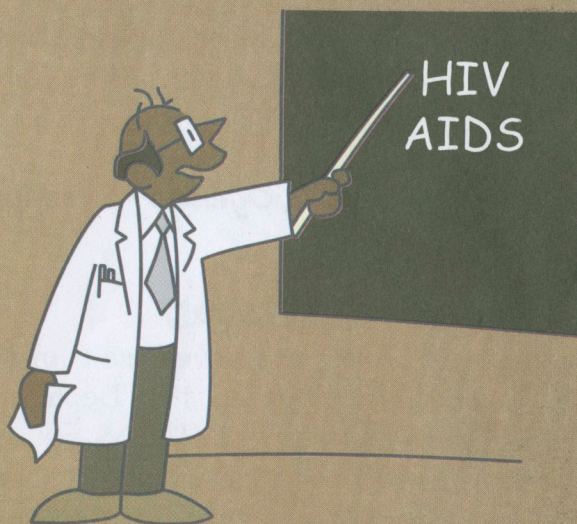


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HIV/AIDS Education



for Schools

University of Nairobi



PREFACE

We are delighted to have had the opportunity of preparing the first edition of this booklet on behalf of the Department of Human Anatomy and the University of Nairobi. We are involved in giving formal HIV/AIDS education to students of medicine, pharmacy, dentistry and nursing, as one of the emergency actions against HIV/AIDS.

We are grateful to first and second year medical students *Matilda Kerubo, Agneta Odera, Desmond Mbondo and Samuel Barae* for the reports and questions which they brought from their grassroots activities.

It is our social responsibility to share our experience freely and contribute to action which must be taken now to curtail the spread of HIV/AIDS through education.

Joseph M. Mungai • Julius A. Ogeng'o • Joseph W. Githaiga
(February 2001)

FOREWORD

When on November 25, 1999, the Government of Kenya declared HIV/AIDS to be a national disaster, the Department of Human Anatomy introduced 35 hours of HIV/AIDS Education to all the first year students of health sciences. One of the most remarkable outcomes of this programme has been the motivation it has given to some of the students to undertake voluntary HIV/AIDS education among the youth, during their free time. Analysis of the questions raised at such grassroots levels have made it clear that HIV/AIDS education is essential for the youth, both in school and out of school.

This booklet is a product of the above experiences, and is part of the University's contribution in supplementing the KIE syllabus for HIV/AIDS education for schools. Its objective is to provide the teacher and pupil with explicit and structured education to

enable them to change their behaviour and make decisions that reduce the risk of acquiring HIV/AIDS.

The University is indebted to the Rockefeller Foundation which provided the grant for the publication of this booklet. This in turn made it possible to distribute it to schools free of charge.

The University is also grateful to PrePress Productions, Nairobi for producing the booklet in colour and providing illustrations, free of charge, as their contribution.

Francis J. Gichaga, Vice-Chancellor

The term AIDS stands for the disease called Acquired Immune Deficiency Syndrome. It is caused by a virus called Human Immunodeficiency Virus (HIV).

DEMYSTIFICATION OF HIV/AIDS

Among the most important components of the body's defence mechanism is a special category of white blood cells called lymphocytes.

HIV infects and takes over the normal survival mechanisms of the lymphocytes making them produce more viral particles. By so doing, it completely incapacitates the body's defence mechanisms. Consequently other disease causing organisms freely invade the body and weakens the immunity further, resulting in death. These diseases include tuberculosis, pneumonia, diarrhoea and others.

**Why is this
disease not
curable?**

Effective drugs and vaccines have been difficult to develop because the virus cannot be destroyed without affecting the host lymphocytes. Furthermore, the virus constantly changes its characteristics.

DEMYSTIFICATION OF FEMALE SEXUALITY

About 90 - 95% of the disease is sexually transmitted. Mothers can transmit it to the unborn baby during pregnancy as well as during birth and breast-feeding. Other modes of transmission include blood transfusion, needles and other sharp instruments. Insect bites do not transmit the virus.



The most important method of controlling HIV/AIDS is therefore changing our sexual habits. In order to achieve this it is necessary to remove the mystery surrounding sexual intercourse. This mystery is partly related to the upright posture of man.

- ◆ With the assumption of the upright posture, the female genitals rotated through 90° so as to face downwards instead of backwards, and thus got out of sight.
- ◆ In order to maintain the upright posture human beings developed large powerful muscles which are responsible for the large protuberance called the buttocks. In the case of the female, this protuberance concealed the genitals altogether.
- ◆ In order to permit passage of the baby's head through the mother's pelvis, the female pelvis is shorter and wider. This wider and shorter pelvis, combined with the relatively large human buttock, is responsible for the gyration and wiggle characteristic of female walking. This is often exaggerated, especially when the women wear high-heeled shoes.

Demystification of sexuality requires clear understanding of the structure and functions of the parts of the human body to which sexuality is strongly attached. These developments are related to human uprightness mentally, physically and spiritually.



PUBERTY AND HIV/AIDS

Puberty is a stage of development that signals sexual maturation. It is marked by a significant rise in sex hormones from the ovaries in girls and the testis in boys. These hormones control the growth of reproduction organs.

These hormones begin to rise at eight years in girls and 1 or 2 years later in boys. They have a profound effect on all body organs including the brain and the nervous system in general. Accordingly, there are physical, mental and emotional changes at puberty.

The physical changes that occur at this stage are varied but in the girls, onset of menstruation is one of the most dramatic changes. Breaking of the voice in boys and occurrence of wet dreams are notable among boys.

Physical Change	Girls	Boys
Rate of growth	Increases	Increases
Body dimensions	Increases in size of hips and thighs	Increase in breadth of shoulders
Distribution of hair	Hair grows in the pubic region, armpits	Hair grows in the pubic region, armpit, and on the chest
Reproductive organs	Breasts increase in size, external genitals increase in size and secretions increase	Penis and testis increase in size and erections may be accompanied by mucoid discharge from the penis
Vocal organs	Voice becomes more shrill	Voice becomes deep
Facial appearance	Pimples begin to grow on the face	Pimples begin to grow on the face
Appetite and food intake	Increases	Increases

Emotional changes

Both girls and boys become more conscious of their gender and feel attracted to each other. They feel like spending a lot of time with each other. There is more attraction to sex related literature, pictures, dances and films. Girls especially start being shy about their breasts, hips, thighs and external genitals. Both boys and girls become relatively rebellious to authority often protesting things that were previously acceptable to them. They may appear openly rude. The moods in both genders become labile i.e. they become more excitable. Some even lose interest in their studies. This is the time they begin to abuse drugs and indulge in sexual intercourse.

This is the time children may begin desiring to spend more time away from home with friends.

It is important to know that these changes are due to hormonal effects on the brain and the individual is often not conscious about them. They are simply responding to new changes in their bodies.



Puberty rites and HIV/AIDS

While puberty signals sexual maturation, puberty rites have traditionally signified readiness for marriage. Puberty rites vary from one community to another. Some communities remove the lower teeth while others circumcise. Others make tattoos or incisions on different areas of the body like the skin of the tummy.

Is the virus transmitted through initiation?

Yes it can be.

For example, traditional circumcision where the knife is shared poses the risk of HIV transmission. Furthermore, these rites give a false sense of adulthood to the young people who then indulge in promiscuous sexual intercourse, and risk contracting HIV. The HIV virus can thus be transmitted by use of unsterilised instruments. Use of clean and sterilised instruments reduces the risk of transmitting the HIV virus.

Management of Adolescence: Action Against HIV/AIDS

Adolescence refers to the process of sexual maturation which occurs in children when sex hormones start increasing in their bodies. It is characterised by rapid growth and represents the most vulnerable period for HIV infection.

Successful management of adolescence depends on proper understanding of the changes occurring with sexual maturation, and the problems associated with them, which are brought about by drastic increases in sex hormones.

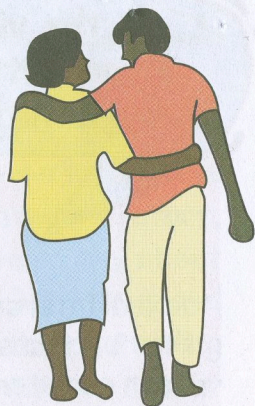
Can kissing transmit HIV?

I am a young lady aged 17 years. I happened to kiss a young man whose gums bleed. Recently I learnt that he is HIV positive. Is there a chance that he transmitted the HIV to me?

If your mouth or lips had sores or bruises, then the infected blood from the bleeding gums may have infected you. If you did not have any sores, and you swallowed the infected blood, the virus would have been killed by the digestive enzymes.

Changing trends in society regarding sexuality

In the traditional cultural sense, sex is preserved for married people for purposes of strengthening their relationship and procreation, with fidelity being an important requirement.



Today, however, sexual intercourse is wrongly used, outside marriage, for recreation and has even been commercialized. Prostitution, including child prostitution, is one of the most obvious manifestations of this change. Reports of adult males engaging in sexual intercourse with children are common in our daily newspapers.

This change in attitude towards sex has been brought about by pornography and mass media, both of which have made sexual intercourse explicit as part of a sexual revolution.

This decontrolled practice of sexual intercourse has three main consequences:

- Sexually transmitted infections, the worst being HIV.
- Unwanted pregnancies
- Marital disharmony
- Traumatization of young girls

COURTSHIP VALUES AND ETHICS

Traditional African communities including Kenyan ones, have had a rich range of programmes for imparting courtship values and education to their youth. Some of the standard aspects of courtship have been incorporated in the following stages of preparation before marriage:

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| <ul style="list-style-type: none"> ◆ Identification of suitable mates. These have often been selected by relatives or close family friends. ◆ Introduction of the selected spouses to each other. ◆ Development of friendship, and later "love". ◆ Information to the families. ◆ Visiting the families by either spouse. | <ul style="list-style-type: none"> ◆ Dowry and brideprice negotiations. ◆ Payment of brideprice/ dowry. ◆ Family consent to the marriage. ◆ Announcement of marriage intention and arrangements for a marriage ceremony. ◆ Marriage ceremony. |
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In order to prepare young people to observe these stages, both girls and boys have been thoroughly educated on matters of sexuality and how to live with their spouses. Such education has been given to the girls by grandmothers and/or aunts. Boys in the same age groups have similarly been educated by grandfathers on how to live as responsible young men. Several forms of initiation have occurred at sexual maturity.

In order that boys and girls get familiar with each other, several supervised activities have been organized for both boys and girls. Such activities have taken the form of:

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| <ul style="list-style-type: none"> a) Courtship dances and/or music b) Drama and concerts c) Sports and other cultural activities | <ul style="list-style-type: none"> d) Stories e) Proverbs f) Sayings g) Poems |
|--|---|

All of these activities have carried strong educational messages. Girls and boys have been trained to interact and know each other without engaging in sexual activity. Boys and girls have been allowed, in some communities, to fondle each other but not to have sex. The modes of dressing, dancing have allowed the boys visual access to the girls' bodies and vice versa. Both the boys and girls have been educated on the importance of safeguarding virginity among girls and they have respected it. Fornication and adultery have been punishable by society, while girls who have retained their virginity till marriage have been celebrities to their families and communities.

Today unfortunately the previous courtship activities are used more for entertainment and competition than for education, and are usually done out of context.

It is therefore regrettable that adolescents are engaged in having sex. They are also doing so with multiple partners. When asked why they do so they give answers which indicate a serious lack of values and ethics to enable them manage the processes of adolescent development.

Some of them say that they engage in sex to demonstrate love. It is important for young people to know that there is much more to love than sex.

Other adolescents say that they have had sex out of curiosity and have found it to be pleasant. Unfortunately this often leads to pregnancy, sexually transmitted diseases and HIV/AIDS.

Some adolescents say that sex just happened or that it was due to overwhelming temptation from members of the opposite sex. This answer is a serious indicator of the need for healthy courtship activities guided by strong values and ethics.

There are also those adolescent girls who say that they accept to have sex to get some money for subsistence. Unfortunately, this is adolescent prostitution which must be avoided by enabling the young girls to go on with education in order to get an acceptable occupation.

The children today learn music, dance and art from magazines and electronic media, many of which are western and may not reflect our culture.

One of the major ways of controlling HIV/AIDS is to develop, promote and apply effective courtship values/ education as has been done by our traditional communities.

Is it true that sex strengthens a relationship? Could there be anything to tie the two people together?

Within marriage, yes. This is because there is more to a relationship than sex.

When people get into a relationship it should be because they like each other, share common interests but not because they can have sex. A relationship built on sex has a shaky foundation because sex is not the concrete of a relationship, but in most cases, the dynamite that blows it apart. Indeed there are other things you can do together like playing games, going to movies, going out for lunch or in case of students, studying together.

Many have equated sex to love but the consequences are devastating. Some are dumped by their 'boyfriends' after sex and, as a result, they feel cheated and used while others become pregnant. The pregnant girl in most cases is dumped on telling her boyfriend about her condition, rejected by the family and cannot continue with her education. One can also get infected with the HIV virus especially with its drastic increase.

STRENGTHENING THE INSTITUTION OF MARRIAGE



Promise of marriage to a girl is a common trick which many young men use when they want to have sex. Marriage is an institution which has legal, social and organizational requirements. It is therefore wrong for a man, young or old, to promise marriage to a young girl simply for the purpose of having sex with her.

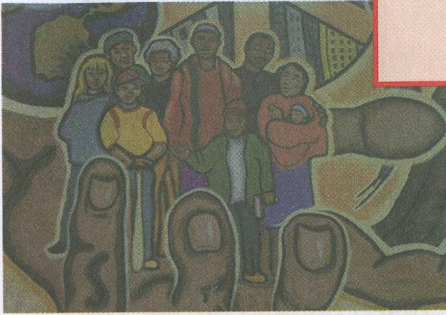
Yet many girls today fall prey to these false promises and they find themselves abandoned with babies to look after or with HIV/AIDS to suffer from.

The requirements for marriage differ from community to community. There are however common steps, which represent the seriousness of marriage. These steps are listed under courtship.

Marriage today is one of the institutions which is threatened by HIV/AIDS. The basic steps listed under courtship are important in helping the marrying couple to understand each other's backgrounds, habits, beliefs, values and ethics that they hold about sexuality, children and permanence of marriage. As the couples adjust to their married status, there is need for them to reinforce their values and ethics for the purpose of avoiding situations such as drunkenness which may lead to irresponsible sexual behaviour with HIV/AIDS.

Upholding the values of the marriage institution and observing the responsibilities and obligations of the institution are a major way of controlling HIV/AIDS.

BALANCING THE FAMILY AND POPULATION DEVELOPMENT



Family development means the changes which occur in and outside marriage when a baby is conceived. The development of the population is dependent on the numbers of children, in families, and their survival. Balancing family and population development means the abilities of families, and the society as a whole to generate preserve and provide the resources which are required to meet basic human needs for all. This is what leads to the need to create a balance between the resources available and the number of children the family has.

Spacing of children is a very important practice in ensuring the health of the mother and children. Education of the mother has been found to be a crucial factor. Even our forefathers recognized the importance of child spacing by ensuring that the interval between births was at least two years. For example, in some cases the birth of the baby was timed to occur when the previous one could be sent with a message to a neighbour. The ability of a child to do that happens after the age of two years. This is easily achieved with babies who have been breast-fed for that period.

HIV/AIDS destabilises and then devastates the family, especially when the breadwinner is overcome by it. Inability to take full care of children results in school dropouts, with some of the youth practising prostitution to survive.

ACTING NOW FOR A FUTURE WITH HIV/AIDS

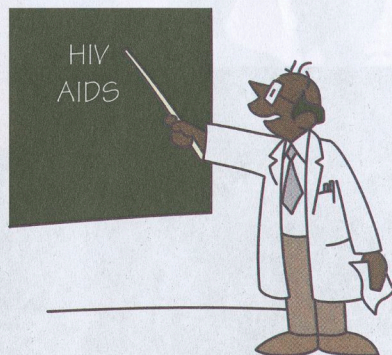
HIV/AIDS is likely to be with humanity for several decades. However, countries will differ in the extent to which they succeed in ensuring that they are not disabled by the epidemic.

In order to achieve that they must bring under control the occurrence of new infections. In the developed countries, this is being achieved effectively through education and treatment with drugs.

In a developing country like Kenya, the use of these drugs is out of reach for the great majority of people because of their high cost. Vaccines are several years away before they can be used on people. Because of these shortcomings, basic and HIV/AIDS education remains the most important action in creating a healthy, virus free and drug abuse free youth.

Although the youth in general need effective HIV/AIDS education, there are three groups of them who require very special "emergency" attention. The first group are those children in whom sex hormones start increasing. These are aged 8 years for girls and 10 years for boys and are therefore found in lower primary classes. They need to be educated about this process and the changes that it will bring about.

The second group are the form one students in secondary schools. They must be educated at the beginning of the year about their continued adolescent status and the dangers of HIV/AIDS. They



need this preventive education as they adjust to new environments and before other people mislead them.

The third group are the first year students in colleges and universities. They need effective HIV/AIDS education as they adjust to urban environments and the freedom they have in these institutions. Heavy investments have been made on them and are therefore expected to survive long enough to play major roles in the society. Some of those who have undergone HIV/AIDS education have become active as HIV/AIDS peer educators for other youth.

In the long run, the aim of the country is to bring HIV/AIDS under control by ensuring that new infections are eliminated or reduced to the barest minimum. The achievement of these long-term goals requires the cooperative effort of all Kenyans. It requires the promotion of the national ideals found in the national motto of Harambee and the national philosophy of mutual social responsibility, operated in peace, love and unity.



Please send your questions and comments on the usefulness, or otherwise, of this booklet to the address below. They will be used in setting the next edition.

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