survive in food or eating utensils.</u>

SUFFICIENT (synonym: enough) – Aside from exiting the body and being able to survive outside the body, there has to be enough amount of the virus to infect another person. Only blood, semen, vaginal fluids, and breast milk carry enough HIV to infect another person.

ENTER – to infect another person, enough amount of HIV needs to enter the body of another person. This usually happens through:

- the exchange of (1) blood from open wounds during sex (including small abrasions of the penis, vagina or rectum, especially during anal sex); through sharing of needles with HIV-contaminated blood; or through blood transfusion
- the exchange of (2) semen and (3) vaginal secretions during sexual intercourse
- the ingestion of (4) breast milk through breastfeeding

NOTE:

Aside from **Blood, Semen, Vaginal fluids, and Breast Milk** - other body fluids (e.g. saliva, sweat, tears, urine, cerebrospinal fluid) either do not have the chance to exit the body, do not allow HIV to survive outside the body, do not have sufficient amount of the virus, or do not have an opportunity to enter the body of another person.

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EXIT	FOUR WAYS OF HIV TRANSMISSION	ENTER
HIV-positive person	Unprotected (i.e. without a condom) <u>vaginal, anal, or oral</u> sexual intercourse with an HIV-positive person	Sex Partner
HIV-positive mother	From HIV-positive mother to her child during pregnancy, delivery, or breast feeding	Child
HIV-positive person who injects drugs	Sharing of HIV-contaminated needles, syringes, and other injecting equipment	Person who uses HIV- contaminated needles
HIV-positive blood or organ donor	Blood transfusion or organ transplant of HIV-contaminated blood and blood products	Blood or organ recipient

The principles of E-S-S-E are fulfilled and the virus is transmitted through

HIV is transmitted from an HIV-positive person to another person mainly through: (1) unprotected sexual intercourse; (2) from an HIV-positive mother to her child during pregnancy, labor and delivery or breastfeeding; (3) sharing of HIV-contaminated needles and injecting equipment among people who inject drugs; and (4) transfusion of HIV-contaminated blood or transplant of HIV-infected tissue or organ.

Most (95%) of the people diagnosed with HIV in the Philippines were **infected through unprotected sexual intercourse** (DOH, 2006-2016).

Four Ways HIV is Transmitted from One Person to Another Person

The **four main ways** of HIV transmission are illustrated in the table. It is important to emphasize these and relate them to the four fluids for HIV transmission as well.

 Unprotected sexual intercourse – semen, vaginal fluids, blood – HIV is present in the blood as well as in the semen of males and in the vaginal fluid of females. Sexual intercourse can cause small cuts in the skin or mucosal lining (like tiny abrasions in the penis, vaginal or anal wall). This allows semen or vaginal fluid or blood of one person to enter the blood stream of the other person.

Different types of sexual intercourse present different levels of HIV risk.

- Anal sex is the riskiest type of sexual intercourse, followed by vaginal sex. Since the anal canal does not have natural lubrication, anal sex has the greatest likelihood of causing a cut or abrasion in the anal mucosa or penis which becomes an entry point for HIV.
- HIV can also be transmitted through vaginal sex. However, the vagina is naturally lubricated which decreases the risk of abrasion of the vaginal mucosa or penis during sex.
- There is a risk of HIV transmission through oral sex but it is very low.

Presence of sexually transmitted infections (STI) can increase the risk of HIV infection.

In the Philippines, unprotected sexual intercourse is the most common way HIV is transmitted from one person to another person. Data from the Department of Health shows that 95% of diagnosed HIV infections (from 2006 to 2016) were from sexual transmission. Having many unprotected sexual acts will increase a person's risk of getting infected with HIV. However, it is still possible for a person to get HIV after only one unprotected sexual act.

Many people do not know their HIV status. Since "healthy looking" or "clean looking" people can be infected with HIV, it is important to emphasize to your students that they need to consciously protect themselves from HIV. The ways of protecting themselves from HIV are discussed in pages 25 to 28 of this guide.

4 WAYS:		4404
<u> </u>		****
Exit	FOUR WAYS OF HIV TRANSMISSION	ENTER
HIV-positive person	Unprotected (i.e. without a condom) <u>vaginal, anal, or oral</u> sexual intercourse with an HIV-positive person	Sex Partner
HIV-positive mother	From HIV-positive mother to her child during pregnancy, delivery, or breast feeding	Child
HIV-positive person who injects drugs	Sharing of HIV-contaminated needles, syringes, and other injecting equipment	Person who uses HIV- contaminated needles
HIV-positive blood or organ donor	Blood transfusion or organ transplant of HIV-contaminated blood and blood products	Blood or organ recipient

The principles of E-S-S-E are fulfilled and the virus is transmitted through

HIV is transmitted from an HIV-positive person to another person mainly through: (1) unprotected sexual intercourse; (2) from an HIV-positive mother to her child during pregnancy, labor and delivery or breastfeeding; (3) sharing of HIV-contaminated needles and injecting equipment among people who inject drugs; and (4) transfusion of HIV-contaminated blood or transplant of HIV-infected tissue or organ.

Most (95%) of the people diagnosed with HIV in the Philippines were **infected through unprotected sexual intercourse** (DOH, 2006-2016).

HIV-positive mother-to-child – blood, vaginal fluid, breast milk – it is important that an HIV-positive mother gets diagnosed early and takes antiretroviral (ARV) drugs to reduce the chance of infecting her child during pregnancy, delivery, or breastfeeding. If an HIV-positive pregnant female already knows her HIV status and is not yet taking ARV, she should immediately go to a doctor and start ARV.

It is safe to take ARV during pregnancy and while breastfeeding.

Females who are HIV-positive can still have babies who are negative for HIV. In general, there is a 15% to 45% chance of passing HIV from mother to her child through pregnancy, delivery and breastfeeding. However, a pregnant mother or a breastfeeding mother taking ARV significantly reduces the risk of HIV transmission to her child.

In general, HIV cannot be transmitted through ingestion of food or liquids. However, HIV from breast milk can enter the digestive tract of a breastfeeding baby because a baby's immune system and digestive system are still immature, allowing the entry of the virus into the baby's blood stream. HIV cannot enter through the mature digestive tract of children and adults.

RECOMMENDED FURTHER READING FOR TEACHERS

Early diagnosis of an infant of an HIV-positive mother is important. If it is established that the baby is HIV-positive, exclusive breastfeeding is recommended.

If the baby is HIV-negative, and exclusive formula feeding for the first 6 months can be ensured, then formula feeding is an option. However, if exclusive formula feeding cannot be ensured for the entire 6 months, mixed feeding (both formula and breast milk) is not recommended. In this case, there are two options:

- · Access the breast milk banks in selected hospitals
- Exclusive breastfeeding until 6 months

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Ехіт	FOUR WAYS OF HIV TRANSMISSION	ENTER
HIV-positive person	Unprotected (i.e. without a condom) <u>vaginal, anal, or oral</u> sexual intercourse with an HIV-positive person	Sex Partner
HIV-positive mother	From HIV-positive mother to her child during pregnancy, delivery, or breast feeding	Child
HIV-positive person who injects drugs	Sharing of HIV-contaminated needles, syringes, and other injecting equipment	Person who uses HIV- contaminated needles
HIV-positive blood or organ donor	Blood transfusion or organ transplant of HIV-contaminated blood and blood products	Blood or organ recipient

The principles of E-S-S-E are fulfilled and the virus is transmitted through

HIV is transmitted from an HIV-positive person to another person mainly through: (1) unprotected sexual intercourse; (2) from an HIV-positive mother to her child during pregnancy, labor and delivery or breastfeeding; (3) sharing of HIV-contaminated needles and injecting equipment among people who inject drugs; and (4) transfusion of HIV-contaminated blood or transplant of HIV-infected tissue or organ.

Most (95%) of the people diagnosed with HIV in the Philippines were **infected through unprotected sexual intercourse** (DOH, 2006-2016).

<u>Sharing of HIV-contaminated needles, syringes and other injecting equipment</u> – *blood* – Sharing of needles among people who inject drugs is a major problem in some areas in the Philippines.

Sharing of HIV-contaminated needles and syringes among people who inject drugs has one of the highest risks of HIV transmission. The HIV-contaminated blood that exits the body goes into the needle or syringe briefly and then directly enters the blood stream of the uninfected person when the same needle or syringe is used.

<u>Blood transfusion or organ transplant</u> – *blood* – in the Philippines, the government tests all donated blood and blood products from blood service facilities for HIV and other infectious diseases like hepatitis B, hepatitis C, syphilis and malaria. This is mandated by *RA* 7719 or *National Blood Service Act of 1994*. There has been no recorded HIV infection through blood transfusion in the Philippines since 2011.

RECOMMENDED FURTHER READING FOR TEACHERS

Health workers who accidentally get pricked with HIV-contaminated needles or get cut by HIV-contaminated equipment or become directly exposed to HIV-contaminated blood during medical or surgical procedures may be at-risk of getting infected with HIV. When this happens, the health worker needs to take ARV immediately to prevent possible HIV infection. This is called **post-exposure prophylaxis (PEP)**.

- PEP should only be used in emergency situations.
- PEP must be started immediately after exposure.
- Taking PEP is not a 100% guarantee that the exposed health worker will not get HIV.

Additional Resources on PEP:

http://www.who.int/hiv/topics/prophylaxis/info/en/

https://www.aids.gov/hiv-aids-basics/prevention/reduce-your-risk/post-exposure-prophylaxis/ https://www.cdc.gov/hiv/basics/pep.html

RECOMMENDED FURTHER READING FOR TEACHERS

Summary of how the four body fluids fulfil the four principles of HIV transmission:

BODY FLUID	EXIT	SURVIVE	SUFFICIENT	ENTRY	WAYS of TRANSMISSION	BODY FLUID	EXIT	SURVIVE	SUFFI- Cient	ENTRY	WAYS of TRANSMISSION
Blood	HIV exits from the body: - through breaks in the skin, or small cuts obtained during sex - when syringes/ needles are used - through delivery of	HIV in the blood can survive in the penis, vagina and anus (because the virus is inside the body). HIV can also survive in blood inside needles or syringes for a short period of	The quantity of HIV in the blood is enough for transmission.	Entry of HIV- infected blood into another person is possible through: - tears or breaks in the mucosa lining of the penis, vagina or anus (& sometimes the oral mucosa) during unprotected sexual intercourse - sharing of HIV- contaminated needles or syringes - pregnancy ² and	 Unprotected sexual intercourse Sharing of needles or syringes Mother-to-child during pregnancy or delivery Transfusion of blood and blood products 	Semen	The virus may exit from an HIV- positive male partner through oral, vaginal or anal sex. The virus can also be found in the pre-ejaculate (pre-cum).	HIV can survive in the penis, vagina and anus (because the virus is inside the body).	The quantity of HIV in semen is enough for trans- mission.	Entry of HIV-infected semen into the body of another person is possible through small breaks in the skin or wounds in the lining of the vagina, anus or rectum during sex. Trauma or tearing of the mucosal lining is common in anal sex (due to lack of natural lubrication in the anus and rectal canal). This increases the risk of HIV transmission.	Unprotected sexual intercourse
² Source: "If a occasionally th http://www.th ³ Source: "Wh intercourse is head of the pe	babies -through blood transfusion mother has a very l te virus can get through the virus can get the virus can get through the virus can get through the virus can get the virus can get the virus can get through the virus can get the virus can get	time. high viral load (espe bugh the placenta a s/AIDS/Meds/Q202 greater risk of infec en, because damag iderneath the fores	ecially a mother who nd cause an infection 2006.html tion from an HIV-po: ed penile tissue and skin – form a point o	delivery of babies - transfusion of blood or blood products becomes infected with HIV n in utero, but this is rare." sitive male partner, unprote the mucous membranes in f infection"	/ while she is pregnant) ected vaginal the urethra and on the	Vaginal fluids	The virus may exit from an HIV- positive female: - during vaginal sex - during delivery of baby	HIV can survive in: - the female's vagina and in the male's penis and urethra - the vagina as the woman is giving vaginal birth	The quantity of HIV in the vaginal fluid is enough for trans- mission.	Entry of HIV infected vaginal fluids into the body of a male is possible through tears or breaks in the penile tissue, and through mucous membranes in the urethra, and on the head of the penis ³ . HIV (in the vaginal fluids) may enter the baby during vaginal delivery.	- Unprotected sexual intercourse - Mother-to- child during delivery

BODY FLUID	EXIT	SURVIVE	SUFFICIENT	ENTRY	WAYS of TRANSMISSION
Breast milk	The virus may exit through breastfeeding by an HIV- positive mother.	HIV can survive in breast milk and within the mouth of the feeding baby.	The quantity of HIV in the breast milk of a mother with HIV who is not taking ARV is enough for transmission of the virus to her baby.	Entry of the virus is possible through tears or breaks in the tissue lining the digestive tract of the breastfeeding baby.	Mother-to-child during breastfeeding

References:

HIV Counseling Trainer's Manual for the Asia-Pacific, 2009 UNICEF EAPRO.

HIV Counseling Handbook for the Asia-Pacific, 2009 UNICEF EAPRO.

HIV Transmission through Breastfeeding: A review of available evidence, 2008 World Health Organization.

http://mobile.aidsmap.com/Vaginal-intercourse/page/1323532

Activity I. All about HIV: True or False

Read each item carefully and shade TRUE O if HIV can be transmitted through the activity described. Shade FALSE O, if HIV cannot be transmitted that way.

Wa	ys of Acquiring HIV	True	False
1	Coughing or sneezing	÷	8
2	Breastfeeding by an HIV-positive mother	©	8
3	Shaking the hand of a person with HIV	0	8
4	Sharing utensils, food, or drinks	\odot	8
5	Transfusion of HIV-contaminated blood	©	8
6	Hugging		8
7	Sexual intercourse without using a condom	\odot	8
8	Mosquito bites	©	8
9	Sharing HIV-contaminated syringes/needles	©	8
10	Using public toilets	\odot	8
11	Swimming	0	8
12	Kissing	\odot	8
13	Eating food with drops of HIV-contaminated blood	Ö	8

Remember: HIV infection does not just happen. HIV is <u>NOT</u> transmitted through everyday contact with people at work, home, school, or anywhere else. Therefore, we should not be afraid to interact with a person living with HIV.

Key Concepts

Guide Questions

We studied three FOURs you must remember about HIV transmission. Can you remember them?

- 1. **4 BODY FLUIDS** that can transmit HIV
- 2. 4 PRINCIPLES of HIV transmission
- 3. 4 WAYS for HIV transmission to occur

Prevention of HIV

Prevention (noun) is the act or practice of stopping or hindering something from happening; [prevent (verb)]

Word Discovery



The basic idea behind the prevention of HIV is stopping the body fluids of a person with HIV from entering the body of another (e.g. placing a "barrier" between the body fluids).

Reference Material on HIV, AIDS & STI for High School Students | 11

Activity 1: All about HIV: True or False

- 1. Instruct your students to answer the table by shading the correct smiley.
- 2. Ask them why they think each item in Activity 1 is true or false based on the concepts discussed today, specifically the 4 body fluids, 4 principles of HIV transmission (ESSE), and 4 ways of HIV transmission.

Ways	of Acquiring HIV	True	False
1	Coughing or sneezing		8
2	Breastfeeding by an HIV-positive mother	0	
3	Shaking the hand of a person with HIV		8
4	Sharing utensils, food, or drinks		8
5	Transfusion of HIV-contaminated blood	0	
6	Hugging		8
7	Sexual intercourse without using a condom	\odot	
8	Mosquito bites		8
9	Sharing HIV-contaminated syringes/needles	0	
10	Using public toilets		8
11	Swimming		8
12	Kissing		8
13	Eating food with drops of HIV-contaminated blood		8

Guide Questions

Ask your students to answer the guide questions. Let some students share their answers with the class.

- 1. 4 Body Fluids that transmit HIV: blood, semen, vaginal fluid, breast milk
- 2. 4 Principles of HIV Transmission: (ESSE) Exit. Survive. Sufficient. Enter.
- 3. 4 Ways HIV transmission occurs
 - Unprotected sex
 - HIV-positive mother-to-child
 - Transfusion of HIV-contaminated blood or blood products
 - Sharing of HIV-contaminated needles

Activity I. All about HIV: True or False

Read each item carefully and shade TRUE ⁽²⁾ if HIV can be transmitted through the activity described. Shade FALSE ⊗, if HIV cannot be transmitted that way.

Wa	ys of Acquiring HIV	True	False
1	Coughing or sneezing	\odot	\otimes
2	Breastfeeding by an HIV-positive mother	\odot	8
3	Shaking the hand of a person with HIV	\odot	8
4	Sharing utensils, food, or drinks	\odot	8
5	Transfusion of HIV-contaminated blood	\odot	8
6	Hugging	\odot	8
7	Sexual intercourse without using a condom	\odot	\otimes
8	Mosquito bites	\odot	8
9	Sharing HIV-contaminated syringes/needles	\odot	8
10	Using public toilets	\odot	8
11	Swimming	\odot	8
12	Kissing	\odot	8
13	Eating food with drops of HIV-contaminated blood	\odot	8

Remember: HIV infection does not just happen. HIV is NOT transmitted through everyday contact with people at work, home, school, or anywhere else. Therefore, we should not be afraid to interact with a person living with HIV.

Key Concepts

Guide Questions

We studied three FOURs you must remember about HIV transmission. Can you remember them?

- 1. 4 BODY FLUIDS that can transmit HIV
- 2. 4 PRINCIPLES of HIV transmission
- 3. 4 WAYS for HIV transmission to occur

Prevention of HIV

Prevention (noun) is the act or practice of stopping or hindering something from happening; [prevent (verb)] Word Discovery



The basic idea behind the prevention of HIV is stopping the body fluids of a person with HIV from entering the body of another (e.g. placing a "barrier" between the body fluids).

Reference Material on HIV, AIDS & STI for High School Students | 11

Prevention of HIV

Prevention of HIV (noun) is the act or practice of stopping or hindering something from happening; [prevent (verb)]

In the context of HIV, the following section will discuss how HIV infection can be prevented.



Reference Material on HIV, AIDS & STI for High School Students | 12

Activity 2: Preventing HIV transmission

Activity 2 is vital in helping students appreciate the main methods of preventing HIV infection via sexual transmission through (1) abstinence, (2) having only one, uninfected partner, and (3) using condoms correctly & consistently. Guide your students through the activity but also explain what each scenario signifies through the guide explanations provided here.

Materials preparation

- 3 water bottles half-filled with clear water
- 1 water bottle half-filled with dark or colored fluid (e.g. juice or soft drink)
- 1 water bottle cap
- 1 marker

You can demonstrate Activity 2 in front of the class or divide your students into groups. If you decide to have groups, you would need to bring a set of materials for each group (e.g. if you have 3 groups, then you would need to bring a total of 12 bottles).

Introducing activity to your students

1. Put all four (4) bottles on the table.

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- 2. Discuss the following with your students:
 - The **fluid** in each bottle symbolizes the body fluids which can transmit HIV through sex (semen, vaginal fluid, blood).
 - A bottle with clear fluid signifies a person NOT infected with HIV.
 - A bottle with colored fluid signifies a person who is INFECTED with HIV.
 - Pouring of fluid from one bottle to another bottle signifies sexual intercourse.
 - The **bottle cap** is a barrier that prevents mixing of the fluids. An example of a barrier during sexual intercourse is the use of a condom.
- **Note**: Avoid using the term "dirty" or "madumi" when describing Bottle D. Instead say "iba ang kulay ng likido" or "colored fluid". The words you use may affect the way they see people with HIV.



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Processing guide

At the end of each scenario, ask your students what they observed. Ask them to share their insights for each scenario (1, 2, 3, 4). Processing questions are listed below for each scenario.

Scenario 1: Abstinence

Place all 4 bottles (A, B, C, D) on the table – the bottles may touch but the fluids inside the bottles should not mix.



Processing Guide:

- What happened to the fluid inside the bottles?
- Did they mix together? Why not?
- What does this scenario symbolize in terms of sexual relationships?

Scenario 1 signifies ABSTINENCE, wherein people do not have sexual intercourse (i.e. there was no pouring of fluid from one bottle to another so there was no mixing of fluids). Therefore there is no HIV transmission that happens. <u>Remember, for HIV transmission to occur, infected fluids need to EXIT the body and ENTER another person's body.</u>

Abstinence is the most effective way of preventing HIV infection.



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Scenario 2: Be faithful

a. Ask your students to observe what happens to the fluid in bottles A & C.

b. Pour some fluid from bottle C (clear fluid) into bottle A (clear fluid).

c. Then pour fluid from bottle A to bottle C.



Make sure that bottles A & C do not interact with bottles B & D.

Processing Guide:

• What did you observe when the fluid in bottle C was poured into bottle A? Is the fluid in bottle A still clear?

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 $\,\circ\,$ What about when the fluid in bottle A was poured into bottle C?

 \circ What does this scenario symbolize in terms of sexual relationships?

Scenario 2 signifies BEING FAITHFUL.

This is a situation wherein two people (bottles A & C – clear fluid) avoid getting infected with HIV despite having unprotected sex because both are faithful to each other (both do not have other partners) and both DO NOT have HIV infection.

Example: sex between faithful married couples with no HIV infection.

However, having unprotected sex with only one partner who happens to be INFECTED with HIV may still cause HIV transmission.

Example: sex between faithful couples wherein one of them already has HIV. The only way to know if you or your partner has HIV is to get an HIV test and share your status with your partner.



Scenario 3: Correct use of condoms

- a. Explain to your students that the **bottle cap symbolizes the USE OF CONDOMS** during sexual intercourse.
- b. Keep bottles B & D side by side. Remove bottles A & C from the table.
- c. Put a cap on bottle D (colored fluid).
- d. Try pouring fluid from bottle D (colored fluid) to bottle B (clear fluid), with the cap still on Bottle D.



Processing Guide:

- What happened to the fluid inside bottle B?
- Did the fluid from bottle D mix with the fluid in bottle B? Why not?
- What are bottles B and D practicing in terms of sexual relationships?

Scenario 3 signifies CORRECT CONDOM USE.

In Scenario 3, Bottle B avoids getting HIV infection from Bottle D (the clear fluid in bottle B does not turn into colored fluid like that in bottle D) even if Bottle D had HIV because a barrier (bottle cap) was used to avoid mixing of fluids.

Explain to your students that the bottle cap signifies the use of a condom – which provides a physical barrier between the two fluids and prevents the mixing of fluids from bottles B & D.

A condom used during sex becomes a physical <u>barrier that prevents body fluids that exited</u> <u>a person with HIV from entering the blood stream of his or her sex partner</u>. Correct use of condoms prevents HIV transmission.



Reference Material on HIV, AIDS & STI for High School Students | 12

Scenario 4: Correct and CONSISTENT use of condoms

a. Remove the cap on bottle D (colored fluid).



b. Pour some fluid from bottle D (colored fluid) to bottle B (clear fluid).



Processing Guide:

- What happened to the fluid inside bottle B?
- Why did the fluids mix together?
- $\,\circ\,$ How is scenario 3 and 4 different in terms of sexual relationships?

Scenario 4 signifies the need for CONSISTENT CONDOM USE not just CORRECT CONDOM USE.

The use of a physical barrier must be both CORRECT and CONSISTENT to prevent HIV transmission. Condoms must be used correctly and consistently in all sex acts and with all sex partners to prevent HIV transmission.

Sexual Abstinence (*noun*) is the practice of <u>not</u> having sexual intercourse; [abstain (*verb*)]

Sa Tagalog: "hindi pakikipagtalik"



The ABCDE of HIV Prevention

nn^b

To easily remember how HIV may be prevented, remember the A-B-C-D-E.

Abstain from sexual intercourse. Having sexual intercourse means facing the serious consequences of possible pregnancy/parenthood or getting sick. When you decide NOT to have sexual intercourse before you are ready, you allow yourself to fully enjoy your youth. You do not have to worry about unplanned pregnancy, HIV, STI, or complicated emotional issues. You can focus on achieving your goals instead. Since you and your partner both have your future ahead of you, having sexual intercourse is a decision you should make carefully.

Abstinence is the MOST EFFECTIVE METHOD of preventing HIV. Think about delaying your first sexual activity until you are ready. It is OK to say NO.

Just like in Scenario 1 of our experiment, since the fluids in the four bottles never mixed at all, we can see that the fluids in Bottles A, B, and C remained clear while Bottle D remained colored. An HIV-negative person will remain uninfected if he or she does not engage in sexual intercourse (and other risky behaviors).

To help you say NO, remember:

S tay away from situations which can lead to risky behaviors.

T eam up with peers who also want to make the right choices and spend more time with them.

O ccupy your time with activities that would benefit your future.

P ractice saying "No" in a convincing manner.

The ABCDE of HIV Prevention

Now that your students understand how HIV is transmitted and with the experiment they just conducted, you can already emphasize the "ABCDE" of HIV Prevention.

Abstain from sex. Take them back to Scenario 1 of the experiment. Like the fluids in the four bottles which did not have the chance to mix at all, abstinence prevents the transmission of HIV. Emphasize to your students that this is the MOST EFFECTIVE method to prevent HIV because there is no opportunity for HIV to exit the body of an infected person and enter the body of an uninfected person.

For your students <u>who have not engaged in sexual intercourse yet</u>, encourage them to delay their first sexual activity until they are ready. Emphasize that saying "No" to sex is ok; and, if their partner says no to sex, they should respect his or her decision.

For your students <u>who are already sexually active</u>, remind them that it is important to always make a mutual decision before they engage in sexual activity with someone. Both of them should understand the possibilities that can happen when they have sex, their options to protect themselves, and the responsibilities their decision entails. Encourage them to not take sex lightly and to follow the next method – Be faithful.

To help your students say NO to SEX:

- **S** tay away from situations which can lead to risky behaviors. Example: Don't invite your boyfriend or girlfriend come to your house when you're alone. Don't drink on dates.
- **T** eam up with peers who also want to make the right choices and spend more time with them.

Example: Join school clubs that you are interested in. Form a group of students that are focused on reviewing for college entrance tests.

- **O** ccupy your time with activities that would benefit your future. Example: Play sports. Get involved in extra-curricular activities.
- **P** ractice saying "No" in a convincing manner. You can give your students scenarios to practice (see Annex B)

B e faithful to one partner who is also faithful to you. Having sexual intercourse with several people puts you at higher risk of having HIV so avoid having many sexual partners.
However, no matter how faithful you are to each other, if one already has HIV, and you have sexual intercourse without using a condom, it still puts the other partner at risk of HIV infection. You should know your HIV status and the HIV status of your partner. Your HIV status can only be determined by getting an HIV test.
Once you make the decision to have sexual intercourse, there are responsibilities that you and your partner must understand. These include the prevention of HIV, STI, and unplanned pregnancy.
In Scenario 2 of our experiment, even if the fluids in Bottles A and C mixed, since both had clear fluid, the fluid in both bottles remained clear. The mixing of fluids only happened between Bottles A and C; they did not interact with Bottles B or D, signifying their faithfulness to each other.
In terms of HIV, this means that if two <u>faithful, uninfected</u> individuals decide to have sexual intercourse with each other only, they will not get infected with HIV.

Be faithful. Take them back to Scenario 2. In order to avoid HIV infection, tell your students:

- a) "You and your partner have to be mutually faithful" and
- b) "You and your partner have to be free from HIV infection in the first place."

If a couple do not have HIV and only have sex with each other (e.g. a faithful married couple), HIV transmission is prevented. However, no matter how faithful two people are to each other, if one already has HIV, it still puts the other at risk for HIV infection.

Emphasize to your students the importance of knowing their own HIV status through HIV testing (which will be discussed further in Lesson 4). Moreover, they should also encourage their partners to get tested for HIV.

Knowing their current HIV status and the current HIV status of their partner would help them understand the possible risks of having sex with each other (i.e. if one is HIV-positive) and decide whether to have sex or not. If they decide to have sex, they should discuss how they can reduce the risk of HIV infection (e.g. always use a condom, just have oral sex).

If the HIV-positive partner is taking ARV drugs daily, this reduces the person's viral load. A low or undetectable viral load lessens the chance of HIV transmission. However, taking ARV drugs does not eliminate the possibility of HIV transmission. Correct and consistent condom use is still important in preventing HIV transmission through sex.

Correct and consistent use of condoms is a reliable method to prevent the spread of HIV, as well as other sexually transmitted infections (STI). It is one of the most widely available and highly effective HIV prevention tools. Condoms also prevent unplanned pregnancy. However, abstinence remains more effective than the use of condoms in preventing pregnancy, HIV infection, and STI.



Correct. Condom use is a skill. There is a correct way of using condoms. They also have expiration dates so always check the package. Do not store condoms in your wallet for a prolonged period of time and do not expose them to direct sunlight.

Consistent. Condoms must be used in EACH sexual act during ANY type of sexual intercourse (vaginal, anal, and oral) and with ALL sex partners.

Male condoms are used more often in the Philippines but female condoms are also available.

In Scenario 3, we saw that there was a PHYSICAL barrier that prevented interaction of the fluids from Bottle B & Bottle D. Therefore, Bottle B's fluid color remained the same. This is similar to the use of condoms. Despite the physical contact between two individuals, their semen, vaginal fluids, or blood will not mix (exit one person and enter the other person) due to the presence of the physical barrier, in the form of a condom.

However, condom use has to be <u>correct and consistent in all</u> <u>sexual activities with all partners</u>. In Scenario 4, we see that Bottle D's cap was removed, therefore allowing the mixing of the fluids when fluid of Bottle D was poured into Bottle B. This caused the fluid in Bottle B to change from clear to colored. **Correct and Consistent use of Condoms.** Take them back to Scenarios 3 and 4. The mixing of colored and clear fluids was prevented because of a physical barrier (the bottle cap). Similarly, condoms become a barrier that prevents body fluids that exited a person with HIV from entering the blood stream of his or her sex partner.

Emphasize to your students that if they decide to have sex, they should use condoms correctly and consistently to protect themselves from HIV and other sexually transmitted infections.

- **Correct.** There is a proper way of using a condom, it is a step-by-step process. If your students ask you about how to use condoms, you can encourage them to visit your local Social Hygiene Clinic where condom demonstration sessions are conducted.
- **Consistent.** Sometimes, it takes only one sexual intercourse with a person with HIV to cause transmission of the virus. So **ALWAYS** use a condom even if their sexual partner looks clean and healthy.

Also emphasize that using a condom during their first sexual intercourse will help them consistently use condoms in the future. <u>"First time & every time"</u> and <u>"No condom, no sex"</u>

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In Scenario 3, we saw that there was a PHYSICAL barrier that prevented interaction of the fluids from Bottle B & Bottle D. Therefore, Bottle B's fluid color remained the same. This is similar to the use of condoms. Despite the physical contact between two individuals, their semen, vaginal fluids, or blood will not mix (exit one person and enter the other person) due to the presence of the physical barrier, in the form of a condom.

However, condom use has to be <u>correct and consistent in all</u> <u>sexual activities with all partners</u>. In Scenario 4, we see that Bottle D's cap was removed, therefore allowing the mixing of the fluids when fluid of Bottle D was poured into Bottle B. This caused the fluid in Bottle B to change from clear to colored.

RECOMMENDED FURTHER READING FOR TEACHERS

There are myths that condoms are not effective because they have "pores". This may stem from the nature of LAMBSKIN CONDOMS because while sperm cannot pass through these types of condoms, some viruses and bacteria are small enough to pass through the pores. Lambskin condoms are not readily available in the Philippines and are NOT RECOMMENDED in the prevention of HIV and other STI.

However, LATEX CONDOMS are more frequently used in the world, including the Philippines. Several studies conducted showed that there are <u>no pores in latex</u> <u>condoms</u>, even at 2,000x and 30,000x magnification under a microscope. Sperm and HIV cannot pass through latex condoms.

Male condoms are readily available in the Philippines for free at public health centers, and for purchase at convenient stores, supermarkets and drug stores. There are female condoms but these are not as readily available in the Philippines. Male condoms are more commonly used.

The illustration below shows a male condom (left) and a female condom (right).



Sources: http://health.howstuffworks.com/sexual-health/contraception/condom11.htm http://blog.path.org/2014/09/seven-secrets-female-condom/ (photo by PATH/Patrick McKern)

Condoms are lubricated but can also be used with additional lubricants. Only <u>water</u> <u>based lubricants</u> (like commercially sold lubricants in tubes or sachets) should be used with condoms. Oil-based lubricants (like baby oil, cooking oil, lotion, shampoo, conditioner) can make the condom break.



Do not use drugs or drink alcohol. These substances may affect your thinking and decisions. Prohibited drugs and alcoholic drinks may make you do things that you might regret later on. Moreover, injecting drugs using a needle used by an HIV-positive person presents a very high risk for HIV transmission.



Education and early detection. There is no better protection than proper knowledge. Get the facts on HIV and do not be embarrassed to share what you have learned with your friends. Sharing your knowledge may allow you to save a friend's life.



Aside from getting proper knowledge about STI and HIV, it is also important to know if you are infected by getting tested for HIV. There are many public and private facilities which offer HIV testing. **Social Hygiene Clinics (SHC**), sometimes referred to as City Health Office (CHO) or Reproductive Health and Wellness Center (RHWC), offer free HIV testing and treatment, and can be found in most cities.

Pregnant mothers are encouraged to get tested for HIV. Early diagnosis of HIV will allow the mother to get antiretroviral therapy (ART) to prevent transmitting HIV to her unborn child.

Knowing your HIV status early will allow you to protect yourself and others. Do not be shy or scared to get an HIV test.

Remember these icons!







Correct and Do not use Abstinence Be faithful consistent drugs or condom use drink alcohol

Education and Early Detection

Do not use drugs or drink alcohol. Using these substances affect their decision-making skills, making it more difficult to think of the consequences of possible actions and to say no. Also emphasize that the risk of HIV transmission is very high when needles or syringes are shared among people who inject drugs.

Education and Early detection. As the famous saying goes: "KNOWLEDGE IS POWER". Having correct knowledge regarding what HIV is, and how it is transmitted and prevented gives your students the power over the virus.

Encourage them to share what they learned about HIV with their friends. Also encourage them to ask you more questions after class or during your consultation hours if they are embarrassed to ask you during the class.

Knowing one's HIV status early on is very important. This can only be done through HIV testing. If a person is **diagnosed with HIV early and started on ART early, there is a higher chance that HIV has not yet destroyed the immune system of the body.** This prolongs and improves the quality of life of a person living with HIV.

Pregnant mothers are highly encouraged to get tested for HIV early in their pregnancy. Pregnant women with HIV should start ART immediately to prevent mother-to-child transmission.

Remember these icons !







Abstinence Be faithful

Correct and aithful consistent condom use

Do not use drugs or Education and Early Detection drink alcohol

Reference Material on HIV, AIDS & STI for High School Students | 16

Optional Activities:

For Lesson 2

Optional Activity. Human activities and body fluids

Read each item carefully and identify (check) which body fluids are involved in the following activities.

	A (English)	ctivities	Tagalog)	Blood	Vaginal Fluid	Semen	Breast milk
1	Sexual interco	urse	Pagtatalik				
2	2 Pregnancy	/	Pagbubuntis				
3	Labor & Deliv	very P	Panganganak				
4	Breastfeedin	ng F	Pagpapasuso				
5	Sharing of inje needles amo drug users	cting l ong nee	Paggamit ng edle na ginamit ng iba				
6	Blood Transfu	sion P	agsasalin ng dugo				

Optional Activity for Lesson 2. Human activities and body fluids

- 1. Instruct your students to put a check mark ($\sqrt{}$) inside the box of the body fluid that is involved in the different human activities listed in the first column. A Tagalog translation of the activities are also provided in the second column.
- 2. Discuss the answers and clarify any misconceptions your students might have.

Optional Activity. Human activities and body fluids

Read each item carefully and identify (check) which body fluids are involved in the following activities.

	Activities (English) (Tagalog)		Blood	Vaginal Fluid	Semen	Breast milk	
	1	Sexual intercourse	Pagtatalik	~	~	~	
	2	Pregnancy	Pagbubuntis	~			
:	3	Labor & Delivery Panganganak		~	~		
	4	Breastfeeding	Pagpapasuso				~
	5	Sharing of injecting needles among drug users	Paggamit ng needle na ginamit ng iba	~			
	6	Blood Transfusion	Pagsasalin ng dugo	~			

NOTE:

Blood is also involved in sex because abrasions or rupture of small vessels may occur during sexual intercourse.

Optional Activity. Reducing the risk of HIV infection

Form small groups. You and your groupmates will list ways to reduce one's risk of HIV infection per way of transmission. Look at the example provided.

Ways of HIV transmission		Ways to prevent and control HIV infection		
1	[2 ways] Transfusion of HIV- contaminated blood and other blood products; and transplant of organs from a person with HIV	DO NOT donate blood if you have HIV or if you practice risky sexual behaviors. If you do not know your HIV status, get tested for HIV first before donating blood.		
2	[3 ways] Sexual contact through HIV-contaminated body fluids like blood, semen, vaginal fluids			
3	[2 ways] Sharing HIV-contaminated needles while injecting drugs			
4	[1 way] Transmission from HIV- positive mother to her baby during pregnancy, delivery or breastfeeding			

Optional Activity. Reducing the risk of the HIV infection

- 1. Group your students into 3.
- 2. Instruct your students to answer the activity following the directions given.
- 3. Advise that they may use the "ABCDE" of HIV prevention as reference.

Ways of HIV transmission		Ways to prevent and control HIV infection		
1	[2 ways] Transfusion of HIV-contaminated blood and other blood products; and transplant of organs from a person with HIV	 S] Transfusion of ntaminated blood ner blood products; nsplant of organs person with HIV Give these examples: DO NOT donate blood if you have HIV or if you engage in risky sexual behaviors or inject drugs. If you do not know your HIV status, get tested for HIV first before donating blood. In the Philippines, all blood products are screened for HIV and other infectious diseases, as mandated by RA 7719 or National Blood Service Act of 1994) 		
2	[3 ways] Sexual contact through HIV-contaminated body fluids like blood, semen, vaginal fluids	 ABCDE of HIV Prevention – all of them applies for preventing HIV transmission through sexual contact. 		
3	[2 ways] Sharing HIV- contaminated needles while injecting drugs	 Do not use drugs. Do not inject drugs. Do not share needles/syringes with other drug users. Use new and clean needles. Dispose used needles properly. 		
4	 [1 way] Transmission from HIV-positive mother to her child during pregnancy, delivery or breastfeeding Get tested for HIV, both mother (before delivery) and child (after delivery). If the mother has HIV, she should take ART immediately and the child should be given ART prophylaxis after delivery. 			



Lesson 3: Sexually Transmitted Infections

References

Power of You User's Guide (UNICEF, 2009) https://www.cdc.gov/std/chlamydia/chlamydia-factsheet-june-2014-press.pdf

https://www.cdc.gov/std/gonorrhea/gon-factsheet-july-2014-press.pdf https://www.cdc.gov/std/syphilis/syphilis-factsheet-press-july-2014.pdf https://www.cdc.gov/std/herpes/herpes-factsheet-july-2014-press.pdf

https://www.cdc.gov/std/hpv/hpv-factsheet-march-2014-press.pdf

https://www.cdc.gov/parasites/lice/pubic/

https://www.cdc.gov/parasites/scabies/

https://www.cdc.gov/std/hiv/hiv-std-factsheet-dec-2014-press.pdf

Pre-requisite Concepts: microorganisms (bacteria, virus, parasite), chain of infection, reproductive system

Lesson Objectives

- 8. Describing common symptoms of sexually transmitted infections (STI)
- 9. Explaining the relationship between STI and HIV infection
- 10. Discussing STI prevention and treatment concepts
- 11. Making decisions on what to do to prevent or address STI and HIV infection

Lesson Outline (30-40 minutes)

- Understanding sexually transmitted infections (STI)
- Common symptoms of STI
 Activity 3. Hunting for the common symptoms of STI
- Relationship of STI and HIV
- Prevention of STI
- Treatment of STI Activity 4.All about STI: True or False

POINTS TO EMPHASIZE TO YOUR STUDENTS:

- Each sexual activity puts a person at risk of getting different Sexually Transmitted Infections. One can have several STI at the same time.
- There are four common symptoms of STI that need be remembered: discharge, sores, warts & itching.
- A person with STI can also show no symptoms. If someone had unprotected sex, the only way to know for sure if he or she has an STI is to see a doctor.
- Do not self-diagnose and do not self-medicate. Go to a doctor immediately if STI is suspected. Only drink medicine prescribed by the doctor and complete the course of treatment.
- Getting treated for STI in the past does not make a person immune to that STI or other STI in the future.
- STI may have long-term complications.
- HIV is a sexually transmitted infection (STI).
- ABCDE of HIV prevention is also used for STI prevention.

Lesson 3. Sexually Transmitted Infections (STI)

Understanding Sexually Transmitted Infections



Different infections can be transmitted through different means. For example, HIV has four ways of transmission which include transmission through unprotected sexual intercourse. Aside from HIV, there are other infections that may be **passed** from person to person through unprotected sexual intercourse with a person who has the infection. These are called Sexually Transmitted Infections (STI). HIV is a type of STI.

Microorganisms that cause STI can be transmitted from one person to another through **semen**, **vaginal fluids**, **and blood**. There are different STI that are caused by bacteria, viruses, and skin parasites. Bacteria and viruses are microscopic (i.e. cannot be seen by the naked eye). The common STI are listed in Table 1.

Table 1. Common Sexually Transmitted Infections

Bacteria	Virus	Skin parasites

Chlamydia Gonorrhea Syphilis	HIV Herpes Genital and anal warts	Pubic lice Scabies

Understanding Sexually Transmitted Infections

The two guide questions in this section are meant to gauge what your students know about STI so far. It is important to hear out what your students say in a non-judgemental manner. We don't expect them to be experts on STI but we want to understand the concepts they know -- which ones we have to strengthen and which ones we have to correct.

There are three Frequently Asked Questions (FAQs) clarified below:

• STD vs STI?

It might also be useful to mention the term "STD" or "Sexually Transmitted Diseases". Previously, this is the term used for STI and many people are more aware of the term STD than STI. Explain to your students that conceptually, they are the same. However, STI is the correct term, since many of these infections are curable and thus may be temporary in nature (if properly diagnosed and treated), and re-infection is possible.

• Are there STI transmitted through non-sexual means?

From the term itself, STI is an infection transmitted through sex without the use of condoms. Emphasize this to your students. However, **there are infections that are both sexually and non-sexually transmitted.** As an example, while syphilis is transmitted through sex, it may also be transmitted from mother-to-child during delivery. Herpes may be passed through kissing, without necessarily having oral, vaginal, or anal sex. But for the purpose of our lesson, we will be focusing on the sexual transmission aspect of these infections.

• Then why is blood mentioned here?

Blood is listed as a fluid that can transmit STI, not in the context of blood transfusion, etc. but during sexual intercourse. Lacerations, or breaks in the skin/mucous membranes, may be present in the mouth, vagina, or anus, which can lead to STI transmission via bloodstream during oral, vaginal, or anal sex.

Common Symptoms of Sexually Transmitted Infections

Different STI have a variety of symptoms.

Table 2 summarizes the most common symptoms of STI and the corresponding STI that cause it. The causative agent and possible complications are also listed in the last two columns.

Table 2. Common Symptoms of STI

Symptoms	STI	Causative Agent	Possible Complications
Genital or rectal discharge of unusual color, smell, or quantity, sometimes with pus	Chlamydia	Chlamydia trachomatis	 Scrotal and testicular swelling Pelvic inflammation with abdominal pain Ectopic pregnancy Infertility Neonatal conjunctivitis
TULO	Gonorrhea	Neisseria gonorrhea	 Scrotal and testicular swelling Pelvic inflammation with abdominal pain Infertility Neonatal conjunctivitis
Genital or rectal sores or blisters; sometimes on the mouth & face	Syphilis	Treponema pallidum	 Blindness Deformities of unborn babies Still birth Neonatal syphilis
SUGAT	Herpes	Herpes Simplex Virus (HSV)	Bladder problemsNewborn infections
Genital or anal warts that are painless KULUGO	Genital and anal warts	Human Papilloma Virus (HPV)	 Cervical or anal cancer in women Penile or anal cancer in men Problems during pregnancy
Genital or anal Itching, possible blisters or sores from bites	Pubic lice	Pthirus pubis (crab lice)	 May spread to other body parts such as legs, chest, armpits, beard, eyelashes
КИТО	Scabies	Sarcoptes scabiei	 Impetigo (bacterial skin infection)
No symptoms; depends on infections present	HIV	Human Immunodeficiency Virus (HIV)	 TB Pneumonia Candidiasis Death

Note: Words in red font (all capital letters) are the commonly used Tagalog terms of the symptoms described.

Common Symptoms of STI

The main objective for this lesson is for your students to understand and identify STI symptoms; and seek medical consult (do not self-medicate) if they or someone they know have symptoms.

When discussing Table 2, focus on the (1) symptoms first. Students can relate to or can at least imagine these. After each symptom, discuss the (2) possible STI that may cause the symptoms.

Memorizing the (3) causative agents may not be as important at their level but are good to know. For (4) possible complications, discuss that undiagnosed and untreated STI can lead to several serious consequences.

Optional materials: pictures of different STI. Refer to the visual aids found in Annex A of this Teachers' Guide

Additional Information about STI:

- A person with STI may show no symptoms. If someone had unprotected sex, the only way to know for sure if he or she has an STI is to see a doctor.
- Since HIV is also an STI, if someone had unprotected sex, he or she can have HIV and have no symptoms because HIV infection in itself commonly comes with no symptoms.
- Each body reacts to an STI in a unique way. While these are the most common symptoms and complications, STI may present differently and only a medical professional can properly diagnose STI.
- There are different ways of diagnosing an STI blood samples, samples taken from the genital area, visual inspection, etc. This varies depending on the STI or the symptom.
- One can have several STI at the same time.
- Other STI and their symptoms:
 - o Bacterial vaginosis genital discharge of unusual color or smell
 - o Trichomoniasis itching or pain in the genitals, burning or discomfort during urination
- Candida albicans is a fungus that is normally found inside the body. When the hormonal balance
 of the vagina is disrupted, an overgrowth of Candida albicans occurs causing an infection
 (sometimes called yeast infection) with symptoms like itching, pain, and a white discharge. It is
 common in females but can also occur in males. It is rarely transmitted through sexual contact.


Aside from those you answered above, other symptoms of sexually transmitted infections include:

- Pain & swelling in the testicles, penis, vagina, or anus
- Pain or burning sensation when urinating
- Pain during sexual intercourse
- Sores/blisters in the mouth/throat/face

Remember, people with an STI can also have no obvious symptoms or are **asymptomatic**, especially females.

Activity 3. Hunting for the common symptoms of STI

This is just a review of the common STI symptoms. Correct answers are:

a) tulo – genital or rectal discharge	
c) kulugo – genital or anal warts	Rectum (rectal) VS Anus (anal)
d) sugat – genital or rectal sores	Anus: opening at the lower end of the rectum (visible part)
e) kuto – genital or anal itching	

Explain to your students that even though these are the most common symptoms of STI, other symptoms may also be present as listed in page 19 of their reference material.

Even though we studied the common symptoms of STI, **DO NOT DIAGNOSE YOURSELF and DO NOT TREAT YOURSELF** or take non-prescribed medications for suspected STIs. You should talk to your teacher, guidance counsellor, school nurse, or school physician if you have any concerns regarding your sexual health. Do not be ashamed or afraid. They will help you!



This key concept above (also found in page 20 of the reference material), summarizes what we want your students to remember with this lesson. Despite their increased knowledge on STI and its symptoms, they should not diagnose or treat themselves.

One important role of teachers at this point is to encourage your students that there are adults who can provide them help without judging them or their sexual experiences. It would be encouraging to students if they feel that they have at least one adult who they can share their sexual health concerns with – without the feeling of being judged or condemned. We highly encourage you to provide a facilitative environment and provide the assistance your students need! ^(C)

But remember, as teachers, you can ask help too! If you feel that it is challenging to handle the situation of one or more of your students, reach out to the guidance counselor or clinic staff of your school, or the City Health Department for assistance. You are not alone in this - you are part of a team geared towards helping students and teachers as well.

Even though we studied the common symptoms of STI, **DO NOT DIAGNOSE YOURSELF and DO NOT TREAT YOURSELF** or take non-prescribed medications for suspected STI. You should talk to your teacher, guidance counselor, school nurse, or school physician if you have any concerns regarding your sexual health. Do not be ashamed or afraid. They will help you!



Relationship of STI and HIV

The presence of STI makes a person at higher risk of having HIV by around 15% to 20%. Sexually Transmitted Infections enable HIV to more easily enter and infect the body.

A person with an STI, particularly if the STI causes sores or ulcers, has a **higher risk of getting infected with HIV**.



To reduce the risk of HIV infection, **avoid getting infected with STI** by abstaining from sexual intercourse or using a condom correctly and consistently.

Prevention of STI

HIV is a type of Sexually Transmitted Infection. In fact, the ways to prevent STI are similar to the ways of HIV prevention discussed in Lesson 2. Let's have a quick review of our **ABCDE of HIV and STI Prevention**! Can you remember what each icon means?



Relationship of STI and HIV

HIV is a type of STI. However, there are additional relationships between STI and HIV transmission:

- HIV-negative individual with STI: An HIV-negative person who has an STI can be at increased risk of becoming infected with HIV through unprotected sexual intercourse. This can happen if the STI causes ulceration or breaks in the skin (e.g. syphilis or herpes), or it stimulates an immune response in the genital area (e.g. chlamydia or gonorrhoea). HIV infection is more likely to occur among individuals with ulcerative STI (those causing sores/ulcers) than the non-ulcerative ones.
- HIV-positive individual with STI: Moreover, the presence of STI in an HIV-positive person can
 also increase the risk of HIV transmission to an HIV-negative partner. This can be through a
 genital ulcer which could bleed.

Prevention of STI

This section is more of a review. Prevention of HIV and STI are more or less the same since HIV is a type of STI. Remind students of the ABCDE.



Additional Information on STI Prevention:

- Condoms do not cover everything! While condoms protect against many STI, there are some STI such as warts (HPV) and herpes that can be transmitted through skin-to-skin contact during sexual intercourse. Thus, parts of the genital area not covered by a condom can still expose a person to some STI. Abstinence remains to be the most effective STI prevention method.
- An HIV-positive individual should still take steps to prevent STI.
- There is a vaccine to prevent HPV which reduces the likelihood of cervical cancer and some warts. This vaccine is available in the Philippines

Treatment of STI

If you had sexual intercourse, and notice symptoms of an STI or feel like you might have an STI, you need to **see a doctor immediately**. Your sexual partner must also consult a doctor. If you or your partner have STI, abstain from having sexual intercourse until you are cleared by your doctor.

STI like <u>HIV</u>, warts, and herpes have no cure while **other STI can be cured with the proper treatment**. Therefore, if you are already having sexual intercourse, it is recommended that you regularly see a doctor to get checked for STI. Social Hygiene Clinics, City Health Clinics, and other public and private hospitals and clinics offer STI diagnosis. It is better to seek help than to keep things to yourself!

Medicines should be taken exactly as how the doctor prescribed them – including how often and for how many days the medicines should be taken. It is important to finish the full course of medication to guarantee complete treatment. So even if you start feeling better or the symptoms disappear, finish the medication as prescribed.

If you get an STI, get diagnosed, and complete treatment – it is still possible to get the same STI again or other STI in the future. So to keep yourself healthy, remember to practice the ABCDE of HIV and STI prevention. ©

Activity 4. All about STI: True or False

Read each item carefully and identify if the statement is true or false by shading the corresponding smiley.

Statement		True	False
1	Everybody with an STI has a symptom.	\odot	\otimes
2	STI can be treated by using Tide/detergent to clean the genitals.	÷	8
3	Both males and females can get gonorrhea or "tulo".	\odot	$\overline{\mathbf{O}}$
4	A person who is good looking and clean cannot have STI.	\odot	8
5	You can diagnose an STI by pressing the stomach of a person and waiting for his reaction.	Ü	8
6	You should always have a condom in your wallet for good luck – "pampa-swerte".	\odot	8
7	STI can be treated by drinking buko juice.	\odot	\otimes

Treatment of STI

This is a straightforward section and summarizes what your students need to know about STI treatment and key concepts they have to remember about STI. Make sure to tackle each point carefully.

Additional information that you may discuss with your students:

- If a person gets an STI, gets diagnosed and completes treatment it is still possible to get an STI in the future. For example, Alex was treated for syphilis 2 months ago and he is now cured. However, if he has sex without a condom with a person with syphilis, Alex can get syphilis again. This would require another consult with a doctor and possibly another course of treatment. Getting treated for an STI in the past does not make you immune to that STI or other STI in the future.
- Like HIV, there are other STI that cannot be completely cured. These STI include:
 - Genital or anal warts (Human Papilloma Virus): There is no treatment for the virus itself. Fortunately, vaccines to prevent HPV are now available. Cautery (medical burning) of the warts or the application of prescribed medicines on the warts is the common treatment for HPV. However, there is a likelihood that the warts will recur (i.e. appear again). Furthermore, HPV may cause cancer, which needs to be diagnosed early to increase chances of survival.
 - Herpes simplex virus (HSV): There is no cure for herpes. However, there are medicines that can prevent or shorten the appearance of the sores caused by HSV.

Treatment of STI

If you had sexual intercourse, and notice symptoms of an STI or feel like you might have an STI, you need to **see a doctor immediately**. Your sexual partner must also consult a doctor. If you or your partner have STI, abstain from having sexual intercourse until you are cleared by your doctor.

STI like <u>HIV</u>, <u>warts</u>, <u>and herpes have no cure</u> while **other STI can be cured** with the proper treatment. Therefore, if you are already having sexual intercourse, it is recommended that you regularly see a doctor to get checked for STI. Social Hygiene Clinics, City Health Clinics, and other public and private hospitals and clinics offer STI diagnosis. It is better to seek help than to keep things to yourself!

Medicines should be taken exactly as how the doctor prescribed them – including how often and for how many days the medicines should be taken. It is important to finish the full course of medication to guarantee complete treatment. So even if you start feeling better or the symptoms disappear, finish the medication as prescribed.

If you get an STI, get diagnosed, and complete treatment – it is still possible to get the same STI again or other STI in the future. So to keep yourself healthy, remember to practice the ABCDE of HIV and STI prevention. ©

Activity 4. All about STI: True or False

Read each item carefully and identify if the statement is true or false by shading the corresponding smiley.

Sta	atement	True	False
1	Everybody with an STI has a symptom.	\odot	8
2	STI can be treated by using Tide/detergent to clean the genitals.	Ü	8
3	Both males and females can get gonorrhea or "tulo".	\odot	\otimes
4	A person who is good looking and clean cannot have STI.	©	8
5	You can diagnose an STI by pressing the stomach of a person and waiting for his reaction.	Ü	8
6	You should always have a condom in your wallet for good luck – "pampa-swerte".	0	8
7	STI can be treated by drinking buko juice.	\odot	8

Activity 4. All about STI: True or False

This activity serves as a review of the lesson as well as a final opportunity to correct common misconceptions of STI among the public.

- FALSE. Lots of people who have an STI don't have symptoms and may not even know they are infected. Anyone who is or has been sexually active can have an STI. You can't tell by the way they look, their cultural background, sexual orientation, number of sexual partners, or preferred type of sexual activity. The only way to make sure you or your partner doesn't have an STI is to talk to your doctor.
- FALSE. One ongoing misconception is that an STI can be treated by using Tide or other detergents to "clean" the genital area. This is NOT CORRECT! In fact, it may lead to more harm as the genitals may get irritated. STI can only be treated with proper medications or treatment prescribed by doctors.
- 3. TRUE. Gonorrhea or *tulo* is one of the most commonly known STI here in the Philippines possibly because of its visible symptom (discharge, often with pus), especially among men. Women can also have similar discharge, although often mild and can be mistaken for a bladder or vaginal infection. Other symptoms include: painful or burning sensation when urinating and vaginal bleeding between periods. However, many women with gonorrhoea do not have any symptoms, but are still at risk of developing serious complications from the infection like those women with symptoms.
- 4. FALSE. You can never tell if someone has an STI just based on physical appearance. A good-looking person who appears to be clean and smells good can still have an STI. Always be safe and careful, no matter who your partner is or what your partner looks like!
- FALSE. This is a common misconception in the Philippines. There are many possible causes of abdominal tenderness (pain when touched or pressed) among women and men. Consult your doctor. Please do not rely on this myth.
- FALSE. Condoms have expiration dates. They cannot be stored for long periods of time. Also, the quality of condoms decreases when exposed to direct sunlight and heat. Keeping condoms in wallets for a long time can affect the quality of condoms (due to heat and possible expiration).
- 7. FALSE. Although buko juice is a good source of hydration for people, it cannot treat STI. An STI is caused by a virus, bacteria or parasite and should be assessed by doctors. Do not treat yourself. Different STI have different treatment. An untreated or incorrectly treated STI can have long term complications. If a person suspects he or she might have an STI, they should consult a doctor immediately.

- 1. Each sexual activity puts you at risk of getting different Sexually Transmitted Infections. One can have several STI at the same time.
- 2. There are four common symptoms of STI that you have to remember: discharge, sores, warts, and itching.
- 3. HIV is a Sexually Transmitted Infection (STI).
- 4. Go to a doctor if you think you may have STI.
- 5. Do not take medicines not prescribed by your doctor.
- Getting treated for STI in the past does not make you immune to that STI or other STI in the future.
- 7. STI may have long-term complications.



Guide Questions

A situation is described below. Raise your hand if you wish to answer the questions that follow:

Sam is a 14 year-old, Grade 8 student who is in a relationship. Sam's partner wants to engage in sexual intercourse. Sam does not know what to do and tells you the situation.

- Scenario 1. If Sam is not ready to have sex, what will you tell Sam?
- Scenario 2. If Sam decides to have sex, what will you advise Sam?
- Scenario 3. Sam decides to have sex and one week later has unusual genital discharge or "tulo". Sam panics and tells you about it. What advice would you give Sam?
- Aside from a trusted friend like you, who else do you think can Sam talk to?

Guide Questions

This is an important activity to APPLY DECISION-MAKING SKILLS based on what your students have learned in the lesson. This is the affective component.

Scenario 1: If Sam is not ready to have sex, what will you tell Sam?

Key message for Sam: "Do not force yourself to have sex when you are not yet ready for it. <u>It's ok to say no. If one of you says "no", the other should respect that decision</u>. Only have sex when you AND your partner are 100% ready. Sex is not necessary to have an intimate relationship."

You can also supplement this key message by sharing with your students some **Refusal Skills** (found in Annex B of this Teachers' Guide).

Scenario 2: If Sam decides to have sex, what will you advise Sam?

Key message for Sam: "Sex can cause HIV, STI and pregnancy. Having sex is a decision that both individuals should make on their own knowing the responsibilities that come with it. <u>Use a condom if you and your partner decide to have sex</u>. Using a condom correctly and consistently during sex will prevent transmission of HIV and most STI, as well as pregnancy."

Scenario 3: Sam has sex and one week later has unusual genital discharge or "tulo". Sam panics and tells you. What advice would you give Sam?

Key message for Sam: After listening to Sam intently and without judgement, one may say to Sam, "You should consult a doctor. <u>We should not depend on what other people say or what is found on the internet.</u> The Social Hygiene Clinic offers services for STI and they may be able to help. I can accompany you to the clinic for support, if you want me to do so"

Who else can Sam talk to?

Key message: Your students should not be ashamed or scared to ask about STI. Sam can talk to trusted adults (i.e. parents, school clinic staff, teacher, guidance counselor, doctor, nurse, etc).



Lesson 4: Available HIV & STI Services and Assessment of Risk

References

Target-Specific Training Manual on HIV Counseling and Testing (DOH, 2013) Tools for HIV Counseling for Asia-Pacific (UNICEF, FHI, WHO, 2009) User's Guide to the Power of You Video (UNICEF, 2009) Pre-requisite Concepts: HIV and STI concepts from Lessons 1-3

Lesson Objectives

- 12. Identifying the different HIV and STI services available
- 13. Assessing one's risk for HIV and STI
- 14. Applying decision-making skills in managing sexual health-related issues

Lesson Outline (30-40 minutes)

- Available services for you and me
 - Activity 5: HIV services we can avail
 - a. HIV education
 - b. HIV testing services (HTS)
 - c. Antiretroviral therapy (ART)
- Assessment of Risk
 - a. Definition of risk
 - b. Risk of HIV and STI infection
 - c. Assessing risk Questionnaire: Assessing my risk: "Safe ba ako?"

Decision-making skills

POINTS TO EMPHASIZE TO YOUR STUDENTS:

- Different services for HIV are available in the country, including: HIV education, HIV Testing Services (HTS), and Antiretroviral Therapy (ART).
- There are public health facilities called Social Hygiene Clinics (SHC) that specialize in the provision of HIV & STI services. Many services are offered for free in SHCs.
- HIV testing is the only way to know if a person has HIV infection. It is recommended that a person who engages in risky behaviors get tested for HIV every 3-6 months.
- While HIV cannot be cured, treatment called Antiretroviral Therapy (ART) can prolong the life of people with HIV. ART is available and provided by the Department of Health for free in the Philippines.
- It is the <u>sexual and injecting drug use behavior</u> of the person that increases or decreases his or her risk of getting HIV.
- Your students should be empowered to make the right decisions today to achieve their dreams in the future.
 - Since your students know themselves best, ask them to answer two exercises (Assessing My Risk and Activity 6) to help them determine their level of HIV & STI risk. Their answers to the exercises can help them decide on what their next steps would be to protect themselves from HIV & STI.

Lesson 4. Available HIV & STI Services and Assessment of Risk

 Activity 5. HIV services we can avail

 Encircle the HIV-related services you think are currently available in our country.

 free HIV testing
 free medicines (ART) for people with HIV

 government clinics for HIV & STI services

 free consultation for STI diagnosis

 reliable websites providing HIV information

Available Services for You and Me

Although HIV and STI are serious conditions, there are several services that are available for all Filipinos.

A. Do you want to learn more about HIV and STI?

All the lessons included in this chapter are aimed to help you understand HIV and STI better. However, there are many other opportunities for you or for your friends to learn more.



There are several adults or older peers you may talk to about STI, HIV, and other related concerns. These include:

- Parents
- MAPEH teacher
- Guidance counselor
- School physician or nurse
- Peer facilitators



You may research more about HIV and STI through the following websites:

- http://www.aidsphil.org/
- https://www.facebook.com/HIVepicenter/
- http://www.loveyourself.ph/

Activity 5. HIV Services we can avail

Answer: All of the services listed in Activity 5 are available in the Philippines.

There are some clinics or hospitals that offer all of these services in their facility, while some health facilities offer only a few of these services.

Available Services for You and Me

Congratulations! You have finished discussing key concepts about HIV and STI to your students. Now it is time to move a step further by informing your students of the available HIV and STI services that they may access at Social Hygiene Clinics and other health facilities across the Philippines. The three main foci of the different services are:

- a) HIV education
- b) HIV Testing Services (HTS)
- c) Antiretroviral Therapy (ART)

A. HIV Education

Emphasize the three main sources of additional information on HIV & STI which includes adults and older peers, reliable websites, and clinics such as the Social Hygiene Clinic (sometimes called City Health Clinic or Reproductive Health & Wellness Clinic).

If there are local text hotlines or Facebook groups on HIV & STI in your city or in your school, this would be a good opportunity to discuss that with your students as well.

Aside from information on HIV & STI, Social Hygiene Clinics also provide free condoms and also give additional information on how to properly use condoms.



There are clinics throughout the country called **Social Hygiene Clinics (SHC**), sometimes referred to as City Health Office (CHO) or Reproductive Health and Wellness Center (RHWC). These government clinics are similar to health centers but specialize in the provision of **services related to STI and HIV**, including testing and treatment, which are mostly free.

Do not be afraid or embarrassed to go to an SHC if you want to obtain additional information on STI and HIV.

In addition to information on STI and HIV, you may also get **free condoms from the SHC**.

B. Do you want to know if you have HIV?

HIV Testing Services (HTS) is the only way to know for sure if you have HIV. You may get a free HIV test from any Social Hygiene Clinic (SHC). Several hospitals and private clinics also offer HIV testing for a corresponding fee. **Pregnant** women, people with STI, and people with tuberculosis are highly encouraged to get tested for HIV.

Your HIV-negative status may change. A person who tested negative for HIV today may still become HIV-positive in the future, depending on his or her behavior (e.g. unprotected sexual intercourse, sharing of needles during injecting drug use). It is recommended to get tested for HIV every 3 to 6 months, especially if you engage in these risky behaviors.

The four main steps in HTS are described below.



Step 1: Pre-test Counseling

- A DOH-trained HIV counselor will privately:
- Assess your risks for HIV
- Provide information on HIV transmission and prevention
- Explain the process and benefits of an HIV test
- Discuss possible test results

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-	_	
-	_	
	_	

Step 2: Informed Consent

An informed consent is needed before you undergo an HIV test – signifying that you understand the process and the benefits of the HIV test, and that you voluntary want to undergo HIV testing services. HIV testing clinics may require parental consent from minors.

B. HIV Testing Services (HTS)

The term "Voluntary Counseling & HIV Testing" (VCT) is the term used in the Republic Act 8504 (Philippine AIDS Prevention and Control Act of 1998). At one point, the term used was HIV Counseling and Testing (HCT). At present, the Department of Health officially uses the term **HIV Testing Services (HTS).** The Reference Material and this Teacher's Guide use the updated term, HTS.

Consistent with the RA 8504's mandate on Pre- and Post-Test Counseling, there are proper steps on HIV Testing Services that must be followed. All testing facilities should follow these steps to ensure comprehensive HTS.





Step 3: Blood Draw

A trained medical technologist will draw some blood from your arm or prick your finger tip, and will test the blood for HIV. You have to wait or go back for the results.

Step 4: Post-test Counseling

A DOH-trained HIV counselor will privately:

- Give you your HIV test result
- Explain the meaning of the result
- Discuss next steps in your care, depending on your test result

C. If you already have HIV, what should you do?

While there is currently **no cure or vaccine for HIV**, there is treatment for people with HIV that can stop the replication of the virus in the body. The treatment is called **Antiretroviral Therapy (ART) which is composed of different antiretroviral (ARV) medicines.** ARV is given by the government for free.

Without treatment, most people with HIV will eventually develop AIDS and die due to different infections that a healthy body can normally fight. Thanks to ART, a person with HIV can live a normal, relatively healthy life.

However, it is important to remember these three things:

- You have to get tested for HIV first! The first step to taking care of yourself is knowing your HIV status. People who have been properly diagnosed with HIV now have the opportunity to access free treatment that can save their lives! HIV clinics may request minors for parental consent before HIV testing.
- 2) ARV should be taken exactly as how the doctors prescribe it. Usually, ART involves several medicines that need to be taken regularly. In order for the treatment to be effective, there should be a constant amount of medicine in the blood. Moreover, missing or forgetting to take the medicines can lead to harmful effects in the body.
- 3) Live a healthy lifestyle. Aside from taking ARV regularly, a person with HIV should avoid smoking, drinking alcohol, and taking illegal drugs. Having regular exercise, a healthy diet, and a positive outlook can help maintain a healthy life!

IMPORTANT NOTE ON INFORMED CONSENT FOR MINORS:

The Philippine AIDS Prevention and Control Act of 1998 (RA 8504) indicates that people less than 18 years old need the consent of their parents or legal guardian to undergo an HIV test.

If your students are interested to get an HIV test, you may advise them to talk to their parents or legal guardian to obtain an informed consent. If they are not comfortable to do so, they may talk to a trusted adult or visit a Social Hygiene Clinic so further assistance may be given to them.

C. Antiretroviral Therapy (ART)

Antiretroviral Therapy (ART) cannot cure a person with HIV but it can improve his or her health. ART blocks viral replication, thus preventing further disease progression and immune system damage. The body's defense (immune system) gets a chance to recover and fewer infections occur. However, antiretroviral therapy does not cure HIV infection.

There are different types of antiretroviral (ARV) working through different mechanisms to act against HIV progression in the body. ART usually involves a combination of different ARV. **Emphasize the importance of taking ARV daily, correctly, and consistently.** However, remind your students that aside from ART, living a healthy lifestyle is beneficial to everyone including a person with HIV.



Understanding Risk

Risk (*noun*) is the possibility something bad will happen.

In terms of HIV and STI: possibility of a person getting infected with HIV or STI



The main consequences of untreated HIV are life-threatening infections and unnecessary death, while the consequences of untreated STI are painful, uncomfortable, or disfiguring symptoms, and long-term complications.

It is the sexual or injecting drug use behavior of a person that increases or decreases the risk or possibility of getting infected with HIV or STI. Listed below are different sexual acts. Rank from 1-4 based on level of risk, 1 being the highest risk and 4 being the lowest risk of getting HIV or STI.



Guide Questions

1. How can you share information on HIV and STI?

There are many possible answers here. Examples are: sharing HIV information on social media, personally sharing it with friends, forming a "Health Club" in school with HIV/STI prevention as one of the agenda, etc.

2. What will you do if you want to get tested for HIV?

Talk to parents or guardian to obtain informed consent, if comfortable. If not, go to a Social Hygiene Clinic or other public or private facilities that offer HIV testing services, for further assistance.

3. What is the first thing you will you do if you find out that you are HIV-positive?

Talk to parents, guardian, or other trusted adult, if comfortable. If not, go to a Social Hygiene Clinic or the nearest treatment hub to be evaluated if ART may be started.

Do not wait and let time pass. Your immune system will weaken and you will be prone to infections, which if not treated can lead to unnecessary death.



Understanding Risk

Risk (*noun*) is the possibility something bad will happen.

In terms of HIV and STI: possibility of a person getting infected with HIV or STI

Word Discovery

The main consequences of untreated HIV are life-threatening infections and unnecessary death, while the consequences of untreated STI are painful, uncomfortable, or disfiguring symptoms, and long-term complications.

It is the sexual or injecting drug use behavior of a person that increases or decreases the risk or possibility of getting infected with HIV or STI. Listed below are different sexual acts. Rank from 1-4 based on level of risk, 1 being the highest risk and 4 being the lowest risk of getting HIV or STI.



Understanding Risk

The next section of the reference material is very important. While the past 3 lessons have mainly focused on the cognitive understanding of your students of HIV and STI, the next section helps them APPLY the knowledge they've gained into an understanding of their own risks.

First, discuss with your students what risk means using the Word Discovery box. You may give more practical examples of other "risky" activities such as:

- Sky diving
- Swimming with sharks
- Juggling knives

In terms of HIV and STI, risk means the possibility of a person getting infected with HIV or STI. This increases or decreases depending on the **sexual or injecting drug use behavior** of a person. For example:

Behaviors that increase HIV risk:

- Behaviors that <u>decrease</u> HIV risk:
- sex with many partners without a condom
- sharing used needles with other drug users

sexual abstinence

- using a new, clean needle for drug injection

Based on previous discussions on HIV transmission and prevention, ask your students to rank the four activities based on their risk: 1 being the highest risk, 4 being the lowest risk. The correct answers are found below:



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Assessing My Risk: "Safe ba Ako?"

The questions in this tool were made to help you decide on the type of help or services that you need regarding HIV and STI. It is important for you to be honest with yourself as you answer. Your teacher will not ask you to write your name or submit this paper. No one should force you to share your answers. However, you may choose to discuss your answers with your parents, teachers or other trusted adults.

After each question, check \square the box that is appropriate for you. There are no right or wrong answers, and this will not be included in your grades. If there are questions that make you uncomfortable, you can decide not to answer the question. However, please read the *italicized* text after the choices.

- 1. It is important to understand what can happen if you have sex and to decide when you are ready. Do you think you are ready to have sex?
- □ Yes To protect yourself from HIV and STI: (1) **B**e faithful to your partner <u>and</u>, (2) practice **C**orrect and **C**onsistent **C**ondom Use.
- □ No It's okay to say no. Even if other people tell you to do so, you do not need to start engaging in sexual intercourse. Wait until you are ready to have sex.
- 2. It is important to protect yourself from HIV and other STI during sex. Have you had sex (oral, vaginal, or anal sex)? If yes, did you or your partner use a condom?
- □ I haven't had sex with anyone.
- □ I have experienced having sex; and my partner/s and I <u>always</u> use condoms.
- □ I have experienced having sex; and my partner/s and I sometimes use condoms.
- □ I have experienced having sex; and my partner/s and I have <u>never</u> used a condom.

If you answered that you have not had sex with anyone ("Abstinence") or that you always use condoms ("Correct and Consistent Condom Use"), these can protect you from HIV or STI. Remember the A-B-C-D-E.

- 3. Have you experienced using prohibited drugs or getting drunk / tipsy because of alcoholic drinks? If yes, have you had sex while high or drunk?
- □ I have never used drugs or gotten drunk.
- □ I have used drugs or have gotten drunk but I have never had sex while high or drunk.
- □ I have used drugs or have gotten drunk and I have had sex while high or drunk.

Using prohibited drugs or being drunk affects your ability to make decisions. This may cause you to make decisions that you may regret in the future. Avoid using prohibited drugs or drinking alcoholic drinks. Be responsible.

Reference Material on HIV, AIDS & STI for High School Students | 27

Assessing my Risk: Safe ba ako?

All the discussions before this section must lead to this – your students should **reflect on their own behavior** and be able to **understand the corresponding risks these behaviors bring**.

The primary objectives of this personal risk assessment tool are the following:

- Assist students in reflecting on their own behavior related to HIV or STI transmission and prevention
- · Provide guidance on what students can do based on their responses to the questions

It is **NOT** meant to be analyzed by teachers, the school, or the City Health Department. However, if students voluntarily seek assistance after answering the personal risk assessment tool, they must be referred to the appropriate service providers.

Instructions for the Assessment:

- i. Give your students a loose copy of the personal risk assessment tool. DO NOT ask them to answer directly in their reference material. Both **English and Tagalog** versions are available in your kit and in Annex C of this Teachers' Guide; use whatever version your students are comfortable with.
- ii. Once each student has a loose copy of the tool, provide them with these instructions:
 - Be honest with yourself when answering the questions.
 - <u>You will not be asked to submit this paper</u> so only you will see your answers to this tool, unless you willingly share it with your teachers, parents, or other adults.
 - This will not be graded and there is no right or wrong answer.
 - If there are questions that you are not <u>comfortable to answer</u>, you may decide not to check any box but you are still encouraged to read the italicized text that follows.
 - The text inside the boxes are the questions.
 - Mark your answers with a check . <u>Do not look at your classmates' answers.</u>
 - The italicized texts after each question provides reminders and suggestions on what you can do, depending on your answer.
- iii. You may opt to read the questions (in the boxes) out loud to help your students understand the questions. Remind your students not to discuss their answers or look at the answers of their classmates. <u>If your students become uncomfortable or start teasing each other, you may instruct them to read and answer silently for the rest of the tool.</u>
- iv. There is a scroll with a message after all the activities. Read this out loud and explain to your students the importance of the decisions they make every day. Remind them of their PURPOSE, VALUE, and FUTURE; and to A-C-T now.

4. Having sex is a personal decision. However, there are certain instances when a person is forced to have sex against his or her will. Examples include:

- someone forced by their partner (boyfriend / girlfriend) to have sex with them;
- someone threatened physically or verbally if they don't agree to have sex;
- someone who was given drugs or alcohol, and then forced to have sex.

Do you know anyone who was forced to have sex against his or her will?

□ No □ Yes

Remember that it is okay to say no if you do not want to have sex or if you are not ready. Your partner, friend, and anyone else should respect your decision. Do not be afraid to tell them that you do not want to have sex.

If you have experienced being forced to have sex or if it happens in the future, you do not have to keep it to yourself. You can ask help from your parents, teacher, guidance counselor, or any trusted adult.

In the same way, it is important for you to respect the decision of your partner about having sex. Only your partner can say if he or she is ready or wants to have sex. Do not force anyone to engage in sexual activities or sexual intercourse. No means no.

5. Have you experienced any of the following symptoms?

- □ "Tulo" or unusual discharges from my genitals or rectum
- □ "Sugat" or sores in my genitals or anus
- □ "Kulugo" or warts in my genitals or anus
- □ I have not experienced any of the symptoms above.

5.1. If you have experienced one or more symptoms above, what did you do?

- □ I did not do anything about the symptoms I experienced.
- □ I told my friend/s.
- □ I told my parents or other trusted adults.
- □ I consulted a doctor.
- □ Others: _

The symptoms listed above are symptoms of possible STI. As discussed in Lesson 3, only a doctor can diagnose if a person has STI and determine the appropriate treatment. Tell your parents or a trusted adult if you experience any of the symptoms listed above and consult a doctor.

6. In Lesson 2, we discussed that HIV may be transmitted through 1) unprotected vaginal, anal, or oral sexual intercourse; 2) sharing of HIV-contaminated needles; 3) transfusion of HIV-contaminated blood; and 4) HIV-positive mother-to-child transmission during pregnancy, childbirth, or breastfeeding.

With these in mind, do you think you are at risk of HIV infection?

□ No

□ Yes

If you feel that you are at risk of having an HIV infection, you need to get an HIV test. You can also avail of the services we discussed in Lesson 4 (example: HIV testing services, free HIV and STI consultations at the Social Hygiene Clinic).

How do you feel about your answers? Regardless of what your past or present experiences may be, you have the power to decide what to do next.

To help you make these big and little choices every day, remember:

- You were created for a PURPOSE. You are up for an exciting ride to discover what your purpose is.
- You are VALUABLE. Regardless of what other people say, you are worthy and valuable.
- You have a **FUTURE** ahead of you. Do not lose hope for a bright future even if you may have had bad experiences in the past.

When you think about your future and make wise decisions, A-C-T now.

A cknowledge your *PURPOSE* and your *VALUE*.

C hoose the right thing to do for your *FUTURE*.

T alk to trusted adults and seek guidance or help.

The next activity will allow you to imagine your future and the things you have to say yes to or say no to, in order to achieve your dreams.



Now, write down your present age inside the blank circle. You have to remember that the decisions that you make **today** will affect the future you want to achieve.

You were created by God for a purpose. Do not let anyone or anything steal or destroy your dreams and the life you were destined to have. What are the things or events that will **prevent you from achieving your dreams**? With these in mind, list 3 things you shouldn't do or should say NO to.

3 things I will say NO to:

What are the things or events that will **help you achieve your dreams**? With these in mind, write down 3 things you should do or should say YES to:



2. 3.

My Decision

1.

2.

3.

1.

Think about all your answers and decide on what your next steps would be. You are encouraged to share your concerns or questions with a trusted adult or health professional but the decision is still up to you. You may select more than one answer from the list below.

- □ I will research about HIV and STI.
- I will talk to my parents or other trusted adults.
- I will visit the school clinic.
- □ I will visit a Social Hygiene Clinic (SHC) or consult a doctor. □ Other answer:

Activity 6. The future I see for myself!

- 1. In order for your students to see beyond the present, ask them to list the biggest dreams they want to achieve (a) when they are 20 years old; (b) when they are 25 years old; and (c) when they are 30 years old.
- 2. Ask your students to write their current age in the first circle under "My age today".
- 3. Keeping in mind the dreams they wrote above, ask your students to reflect on the things they should or should not do <u>today</u> to make their dreams come true. Do not give examples so their answers will not be influenced. These may be related to the lesson (e.g. Say no to sex) or may be related to other decisions that will affect their future (e.g. Go to college).
 - a. Ask them to write 3 things they should NOT do or should say NO to.
 - b. Ask them to write 3 things they should DO or should say YES to.

This is an opportunity to:

- Validate their dreams and encourage them that they have endless possibilities in life and can achieve many things. They were created by God for a purpose and are all destined for great things. Help your students understand and appreciate that the decisions they make on a daily basis will affect their future.
- Empower them to make the right choices.
- Remind them to A-C-T now. You can use this time to go over Refusal Skills (see Annex B) with your students.

If you feel some of your students may have had difficult past experiences, emphasize that these do not dictate what would happen in the future. This may also be an opportunity to identify students that need to be privately referred to other school staff or service providers who may be able to help them more.

After your students complete the personal risk assessment tool:

- Ask them to think about all their answers and the implications of their answers.
- Inform them that you and other school staff are available if they want to learn more about the topics discussed in the risk assessment.
- Encourage them to make concrete decisions regarding their next steps.
- Encourage them to share their thoughts and concerns with their parents, a teacher, their guidance counselor, or a trusted adult. However, remind them that the decision is still up to them.

REMEMBER: DO NOT force your students to share their answers with you. Be open-minded if they volunteer to do so. Do not share their answers with others (without your student's consent).



Lesson 5: HIV Law and the Philippine HIV Situation

References

Tools for HIV Counseling for Asia-Pacific (UNICEF, FHI, WHO, 2009)

- http://www.doh.gov.ph/sites/default/files/policies_and_laws/RA08504.pdf
- http://www.merriam-webster.com
- http://www.oxforddictionaries.com
- http://www.thesaurus.com
- HIV, AIDS & ART Registry of the Philippines (Epidemiology Bureau, Dept of Health, 2016)

Pre-requisite Concepts: HIV concepts from Lessons 1-4

Lesson Objectives

- 15. Describing government policies for the prevention and control of HIV and AIDS (RA 8504 or Philippine AIDS Prevention and Control Act)
 - a. Voluntary HIV Counseling & Testing with written informed consent
 - b. Confidentiality
 - c. Discrimination
- 16. Interpreting data on the current status of HIV in the Philippines
- 17. Reflecting on the trend of the HIV situation in the country

Lesson Outline (30-40 minutes)

- Republic Act 8504 (RA 8504) or Philippine AIDS Prevention and Control Act of 1998
 Activity 7. Word factory
 - a. Voluntary Counseling & HIV testing with informed consent (Article III)
 - b. Confidentiality (Article VI)
 - c. Discrimination (Article VII)

Activity 8. Law abiding or law breaker?

• Philippine HIV Situation Activity 9. What is the status of HIV in the Philippines?

POINTS TO EMPHASIZE TO YOUR STUDENTS:

- There is an existing law called RA 8504 (Philippine AIDS Prevention and Control Act of 1998). Three important provisions of the law to emphasize:
 - $\circ~$ Article III: Voluntary HIV testing services with counseling & written informed consent are available
 - $\circ~$ Article VI: Confidentiality of HIV testing & a person's HIV status should be maintained
 - \circ $\;$ Article VII: Discrimination against people with HIV is against the law
- There is an increasing number of reported HIV cases in the Philippines.
 - $\circ~$ There has been a rapid increase in the number of Filipinos getting newly infected with HIV since 2010.
 - \circ $\;$ More recorded cases among males than females
 - \circ $\;$ Unprotected sexual intercourse is the most common way of HIV transmission
 - \circ $\;$ Three areas with the highest number of HIV cases are NCR, Region IV, & Region VII $\;$

Lesson 5. HIV Law and the Philippine HIV Situation

Republic Act 8504 (RA 8504) or Philippine AIDS Prevention and Control Act of 1998

Get a copy of the RA 8504 from this website:

http://www.doh.gov.ph/sites/default/files/policies_and_laws/RA08504.pdf

Read the law. Focus on Articles III, VI, and VII. Take note of any other articles in the law that interest you.



The Republic Act (RA) 8504 or the Philippine AIDS Prevention and Control Act of 1998 was signed into law on **February 13, 1998**. The contents of the law are summarized in your Grade 8 MAPEH book (pages 242-244).

Activity 7. Word factory

Based on the dictionary meaning and the application to HIV concepts, guess which word is being described. Choose your answer from the word pool below this table.

Word	Dictionary Meaning	Application to HIV Concepts	
	1. Doing, giving or acting based on one's own free will	A person who will undergo an HIV test must do it out of his/her own free will, not because he or she was forced or required by others.	
	2. Provision of assistance and guidance in resolving personal, social, or psychological problems and difficulties, especially by a professional	Provision of HIV information prior to getting an HIV test (pre-test) and explanation of HIV results (post-test). All people who will get an HIV test need to undergo this before and after the test.	Article III
	3. Permission for something to happen or agreement to do something	A legal document signed by the person or a legal guardian, if a minor, indicating that he or she is voluntarily giving permission to be tested for HIV.	
	 Intended to be kept secret or private 	All identifying information and the results of the HIV test are kept private and will not be shared.	Article VI
	5. The practice of unfairly treating a person or group of people differently from other people or groups of people	The law prohibits unfairly treating a person who is diagnosed with HIV. Examples of unfair treatment of people with HIV: Expulsion from school. Being asked to resign. Not allowing access to services.	Article V
	6. A set of negative and often unfair beliefs that a society or group of people have about something	A negative, unfair belief regarding HIV. Example: Not wanting to be friends with someone because he has HIV.	
	Word	d Pool	
voluntary o stigma o consent o discrimination o counseling o confidential			
			_

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Republic Act 8504 (RA 8504) or Philippine AIDS Prevention and Control Act of 1998

The first part of Lesson 5 is focused on discussing RA 8504 – the existing law on HIV and AIDS in the country. The objective of this part of the lesson is not to memorize the law or the different articles. The more important aspect is to help your students understand provisions of the law, and for them to keep the law in mind when faced with situations involving HIV.

Activity 7: Word Factory

Before going in to the details of the law, it is important to first ensure that your students understand the important terms that will be used.

RECOMMENDATION: Ask your students to answer Activity 7 first. Do not reveal all the answers immediately after. Break it down per Article to facilitate your discussion. Answer key for Activity 7 is divided into three parts in the next pages.

Word	Suggested words/phrases with similar meaning	Dictionary Meaning	Use in HIV & AIDS Language
1. Voluntary	Autonomous Freely Unasked Unforced Willingness <i>Kusang-loob</i>	Doing, giving or acting based on one's own free will.	VOLUNTARY testing for HIV
2. Counseling	Advocate Direct Give advice Inform Recommend Suggest Teach Pagbibigay payo	The provision of assistance and guidance in resolving personal, social, or psychological problems and difficulties, especially by a professional	Pre-test and Post-test COUNSELING
3. Consent	Acceptance Agreement Approval Assent Authorization Permission Pahintulot	Permission for something to happen or agreement to do something	Informed Consent for HIV Testing

Answers to Activity 7 (Part 1: Article III):

Do not worry; you do not have to memorize the entire RA 8504! What is more important is for you to **keep in mind these three major sections** of the law. Remembering these can help you understand your rights and the rights of others concerning HIV.

1. <u>Voluntary HIV Counseling & Testing with written informed consent</u> or more recently called, HIV Testing Services (HTS) (Article III)

Our law states in **Article III** that **no compulsory HIV testing shall be allowed**. Nobody can force you or require you to get an HIV test because that is against our law. However, the government encourages individuals at high risk for getting infected with HIV to get tested regularly.

Remember that a written informed consent is needed before you undergo HIV testing services. An informed consent means that you understand the implications of getting an HIV test. If you are interested to get tested, you are encouraged to tell your parents or guardian about it. However, if you are not comfortable to do so, you may consider discussing this with a trusted adult or visiting a Social Hygiene Clinic so further assistance may be provided to you.

2. Confidentiality (Article VI)

"All health professionals, medical instructors, workers, employers, recruitment agencies, insurance companies, data encoders, and other custodians of any medical record, file, data, or test results are directed to strictly observe confidentiality in the handling of all medical information, particularly the identity and status of persons with HIV."

Article VI of the RA 8504 as quoted above emphasizes that the names, addresses and other identifying information of people living with HIV should be kept confidential. We cannot tell other people about a person's HIV status.

If you want to know your HIV status or you wish to ask a health professional regarding HIV, do not be afraid or embarrassed. Information about you, your practices, or your HIV status will not be known by other people. All these will be kept confidential.

However, a person living with HIV also has a responsibility to disclose or tell his/her HIV status and health condition to his/her spouse or sexual partner as soon as possible and encourage his/her partner to get tested.

1. Voluntary Counseling & HIV Testing with Informed Consent (Article III)

- VOLUNTARY (Section 16-17) Nobody can force you or your students to get an HIV test. For example, the school CANNOT require students to get tested for HIV. Local employers CANNOT require employees to get tested either. This is something a person should decide to do on his or her own free will.
- COUNSELING (Section 20) HIV testing involves pre- and post-test counseling. Basically, the purpose of these short counseling sessions is to help the person understand what HIV is, the risk factors for infection, the benefits of getting tested, what their results mean, and what their next steps should be depending on their HIV test result.
- INFORMED CONSENT (Section 15) The 1998 version of RA 8504 indicates that people less than 18 years old need the consent of their parents or legal guardian to undergo an HIV test. If your students are interested to get an HIV test, you may advise them to:
 - o Talk to their parents or legal guardian to obtain an informed consent
 - If they are not comfortable to do so, they may talk to a trusted adult or visit a Social Hygiene Clinic so further assistance may be given to them

Do not worry; you do not have to memorize the entire RA 8504! What is more important is for you to **keep in mind these three major sections** of the law. Remembering these can help you understand your rights and the rights of others concerning HIV.

1. <u>Voluntary HIV Counseling & Testing with written informed consent</u> <u>or more recently called, HIV Testing Services (HTS) (Article III)</u>

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Remember that a written informed consent is needed before you undergo HIV testing services. An informed consent means that you understand the implications of getting an HIV test. If you are interested to get tested, you are encouraged to tell your parents or guardian about it. However, if you are not comfortable to do so, you may consider discussing this with a trusted adult or visiting a Social Hygiene Clinic so further assistance may be provided to you.

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If you want to know your HIV status or you wish to ask a health professional regarding HIV, do not be afraid or embarrassed. Information about you, your practices, or your HIV status will not be known by other people. All these will be kept confidential.

However, a person living with HIV also has a responsibility to disclose or tell his/her HIV status and health condition to his/her spouse or sexual partner as soon as possible and encourage his/her partner to get tested.

Answers to Activity 7 (Part 2: Article VI):

Word	Suggested words/phrases with similar meaning	Dictionary Meaning	Use in HIV & AIDS Language
4. Confidential	Classified Private Personal Restricted Secret <i>Hindi pwede sabihin</i>	Intended to be kept secret or private	Confidential Information

2. <u>Confidentiality (Article VI)</u>

- MEDICAL CONFIDENTIALITY (Section 30) see quote in the material; all health professional and staff are mandated to maintain strict confidentiality.
- RELEASE OF HIV TEST RESULT (Section 32) A person getting tested for HIV should know that the results can only be released to: (a) the person who submitted himself or herself to the HIV test; (b) either parent of a minor or child who has been tested; (c) a legal guardian in the case of insane persons or orphans; (d) the AIDSWATCH (national monitoring program at DOH); and (e) a justice of the Court of Appeals or the Supreme Court.
- DISCLOSURE TO SEXUAL PARTNER (Section 34) the law states, "Any person with HIV is obliged to disclose his/her HIV status and health condition to his/her spouse or sexual partner at the earliest opportune time."

Answers to Activity 7 (Part 3: Article VII):

Word	Suggested words/phrases with similar meaning	Dictionary Meaning	Use in HIV & AIDS Language
5. Discrimination	Inequity Prejudice Unfairness Unjust Racist	The practice of unfairly treating a person or group of people differently from other people or groups of people	Discrimination against people diagnosed with HIV
6. Stigma	Disgrace Dishonor Disrespect Humiliation Shame	A set of negative and often unfair beliefs that a group of people have about something	Stigma against people living with HIV

3. Discrimination (Article VII)

Article VII of the RA 8504 mandates that discrimination in any form towards a person because of his or her HIV status is prohibited. He or she cannot be denied:

- admission in schools (expulsion and segregation are also against the law);
- employment (plus, denying promotion and terminating employment);
- housing;
- freedom to travel;
- health services they require, including health and life insurance;
- decent burial services when they die.

It is important to know these rights and ensure that we do not take part in discriminating people based on their actual or perceived HIV status. They are humans too, just like you and me! Now let us see how well you understand the law...

Activity 8. Law abiding or law breaker?

Based on what you have learned about RA 8504, determine whether the **person in bold letters** is law abiding (follows the law) or law breaking (does not follow the law).

Si	tuation	Law Abiding	Law Breaker
1	James ' neighbor told him that he had HIV. James did not waste any time and told all his friends in his barangay about it.	©	$\overline{\mathbf{S}}$
2	Agnes told his teacher that she had HIV. Her teacher told the principal. The principal called Agnes to her office and immediately expelled her from the school.		3
3	Jerome told his boss that he had HIV. His boss asked him how the office could be of support to him.	Ü	\odot
4	Despite having many clients in the clinic, the HIV counselor took the time to provide post-test counseling to Anthony – explaining the meaning of his HIV test results to him and discussing possible next steps he can take.	٢	$\overline{(x)}$
5	On the first day of Emily at work, she was told by her manager that HIV testing was required or else she will lose her job.	÷	8
6	Brad's brother passed away because of HIV. The owner of the funeral parlor refused to provide burial services to Brad's brother.		\odot
7	The nurse at a clinic saw her college friend getting tested for HIV. She immediately logged on to Facebook and shared stolen pictures of him while getting his blood drawn for the HIV test.	٢	\odot

3. Discrimination (Article VII)

Article VII elaborates on the different discriminatory acts specified in the law. In general, these acts are summarized in the list shown in the reference material (page 33). Remind your students that:

- they should not perform these discriminating acts on OTHER PEOPLE
- they should fight for THEIR OWN RIGHTS if they are being discriminated against
- they should inform PEOPLE OF AUTHORITY if they see or hear unlawful acts being performed by others

People who have HIV infection are <u>not</u> called "HIV victims". The correct term is "People Living with HIV" or PLHIV.

Activity 8: Law Abiding or Law Breaker?

Now that the more important aspects of the law have been discussed, let us see if your students can now apply them in real-life situations. Ask them to answer the activity individually then discuss the correct answer afterwards, focusing on the concept of the law that was followed or violated.

Situation	Answer
1	Law Breaker – Breach of confidentiality by James
2	Law Breaker – Breach of confidentiality by Matthew's teacher and discrimination by the principal/ school.
3	Law Abiding – Jerome's boss followed article VII of RA 8504 – discrimination of any form towards a person with HIV is prohibited.
4	Law Abiding – Article III of RA 8504 requires post-HIV test counseling. Even if the clinic was full, the HIV counselor still provided post-test counseling and informed Anthony of what his results meant and what to do next.
5	Law Breaker – Compulsory HIV testing is not allowed. HIV testing must be voluntary.
6	Law Breaker – Denial of access to services is discrimination
7	Law Breaker – Breach of confidentiality by nurse

Understanding the Current Situation of HIV in the Philippines

The Department of Health is mandated by the Republic Act 8504 (AIDS Prevention and Control Act) to collect data on HIV and monitor the status of the HIV epidemic in the Philippines. An **epidemic** is defined as an abnormal increase in the number of cases of a disease or illness in a specific population or area.

There is an increasing problem of HIV in the Philippines. From January 1984 to December 2016, there were a total of **39,622 people newly diagnosed with HIV**. The number of people being diagnosed with HIV every year has been greatly increasing over the past ten years (Figure 3).

Activity 9. What is the status of HIV in the Philippines?

Study the graph below and answer the corresponding questions that follow.



Data Source: HIV/AIDS & ART Registry of the Philippines (HARP), Department of Health

- 1. How many males and how many females were diagnosed with HIV in 2008?
- 2. How many males and how many females were diagnosed with HIV in 2016?
- 3. Based on the graph, is the number of HIV cases higher among males or females in the country?
- 4. When did the number of HIV cases start reaching more than 1,000 per year?
- 5. In three sentences, reflect on the trend of HIV epidemic in the country within the past ten years.

Understanding the Current Situation of HIV in the Philippines

Your students should be made aware of the current situation of HIV in the country. The HIV epidemic has been growing rapidly in recent years and it is important to emphasize this to your students.

Activity 9: What is the status of HIV in the Philippines?

- 1. How many males and how many females were diagnosed with HIV in 2008? 473 Males, 55 Females
- 2. How many males and how many females were diagnosed with HIV in 2016? 8,874 Males, 390 Females
- 3. Based on the graph, is the number of HIV cases higher among males or among females in the country?

The burden of HIV is higher among males than females. Figure 3 shows that the number of males diagnosed with HIV are in the thousands since 2010 while females are only in the hundreds.

4. When did the number of HIV cases start reaching more than 1,000 per year? 2010. Add the number of newly diagnosed males and females per year. 2010 is the year when yearly new cases reached more than 1000.

5. In three sentences, reflect on the trend of HIV epidemic in the country within the past ten years.

Guide Questions:

- What is the pattern of the HIV epidemic? Is it increasing or decreasing?
- How great is the increase in the number of HIV cases within the last 10 years?
- Are there more females or males with HIV?

The HIV epidemic in the country continues to increase every year. The number of HIV infections per year reached thousands beginning 2010. More males are infected with HIV than females.

Did You Know? The first case of HIV reported in the Philippines was in 1984.

Figure 3. Number of newly diagnosed HIV cases in the Philippines, 2006-2016

Most of the people diagnosed with HIV from 2006 to 2016 were males. The pie chart shows that males comprised 95% of HIV cases (Figure 4).

Figure 4. Percentage of newly diagnosed male and female HIV cases in the

Philippines, 2006-2016

Data Source: HIV/AIDS & ART Registry of the Philippines (HARP), Department of Health

The three regions with the highest number of people diagnosed with HIV were: **National Capital Region (NCR)**, **CALABARZON**, and **Central Visayas** (Figure 5).

Figure 5. Number of people with HIV in NCR, CALABARZON, & Central Visayas, 2006-2016



Check this URL for the latest updates: http://www.doh.gov.ph/statistics

Data from the Department of Health also show that 95% of diagnosed HIV infections from 2006 to 2016 were sexually transmitted.

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In the Philippines, most of the reported HIV cases were from only three ways of transmission. Majority were from sexual transmission (male to male, male to both male and female, and male to female sexual intercourse). Some were from sharing of HIV-contaminated needles. A few were from mother-to-child transmission.



Source: HIV/AIDS & ART Registry of the Philippines DOH (HARP), January 2016

Given these common ways of transmission, the populations or groups who have higher risk for HIV infection include the following:

- People who inject drugs or injecting drug users. These are people who use drugs and prefer to inject drugs instead of inhaling or ingesting the drugs. In the Philippines, this population is mostly male. They get infected with HIV when they share syringes or needles with each other. There is a high likelihood of HIV transmission this way.
- People who have unprotected sex. In terms of HIV transmission through sex, the risk is highest among those who engage in unprotected anal sex; next is unprotected vaginal sex. Oral sex can still transmit HIV but the likelihood is low.

Why males? Those who engage in anal sex are mostly males and those who inject drugs are also mostly males. That is why most of the HIV cases in the Philippines are males.

Geographically, there are three regions in the country with the highest number of diagnosed HIV cases (as shown in Figure 4) – **NCR**, **Region 4A**, **& Region 7**.

NOTE: Updated data on the Philippine HIV situation may be accessed from: <u>http://www.doh.gov.ph/statistics</u> under the HIV section. This data is updated regularly.

Guide Questions

As a class, let us reflect on the implications of RA 8504 and the current situation of HIV in the Philippines.

1. What will you do if your cousin with HIV wants to share his or her snack (cake or cookies) with you?

- 2. What will you do if a friend tells you he or she is HIV-positive?
- 3. Based on what you learned about the law, what will you do to be more lawabiding to RA 8504?
- 4. Since HIV is increasing among young people in the Philippines, what can you do to help prevent the spread of HIV?
- 5. What was the most interesting thing you learned about HIV throughout all our lessons?

Guide Questions:

1. What will you do if your cousin with HIV wants to share his or her snack (cake or cookies) with you?

Students should not stigmatize their HIV-positive cousin. Moreover, students must understand by now that HIV CANNOT be transmitted through sharing of food with an HIV-positive person. Thus, students are expected to answer that it is OK for them to share food with their HIV-positive cousin.

- 2. What will you do if a friend tells you he or she is HIV-positive? Confidentiality is one of the highlights of RA 8504. The first step would be to NOT TELL ANY OTHER PERSON about your friend's HIV status. Then support him or her.
- 3. Based on what you learned about the law, what will you do to be more law-abiding to RA 8504?

Possible answers include:

- If a friend shares his/her HIV status with me, I will not tell others about it.
- I will not force anyone to get tested for HIV.
- I will not judge a person because of his/her HIV status.
- 4. Since HIV is increasing among young people in the Philippines, what can you do to help prevent the spread of HIV?

Possible answers include:

- I will share with friends what I have learned about HIV.
- I will personally practice ABCDE, and encourage friends to do the same
- I will get tested for HIV (because I feel at risk).
- 5. What was the most interesting thing you learned about HIV throughout all our lessons?

Keep an open ear. Appreciate and validate the answers given by your students.

Optional Activities:

For Lesson 5

Optional Activity. HIV by the numbers

To understand how rapidly HIV infections are spreading, you can compute the number of new people diagnosed each day. As an example, let us look at the 2008 data in Figure 3:



Figure 3. Number of newly diagnosed HIV cases in the Philippines, 2006-2016

Data Source: HIV/AIDS & ART Registry of the Philippines (HARP), Department of Health

 1	473 males + 55 females = 528 people newly diagnosed with HIV in 2008	- -
I I	<u> 528 people </u> = 1.4 or 1 person diagnosed with HIV per day in 2008 365 days in a year	I I
I I		



Solving for the average number of newly diagnosed HIV cases per day

- 1. Use data in Figure 3 of Activity 9, page 34 of the reference material.
- 2. Add the number of male cases and female cases each year to get the total.
- 3. Divide the total number of cases by 365 which is the number of days in a year
- 4. Round off the answer to a whole number (based on first decimal point).

Year	Average number newly diagnosed with HIV per day
2010 4 people diagnosed with HIV per day	
2012	9 people diagnosed with HIV per day
2014 16 people diagnosed with HIV per day	
2016	25 people diagnosed with HIV per day

Solution:

For 2010: 1,466 males + 125 females = 1,591 people / 365 days = 4.4 or 4 For 2012: 3,186 males + 152 females = 3,338 people / 365 days = 9.1 or 9 For 2014: 5,758 males + 253 females = 6,011 people / 365 days = 16.4 or 16 For 2016: 8,874 males + 390 females = 9,264 people / 365 days = 25.4 or 25

For Lesson 5

Optional Activity. News report

Based on the information you learned about the status of the HIV epidemic in the Philippines, prepare a **5 to 7 minute news report** to convince young viewers (Grade 7 to Grade 12) how important it is to respond to the growing HIV epidemic in the Philippines.

Group Project

Group Project. Poster-making contest

We have learned a lot about HIV and STI in the lessons we discussed. Now it is time for us to express how we feel and what we know through art!

Divide the class into smaller groups. Your teacher will provide you with the guidelines for this activity. Using the standardized type of materials your teacher will set, create an artwork focusing on this theme:

As a Grade 8 student, what can I do to prevent the spread of HIV?

Optional Activity: News report

This activity was designed to achieve the affective objective of the lesson. With what they have learned on HIV infection and the HIV situation, students are now expected to reflect on the trend of HIV in the country.

- 1. Divide the class into small groups of 3 or 5 (depending on the size of your class).
- 2. Give the directions written in Activity.
- 3. Ask each group to present their news report.



Group Project: Poster-Making Contest

This last project is meant to synthesize everything your students learned in the four lessons on HIV and STI and provide them an outlet to express the impact of what they have learned, how it has affected them personally, and how they can make a change.

- 1. Divide the class into groups of 5.
- 2. Give instructions on the poster-making contest:
 - One whole sheet of white cartolina or 1/2 illustration board
 - Any coloring material
 - Message can be depicted either as words, a drawing or a combination of both
 - Emphasize the theme: As a Grade 8 student, what can I do to prevent the spread of HIV?
- 3. Posters can be judged based on the following criteria:
 - Accuracy of the message
 - Significance of the message
 - Originality
 - Creativity

Glossary of Terms

Acquired Immunodeficiency Syndrome (AIDS)	A condition wherein a set of infections appear together as a person's immune system weakens because of HIV infection.	Di
Antibody	A substance produced by the body to fight disease.	
Antigen	A harmful substance that causes the body to produce antibodies.	
Antiretroviral (ARV)	Medicines used in Antiretroviral Therapy (ART).	Ep
Antiretroviral Therapy (ART)	Treatment for people with HIV that is highly active in suppressing viral replication, reducing the amount of the virus in the blood to undetectable levels and slowing the progress of HIV infection.	Ge
Asymptomatic	A state wherein a person has no symptoms of disease.	
CD4 cell	Acronym for Cluster of Differentiation 4 cells. This cell is found on the surface of T cells, and usually functions to facilitate the recognition of antigens by T cells. It is the receptor for HIV.	Go
Chlamydia	A common sexually transmitted infection caused by <i>Chlamydia trachomatis</i> . It can cause inflammation of the cervix in women, and urethra, rectum and anus in both men and women.	
Condom	A thin rubber sheath used to cover the penis or vagina during sexual intercourse and acts as a barrier to prevent the spread of sexually transmitted infections including HIV.	He
Confidential	Intended to be kept secret or private.	
	RA 8504 dictates that the results of an HIV test must remain confidential. This means only the person who was tested can know the result. If the person shares with another person his or her HIV status, that information must not be shared with others.	Hu (H
Consent	Permission for something to happen or agreement to do something.	нг
	Informed Consent in HIV Testing is a legal document signed by the person or a legal guardian, if a minor, indicating that he or she is voluntarily giving permission to be tested for HIV.	Im
Counseling	Provision of assistance and guidance in resolving personal, social, or psychological problems or difficulties, especially by a professional.	PL
	In the context of HIV, counseling aims to encourage the client to engage in behaviors that prevent STI and HIV transmission; help the client understand the benefits and implications of an HIV test; and explain what to do if the client is HIV-positive and needs to take ARV.	Pn
	Pre-test Counseling in HIV is confidential counseling done by a DOH-trained counselor before making an informed choice about being tested for HIV. The DOH-trained HIV counselor will privately	Pro Pu
	assess the person's risks for HIV, provide information on HIV transmission and prevention, explain the benefits of an HIV test & discuss the meaning of possible test results.	

	Post-test Counseling in HIV is done to explain the result of the HIV test, how to access ARV, and what to do next.
iscrimination	A human rights violation which refers to any form of random distinction, exclusion or restriction affecting a person, usually (but not only) because of an inherent personal characteristic or perceived membership of a particular group. When stigma is acted upon, the result is discrimination.
pidemic	Refers to a disease condition affecting a disproportionately large number of individuals within a population, community or region at the same time. HIV is an example of an epidemic.
enital and Anal Warts	An STI caused by Human Papilloma Virus (HPV). Genital or anal warts usually appear as a small bump or group of bumps in the genital area or anus. They can be small or large, raised or flat, or shaped like a cauliflower. HPV can cause cervical cancer as well as cancer of the vulva, vagina, penis, or anus.
onorrhea	An STI caused by <i>Neisseria gonorrhea</i> which infects the mucous membranes of the rectum and reproductive tract (including the urethra in males and females, and the cervix, uterus, and fallopian tubes in females). Its most common symptom is genital discharge with pus, commonly known as "tulo".
erpes	Genital herpes is an STI caused by the Herpes Simplex Virus (HSV). It is transmitted through contact with lesions, mucosal surfaces, genital secretions, or oral secretions. Most individuals with genital herpes are asymptomatic but when symptoms do occur, they typically appear as one or more vesicles on or around the genitals or rectum. HSV can also cause oral herpes or cold sores around the mouth.
uman Immunodeficiency Virus IIV)	A virus that weakens the immune system by destroying or impairing the function of the cells of the immune system, particularly CD4 cells.
IV Testing Services (HTS)	The process of getting an HIV test which includes a counseling session before getting a blood draw, and another after the release of the test result.
nmune System	Refers to the organs and processes of the body that protect your body from diseases and infections.
LHIV	Acronym for People Living with HIV. The correct term for individuals who have HIV infection.
nounoma	An infection of the lungs caused by viruses, bacteria and fungi characterized by cough, fever and difficulty breathing. Pneumonia caused by <i>Pneumocystis jirovecii</i> , formerly called, <i>Pneumocystis</i> <i>carinii</i> , is a common opportunistic infection in people diagnosed with AIDS.
revention	The act or practice of stopping or hindering something (like an infection or sickness) from happening.
ubic Lice	Parasitic insects called <i>Pthirus pubis</i> or crab lice found primarily in the pubic or genital area of humans.

Republic Act 8504 / RA 8504	Refers to The Philippine AIDS Prevention and Control Act of 1998. It is the law for the prevention and control of HIV and AIDS in the Philippines.
Replication	A process wherein the virus copies itself inside the body. HIV uses the machinery of CD4 cells to replicate itself inside the body.
Risk	The possibility something bad will happen.
	In terms of HIV and STI, risk of infection is the possibility of a person getting infected with HIV or STI
Scabies	An infection caused by bites from parasitic mites called <i>Sarcoptes scabiei</i> . The common symptoms of scabies are intense itching and a pimple-like skin rash. The scabies mite usually is spread by direct, prolonged, skin-to-skin contact with a person who has scabies.
Sexual Abstinence	The practice of not having sexual intercourse.
Sexually Transmitted Infection (STI)	Infections that are spread by the transfer of organisms from person-to-person during sexual contact.
Social Hygiene Clinic (SHC)	Government clinics, sometimes referred to as City Health Office (CHO) or Reproductive Health and Wellness Center (RHWC), which are similar to health centers but specializes in the provision of free services related to STI and HIV, including testing and treatment.
Stigma	A set of negative and often unfair beliefs which degrades a person or a group of people in the eyes of others.
Syphilis	An STI caused by <i>Treponema pallidum</i> which is transmitted by direct contact with a sore, known as a chancre. Chancres occur mainly on the genitals, vagina, anus, or in the rectum. It can also occur on the lips and in the mouth.
Thrush	A yeast infection from a fungus, <i>Candida albicans</i> , causing whitish patches in the mouth and throat.
Transmission	The act or process by which something is spread or passed from one person or thing to another.
Tuberculosis (TB)	An infection caused by <i>Mycobacterium tuberculosis</i> which affects the lungs and is spread through person-to-person through microscopic droplets released into the air by coughing.
	TB is the leading cause of death among people living with HIV.
Voluntary	Doing, giving or acting of one's own free will.
	According to RA 8504, HIV testing should be voluntary, not because he or she was forced or required by others.

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Most women with gonorrhea are asymptomatic or show no symptoms. Symptoms, when present, are usually so mild and nonspecific such as increased vaginal discharge, and vaginal bleeding between periods.

Other symptoms of chlamydia and gonorrhea that are present in both men and women include:

- Pain or burning sensation when urinating
 - Painful bowel movements
- Rectal pain, discharge and or bleeding
 Anal itching

and bleeding.

● In women, the cervix is usually infected

resulting in a **PUS-FILLED** discharge ("nana")

Chlamydia and Gonorrhea CAN BE CURED with the right treatment. If these STI are not treated, they can result in health problems such as difficulty or not being able to get pregnant for women, and infections for babies born to mothers with STI while they were pregnant.

Reference: CDC – Gonorrhea & Chlamydia Fact Sheet (Center for Disease Control and Prevention, 2016)

PLEASE RETURN TO YOUR TEACHER.

<section-header>

SORES or BLISTERS (SUGAT)

Though Syphilis and Genital Herpes both manifest genital, rectal or oral sores as symptoms, they differ in the characteristics of these sores or blisters.

SYPHILIS

 The sore in syphilis is called a CHANCRE appearing as a painless ulcer or sore at the site of entry. Treponema pallidum bacteria is the causative agent for syphilis.
 Lesions in genital here were vession of entry. Treponema pallidum bacteria is the causative agent for syphilis.

 As syphilis progresses and remain untreated, it may also manifest non-itchy skin rashes on the palms of the hands and soles of the feet (See picture of hands).
 As herpes progresses painful ulcers that ma During this time, herper and brain.

Syphilis **CAN BE CURED** with the right antibiotics from your health care provider.

GENITAL HERPES

Lesions in genital herpes typically appear as one or more **VESICLES** (fluid-filled pouches) around the site of entry. *Herpes simplex virus* is the causative agent for genital herpes t may As herpes progresses, the vesicles break and leave painful ulcers that may take two to four weeks to heal. During this time, herpes can be transmitted.

The first time herpes vesicles break, the person may also experience fever, body aches, or swollen glands.

There is **NO CURE** for herpes. However, there are medicines that can treat sores or blisters.

Reference: CDC - Syphilis Fact Sheet (Center for Disease Control and Prevention, 2016)

PLEASE RETURN TO YOUR TEACHER.

GENITAL OR RECTAL WARTS (KULUGO)

http://www.wartremove

and around anus



WARTS IN THE PENIS

GENITAL or RECTAL WARTS (KULUGO)

Genital or anal warts are caused by the human papilloma virus (HPV).

Genital or anal warts usually appear as a small bump or group of bumps in the genital or anal area. They can be small or large, raised or flat, or shaped like a cauliflower. The warts are usually not painful but can be itchy or cause bleeding.

Aside from the penis, vagina and anus, genital warts can also occur in the lips, mouth, tongue and throat.

There is **NO PERMANENT CURE** for HPV but genital warts **CAN BE TREATED**. Vaccines are also available for prevention of HPV. However if left untreated, genital and anal warts may grow in size and number, and cause problems with urinating and bowel elimination through obstruction or blockage of the urinary and anal openings.

Wounds leading to bacterial infection may also develop from the genital or anal warts.

References: CDC – Human Papilloma Virus Fact Sheet (Center for Disease Control and Prevention, 2016) Human Papilloma Virus (Medscape, 2016) Genital Warts (US National Library of Medicine, 2014)

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DID YOU KNOW?

HPV can also cause cancer in the reproductive organs of men and women such as the cervix, vagina, and penis. It can also cause cancer in the anus. However, it is important to note that the types of HPV that can cause genital warts are not the same as the types that can cause cancers.

<section-header>ITCHING FROM BITES (KUTO)PUBIC LICESCABIESImage: Strain Strai

ITCHING FROM BITES (KUTO)

Scabies and Pubic Lice are parasitic infections transmitted from person to person through sexual contact. Though both infections are characterized by sores and itching from bites, they differ in some characteristics.

SCABIES

tan.com/w/e

A person who is infected with scabies for the first time do not usually show symptoms for up to 2 months. A common symptom of scabies is an itchy, pimple-like rash called **SCABIES RASH**. Severe itching, especially at night, is the earliest and most common symptom of scabies.

Itching and rash commonly occurs in the following areas of the body:

Between the fingers • Nipple • Armpit
 Wrist • Waist • Penis
 Elbow • Shoulder blades • Buttocl

Waist
 Penis
 Shoulder blades
 Buttocks

Scabies and pubic lice CAN BE CURED if treatment is sought. If not treated, complications may occur. Intense itching from both scabies and pubic lice infection leads to scratching that can lead to wounds and bacterial skin infections.

References: CDC – Public "Crab" Lice (Center for Disease Control and Prevention, 2013) Healthline – Scabies (http://www.healthline.com, 2016)

PLEASE RETURN TO YOUR TEACHER.

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Pubic Lice, called **CRAB LICE** or *Pthirus pubis*, usually occurs in the pubic hairs on genital areas hence the name. However, they may be occasionally found on other

PUBIC LICE

However, they may be occasionally found on other coarse or thick body hairs such as those on legs, armpits, mustache, beard, eyebrows or eyelashes.

Signs and symptoms of pubic lice include the following: • Itching in the genital area • Visible lice eggs or nits, or crawling lice

Annex B: Refusal Skills

Refusal Skills Training Guide for Teachers

SESSION 2 (60 minutes)

Session Objective: At the end of this session, students will be equipped and empowered to make decisions that will set them up for future success by realizing their purpose and value. Students will be equipped to ACT in any given circumstance - Acknowledge their purpose and value, Choose to do the right thing for their future, and Talk to trusted adults.

INTRODUCTION

The Power of Choice

is defined as the act of choosing or power to choose between two or more possibilities. It is an opportunity or power to make a decision.¹ In a study made in 2007, it was said that we make choices and arrive to an average of 220 decisions daily just on food alone.² We are faced with numerous choices everyday the moment we wake up - from the food we eat, clothes to wear, money to spend to, and the like. It is important to consider the little choices we make as, for most of the time, these contribute to bigger details of our lives such as our habits and practices.

Youth is a season where one get to do a lot of things such as make new friends, build new connections, and explore new things. A new door opens where one feels the thrill to experience new changes and dare new opportunities for growth. However, this season will not be maximized and could even be robbed of its purpose if proper guidance and support is not at hand or is not welcomed.

Refusal Skills

A student has to grow in all aspects of knowledge, attitude, and skills to be prepared to enter the workforce once academic requirements are met.

A ______ is the ability to be able to do something well or an expertise.

______ skills are a set of skills designed to avoid high-risk behaviors such as violence, drug use, and sexual activity to help resist peer pressure and maintain self-respect.³ While it is important to learn academic skills, it is of equal value to learn refusal skills when faced with situations that may not be beneficial for one's health and well-being.

Refusal Skills can best be developed by embracing the right values. When values are clear and are set, we will have a stronger motivation to say NO to risky behavior because we are saying YES to what's best for us.

YOU CAN SAY NO BECAUSE ...

1. You are created for a _____

You can say NO to risky behavior because you were created for a ______.

2. You are _____

You can say NO to risky behavior because you are ______.

You h	nave a		_
-------------------------	--------	--	---

PRACTICING REFUSAL SKILLS

We have created the acronym S-T-O-P for you to better remember how to refuse sex:

S ______ from situations which can lead to risky sexual behavior.

It is already difficult to refuse sex just by peer pressure, without being under the influence of alcohol or drugs. Do not make it even more difficult by taking in alcohol or drugs that can cloud your decision making.⁴⁵

T ______ up with ______ who want to make the right choices too, and choose to spend more time with them.

You are the average of the five people you spend the most time with. - Jim Rohn

Your choice of friends will affect your decisions regarding drinking alcohol, taking illegal substances, and having risky sexual intercourse.⁶

O ______ your time with activities that would benefit your future.

Intentionally plan to build your skills. Joining activities that would benefit your future lessens time for other activities that may lead to risky sexual behaviors.

P _____ saying "No" in a _____ manner

Saying "No", accompanied by a convincing tone and body language, is enough to deter those who pressure you to have sex, get drunk, or take illegal drugs.

⁴ Cottler LB, Helzer JE, Tipp JE. Lifetime patterns of substance abuse among general population subjects engaging in high risk sexual behaviors: Implications for HIV risk. American Journal of Drug and Alcohol Abuse. 1990; 16(34):207-222.
 ⁵ Biglan A, Metzler CW, Wirt R, Ary D, Noell J, Ochs L, French C, Hood D. Social and behavioral factors associated with high

¹ Merriam-Webster Dictionary. 1828.

² Wansink, Brian and Jeffrey Sobal. Mindless Eating: The 200 Daily Food Decisions We Overlook. 2007.

³ Webb, Frances Sizer. Just the Facts 101 Health: Making Life Choices, First Edition. 2017.

Bigian A, Metzler CW, wirt R, Ary D, Noeil J, Ochs L, French C, Hood D. Social and benavioral factors associated with high risk sexual behavior among adolescents. Journal of Behavior Medicine. 1990; 13:245-261.

⁶ Brown BB, Larson J. Handbook of adolescent psychology, Vol 2: Contextual influences on adolescent development. 3rd. Hoboken, NJ US: John Wiley & Sons, Inc; 2009. Peer relationnships in adolescents; pp. 74-103.

Here are effective ways to refuse that work and ineffective ways to say "No" that you need to avoid⁷:

More Effective	Less Effective
Assertive (standing up straight; looking them right in they eye; speaking in a	Aggressive (pushing people around; threatening or blaming them; putting them down; acting angry)
polite; choosing words wellinstead of a wimpy "I can't", say "I don't want to.")	Avoiding (changing the subject; staying away from the issue; trying to distract the person)
	Know-it-all (giving a lot of facts; acting superior; judging people; telling them what they are feeling)
	Passive (saying "No" weakly; mumbling, making lame excuses; acting like a wimp)

We have listed the usual reasons your boyfriend or girlfriend may say to convince you to have sex, and we have also given possible responses to make your refusal effective⁸:

Reason	Response		
"Aw come on! Everybody does it!"	"I'm not everybody. Besides, not everybody does it, even those who say they do."		
"If you loved me, you'll have sex with me."	"If you loved me, you wouldn't pressure me when I'm not ready to have sex."		
"If you won't have sex with me, I'll break up with you."	"If being in a relationship with you means I have to have sex with you when I don't want to, then let's break up."		
"Why won't you have sex with me?"	"Because I don't want to." You don't need to explain further.		
"We've had sex before; why say 'No' now?"	"I have the right to change my mind. It's my body and my life and I want to wait for the right time to have sex again."		
"Let's do it! You know you want to!"	"What part of 'NO' don't you understand?"		
"Your parents are out all night; let's go back to your house and make out."	"My parents don't want anyone to come over without them to watch over me."		

NOTE: While these tips are helpful for you in refusing future invitations to have sexual intercourse, get drunk or take illegal drugs, we also acknowledge that some of you may have already experienced being forced into one of these situations and you were physically helpless to prevent it. In this case, we encourage you to find a trusted adult to talk to and get help from.

SUMMARY

In order for you to build your refusal skills, always remember to A-C-T:

A ______ your PURPOSE and your VALUE. You are created for a reason and you are worth it. You have to be the first person to be convinced of this because what you believe affects how you behave.

C ______ the right thing to do for your FUTURE. *Remember to S-T-O-P and say "Yes" to a bright tomorrow.*

T ______ to TRUSTED ADULTS and seek guidance or help. *If you constantly find yourself in a situation* where your choice is taken away from you, remember there are people who care about you who are willing to help you.



There are many websites if you need additional references, here are some of them:

http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.YouthSkillsDetail&PageID=121 http://depts.washington.edu/taware/list.cgi?topic=20

http://www.healthunit.org/school/resources/elementary/grade8pdf/8_sub4_193-195.pdf http://www.journeyworks.com/Abstinence/products/31/ http://www.wagmuna.com/

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⁷ The Right to Resist: Knowing your No's. The Cool Spot. <u>https://www.thecoolspot.gov/right3.aspx</u>.

⁸ Caring for your Teenager. American Academy of Pediatrics. 2003.

Annex C: Assessing My Risk

Assessing My Risk: "Safe ba Ako?"

The questions in this tool were made to help you decide on the type of help or services that you need regarding HIV and STI. It is important for you to be honest with yourself as you answer. Your teacher will not ask you to write your name or submit this paper. No one should force you to share your answers. However, **you may choose to discuss your answers with your parents, teachers or other trusted adults.**

After each question, check \bowtie the box that is appropriate for you. There are no right or wrong answers, and this will not be included in your grades. If there are questions that make you uncomfortable, you can decide not to answer the question. However, please read the *italicized* text after the choices.

1. It is important to understand what can happen if you have sex and to decide when you are ready. Do you think you are ready to have sex?

- □ Yes To protect yourself from HIV and STI: (1) **B**e faithful to your partner <u>and</u>, (2) practice **C**orrect and **C**onsistent **C**ondom Use.
- □ No It's okay to say no. Even if other people tell you to do so, you do not need to start engaging in sexual intercourse. Wait until you are ready to have sex.

2. It is important to protect yourself from HIV and other STI during sex. Have you had sex (oral, vaginal, or anal sex)? If yes, did you or your partner use a condom?

- □ I haven't had sex with anyone.
- □ I have experienced having sex; and my partner/s and I <u>always</u> use condoms.
- □ I have experienced having sex; and my partner/s and I sometimes use condoms.
- □ I have experienced having sex; and my partner/s and I have never used a condom.

If you answered that you have not had sex with anyone ("Abstinence") or that you always use condoms ("Correct and Consistent Condom Use"), these can protect you from HIV or STI. Remember the A-B-C-D-E.

3. Have you experienced using prohibited drugs or getting drunk / tipsy because of alcoholic drinks? If yes, have you had sex while high or drunk?

- □ I have never used drugs or gotten drunk.
- □ I have used drugs or have gotten drunk **but I have never had sex while high or drunk**.
- □ I have used drugs or have gotten drunk and I have had sex while high or drunk.

Using prohibited drugs or being drunk affects your ability to make decisions. This may cause you to make decisions that you may regret in the future. Avoid using prohibited drugs or drinking alcoholic drinks. Be responsible.

4. Having sex is a personal decision. However, there are certain instances when a person is forced to have sex against his or her will. Examples include:

- someone forced by their partner (boyfriend / girlfriend) to have sex with them;
- someone threatened physically or verbally if they don't agree to have sex;
- someone who was given drugs or alcohol, and then forced to have sex.

Do you know anyone who was forced to have sex against his or her will?

□ No □ Yes

Remember that it is okay to say no if you do not want to have sex or if you are not ready. Your partner, friend, and anyone else should respect your decision. Do not be afraid to tell them that you do not want to have sex.

If you have experienced being forced to have sex or if it happens in the future, you do not have to keep it to yourself. You can ask help from your parents, teacher, guidance counselor, or any trusted adult.

In the same way, it is important for you to respect the decision of your partner about having sex. Only your partner can say if he or she is ready or wants to have sex. Do not force anyone to engage in sexual activities or sexual intercourse. No means no.

5. Have you experienced any of the following symptoms?

- □ "Tulo" or unusual discharges from my genitals or rectum
- □ "Sugat" or sores in my genitals or anus
- "Kulugo" or warts in my genitals or anus
- □ I have not experienced any of the symptoms above.

5.1. If you have experienced one or more symptoms above, what did you do?

- □ I did not do anything about the symptoms I experienced.
- □ I told my friend/s.
- I told my parents or other trusted adults.
- □ I consulted a doctor.
- Others: _____

The symptoms listed above are symptoms of possible STI. As discussed in Lesson 3, only a doctor can diagnose if a person has STI and determine the appropriate treatment. Tell your parents or a trusted adult if you experience any of the symptoms listed above and consult a doctor.

Safe Ba Ako? (English version) | 2

Safe Ba Ako? (English version) | 1

6. In Lesson 2, we discussed that HIV may be transmitted through 1) unprotected vaginal, anal, or oral sexual intercourse; 2) sharing of HIV-contaminated needles; 3) transfusion of HIV-contaminated blood; and 4) HIV-positive mother-to-child transmission during pregnancy, childbirth, or breastfeeding.

With these in mind, do you think you are at risk of HIV infection?

□ No □ Yes

If you feel that you are at risk of having an HIV infection, you need to get an HIV test. You can also avail of the services we discussed in Lesson 4 (example: HIV testing services, free HIV and STI consultations at the Social Hygiene Clinic).

How do you feel about your answers? Regardless of what your past or present experiences may be, you have the power to decide what to do next.

To help you make these big and little choices every day, remember:

- You were created for a **PURPOSE**. You are up for an exciting ride to discover what your purpose is.
- You are VALUABLE. Regardless of what other people say, you are worthy and valuable.
- You have a **FUTURE** ahead of you. Do not lose hope for a bright future even if you may have had bad experiences in the past.

When you think about your future and make wise decisions, A-C-T now.

- **A** cknowledge your *PURPOSE* and your *VALUE*.
- **C** hoose the right thing to do for your *FUTURE*.
- **T** alk to trusted adults and seek guidance or help.

The next activity will allow you to imagine your future and the things you have to say yes to or say no to, in order to achieve your dreams.



Activity 6. The future I see for myself!

Write your biggest dream for each stage of your life. Complete the timeline below by drawing or describing what milestones you want to achieve by the time you are age: 20, 25, and 30 years old.



Now, write down your present age inside the blank circle. You have to remember that the decisions that you make **today** will affect the future you want to achieve.

You were created by God for a purpose. Do not let anyone or anything steal or destroy your dreams and the life you were destined to have. What are the things or events that will **prevent you from achieving your dreams**? With these in mind, list 3 things you shouldn't do or should say NO to.

3 things I will say NO to:

Decision

γ



Think about all your answers and decide on what your next steps would be. You are encouraged to share your concerns or questions with a trusted adult or health professional but the decision is still up to you. You may select more than one answer from the list below.

- □ I will research about HIV and STI.
- □ I will talk to my parents or other trusted adults.
- I will visit the school clinic.
- I will visit a Social Hygiene Clinic (SHC) or consult a doctor.
- Other answer: _____

Safe Ba Ako? (English version) | 3

Safe Ba Ako? (English version) | 4

Annex D: Sample Tests

Sample Test 1

Name:		Grade Level:	Age:	10. The most effective m	nethod of preventing	HIV infection is	
School:			Section:	A. Be faithful	B. Condom	C. Abstinence	D. Don't use drugs or alcohol
Date:		Score:		11. Correct and consiste A. Condom	ent use of is B. Pills	a reliable method to C. Injectables	prevent the spread of HIV and STI. D. IUD
	ncircle the letter with	the best answer		12. How is HIV diagnose A. X-ray	ed? B. Blood test	C. Urine test	D. Physical examination
		The best answer.					
1. It is a collection of cel	Is and substances in	nside the body that o	defends the body against foreign	13. Which one is a comr A. Tuberculosis	non Sexually Trans B. Bronchitis	mitted Infection? C. Syphilis	D. Diarrhea
A. Red blood cell	s B. Antibodies	C. Antigen	D. Immune system				
2. It is a virus that weak	ens the body's imm	une system.		14. Which one is a comr A. Fever	non STI symptom? B. Diarrhea	C. Headache	D. Genital discharge / tulo
A. Influenza	B. HIV	C. Syphilis	D. Gonorrhea	15. What should you do	if you have an STI?	,	
3. It is a condition where	in the immune syste	em of a person infec	ted with HIV is already weak or	A. Go to a doctor	B. Ask friends	C. Drink buko juic	e D. Search the internet
destroyed, and the bo A. AIDS	bdy is infected with r B. HIV	nany infections. C. STI	D. Cancer	16. The Republic Act (R A. R.A. 8504	.A.) about AIDS Pre B. R.A. 2015	evention and Control in C. R.A. 8034	n the Philippines. D. R.A. 2004
4. These white blood ce	lls are destroved by	the human immuno	deficiency virus.				
A. DC4 cells	B. WBA cells	C. CD4 cells	D. Red blood cells	17. Government clinics v A. School Clinic	which specialize in t B. Social Hygene	he provision of free se e Clinic C. Baranga	ervices related to STI and HIV. ay Clinic D. Tuberculosis Clinic
5. High concentration of	HIV is found in four	body fluids which in	nclude semen, breastmilk, vaginal	18. What does "B" mear	in the ABCDE of H	IIV prevention?	
fluids and A. Blood	 B. Saliva	C. Urine	D. Sweat	A. Be with many	partners B. Be edu	icated C. Be faith	ful D. Bond with friends
6. Body fluids carrying ⊢ A. Enter	IV need to B. Stay inside	_ the body of a pers C. Exit	son with HIV to infect another person. D. Divide	19. According to the AID A. School enrolm	DS Law, in the Philip ent B. Applying fo	pines, HIV testing <u>car</u> r a job C. Health i	nnot be required for the following: nsurance D. All situations (A,B,C)
7 HIV can be transmitte	d through which of t	the following:		20. If a person is expelle	ed from school beca	use he or she has HI	V, this is, and is
A. Holding hands	B. Eating food	C. Mosquito bites	D. From HIV positive mother to baby	A. Voluntary	B. Discriminat	ion C. Confider	ntial D. Informed consent
8. This is a combination A. Antihistamine	of medicines which B. Paracetamol	slow down the replic C. Antibiotics	cation of HIV in the body. D. Antiretrovirals				
9. In the Philippines, wh	at is the most comm	on way of HIV trans	mission?				

A. Unprotected sex B. Mosquito bites C. Sharing of needles D. Use of public toilet bowls

Sample Test 2

Name:	Grade Level:	Age:	II. TRUE OR FALS wrong.	E: Write TRUE if the statement is correct, and FALSE if the statement is
School:		Section:	11	A person can get infected with HIV if he or she uses a public toilet how
Date:	Score:			used by a person with HIV.
I. IDENTIFICATION: (Choose the correct answer from the given cho	pices inside the box.	12.	The treatment for people with HIV that can stop the replication of the virus in the body is called Antiretroviral Therapy (ART).
CONDOM IMMUNE SYSTEM	ABSTINENCE ANTIBIOTICS GONORRHEA CD4 CELLS CHEMOTHERAPY LINPROTECTI	SEMEN AIDS ED SEX HEBPES	13.	RA 8504 is the law about AIDS Prevention and Control in the Philippines.
ANTIRETROVIRALS	HIV BREASTFEED	ING SALIVA	14.	The AIDS Law allows us to tell other people about the HIV status of a person diagnosed with HIV without their consent.
1.	The high concentration of HIV is found in four blood,, breast milk and vaging	body fluids. These are Il fluids.	15.	For HIV transmission to happen, these four principles must be fulfilled: Exit, Sustain, Stable, Enter.
2. `	The most effective method to prevent HIV tra	nsmission.	16.	HIV Testing Services (HTS) is the only way to know if you have HIV.
3. /	A combination of medicines which slows dow	n the replication of HIV.	17.	Social Hygene Clinics are government clinics which specialize in the provision of free services related to STI and HIV.
4. I	t is a type of white blood cell that protects the decreases in number during HIV infection.	body against infection and	18.	A person can get infected with HIV through mosquito bites.
5.	HIV can be transmitted from mother to child d and	uring pregnancy, delivery,	19.	There is a cure for HIV infection.
6.	It is a condition of a person infected with HIV system is already weak or destroyed, and the infections.	when his or her immune body can no longer fight	20.	A person with STI has a higher risk of getting infected with HIV.
7.	Infections that are passed through unprotecte examples of this infection.	d sex. HIV and syphilis are		
8.	In the Philippines, this is the most common w	ay of HIV transmission.		
9. /	A common STI with symptoms of genital disc	narge with pus or <i>tulo</i> .		
10.	Correct and consistent use of toprevent the spread of HIV as well as other	_ is a reliable method STI.		

ANSWER KEY for Sample Test 1:		ANSWER KEY for Sample Test 2:		
1. [2. E 3. / 4. () 5. / 6. () 7. [8. [9. / 10. () 11. / 12. E 13. () 14. [15. / 16. / 17. E 18. () 19. [20. E	 immune system HIV AIDS CD4 cells blood exit from HIV-positive mother to her child antiretrovirals unprotected sex abstinence condom blood test syphilis genital discharge / tulo A go to a doctor RA 8504 Social Hygiene Clinic be faithful all situations discrimination 	 SEMEN ABSTINENCE ANTIRETROVIRALS CD4 CELLS BREASTFEEDING AIDS STI UNPROTECTED SEX GONORRHEA CONDOM 11. False True False False False True 		

If you or your students want to know more about the HIV epidemic in the Philippines, contact:

National HIV & STI Surveillance and Strategic Information Unit

Epidemiology Bureau, Department of Health 2nd Floor, Bldg. 19, San Lazaro Compound, Sta. Cruz, Manila 1003, Philippines

HIVepicenter@gmail.com (02) 651-7800 loc 2952



www.facebook.com/hivepicenter

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Writers

Jessica Raphaela G. Mirano, RN – Department of Health, Philippines Genesis May J. Samonte, MD, MSc, PHSAE – Department of Health, Philippines

Core Contributors and Editorial Team

Department of Health: Jose Gerard B. Belimac, MD Mary Joy A. Morin, RN Noel S. Palaypayon, RN, MGM-ESP Lyka Eunice F. Trinidad, RN Natasha Denise S. Montevirgen, RN Mikael N. Navarro

Educators:

Jasmin J. Petilos – Batasan Hills National High School, Quezon City Soshiel S. Amparo, DVM – Batasan Hills National High School, Quezon City Joann C. Estacio – Commonwealth High School, Quezon City Karen Y. Belagan, RN – Quezon City Division of City Schools Narciso E. Costales, RN – Quezon City Division of City Schools Josefina Llarena-Pabellon, PhD

Local Government: Rolando V. Cruz, DMD, PHSAE – Quezon City Health Department Ilya A. Tac-an, MD, PHSAE – Cebu City Health Department

UN Agencies: Maria Lourdes L. Quintos – UNAIDS Philippine Country Office Zimmbodilion Y. Mosende – UNAIDS Philippine Country Office Mario B. Balibago – UNICEF Philippines Aiza F. Baldonado – UNICEF Philippines

Graphics and Cover Design

John Edgar S. Tiu, RN

Contributors

Quezon City Division of City Schools: Dr. Elizabeth E. Quesada, CESO V – Superintendent Philip V. Austria Aurea M. Lopez, MD

Quezon City Health Department: Verdades P. Linga, MD, MPH – City Health Officer III Monina C. Santos, MD Xeres A. Sabarre, MD John Kennedy C. Jardenil Romulo M. Gojar

David F. Bernardo Ria Mae G. Corda Kara A. De Leos Emmanuelle M. Gomez Danna G. Tabat Department of Health: Patricia Isabel G. Amita, RN Amirah D. Andres, RN Abigail Candelaria-Aquino, RN Arianne May J. Balaoing Bettina Kaye D. Castañeda, RN Richard L. Lepardo, RN Danica Shahana G. Magtubo, RPm Lika P. Mizukoshi, RN Ina Kristina S. Pangan, RN Euli Marie G. Peregrino, RN Jenishia Maria A. Romano, RN Krizelle Anne R. Umali, RSW Ma. Justina G. Zapanta, RN, PHSAE

Noemi Bayoneta-Leis Teresa A. Jopson Ivan Noel G. Olegario, MD

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Batasan Hills National High School

Dr. Diego M. Amid - Principal IV Bonifacio M. Pedrera - *MAPEH Department Head*

MAPEH Teachers: Ranilo B. Ambat Diodisa C. Bangloy Mary Ann A. Bermudez Vanessa P. Bobis Francis R. Candelaria Armando M. Capili Froilan L. Cariño Mary Therese T. Dela Cruz Norman M. Diolanda Meshel F. Mendiola Marina S. Miranda Kurt B. Pastorfide Jasmin J. Petilos Ria Regine R. Reves Aniano C. Riosa

Soshiel S. Amparo - Clinic Teacher/Science

Commonwealth High School

Sheridan G. Evangelista - *Principal* Ester M. Odtujan - *MAPEH Department Head*

MAPEH Teachers: Joann C. Estacio Maria Riza E. Fungo Jellanie O. Lacupanto Chistopher L. Lazaro Lovelie D. Manaay Helen J. Najera Penelope D. Rull Eliodora T. Tababa Gregoria A. Tiaga

Emeline V. Ragasa – School Nurse

Culiat High School

Rosalinda M. Paulino - MAPEH Department Head

MAPEH Teachers: Nerissa P. Balbin Richard T.Butac Clarita Cruz-Cabanganan Claire E. Hernandez Agnes A. Sernadilla Melvin F. Tamundong

Ramon Magsaysay Cubao High School

Luis P. Tagayun - *Principal* Raul C. Cruz - *MAPEH Department Head*

MAPEH Teachers: Loida T. Cossid Ma Grace G. Eugenio Jennifer B. Fajardo Darwin A. Jorda Alex A. Leano Jeffrey M. Murcillo Inocencia V. Perez Angelica Jo T. Ranches