



UNICEF/01-0168/Prozi

**Why it is important to share
and act on information
about**



HIV/AIDS

People in every country of the world are affected by AIDS (acquired immune deficiency syndrome). HIV/AIDS is becoming more of a global crisis every day. At present, 40 million adults and children are living with HIV/AIDS, and at least 10.4 million children currently under the age of 15 have lost one or both parents to AIDS.

The disease increasingly affects young people. Of the 5 million new infections in 2001, approximately half are among young people between the ages of 15 and 24. Young women are especially vulnerable. An estimated 11.8 million young people are living with HIV/AIDS – 7.3 million young women and 4.5 million young men.

AIDS is caused by the human immunodeficiency virus (HIV). HIV damages the body's defences against other diseases. Medication can help people with HIV/AIDS live longer, but the disease so far has no vaccine or cure.

Prevention is the most effective strategy against the spread of HIV/AIDS. Every person in every country should know how to avoid getting and spreading the disease.

Condoms can save lives by preventing the sexual transmission of HIV. Access to testing and counselling must be given high priority in every country. Everyone has the right to voluntary and confidential counselling and testing for HIV/AIDS and the right to be protected from discrimination of any kind related to her or his HIV/AIDS status.

For those living with or affected by HIV/AIDS, care and compassion are needed. Measures should be taken to remove the social, cultural and political barriers that might block access to HIV/AIDS services and programmes.



Key Messages:

What every family and community has a right to know about

HIV/AIDS

1. AIDS is an incurable but preventable disease. HIV, the virus that causes AIDS, spreads through unprotected sex (intercourse without a condom), transfusions of unscreened blood, contaminated needles and syringes (most often those used for injecting drugs), and from an infected woman to her child during pregnancy, childbirth or breastfeeding.
2. All people, including children, are at risk for HIV/AIDS. Everyone needs information and education about the disease and access to condoms to reduce this risk.
3. Anyone who suspects that he or she might be infected with HIV should contact a health worker or an HIV/AIDS centre to receive confidential counselling and testing.
4. The risk of getting HIV through sex can be reduced if people don't have sex, if they reduce the number of sex partners, if uninfected partners have sex only with each other, or if people have safer sex – sex without penetration or while using a condom. Correct and consistent use of condoms can save lives by preventing the spread of HIV.





5. Girls are especially vulnerable to HIV infection and need support to protect themselves and be protected against unwanted and unsafe sex.
6. Parents and teachers can help young people protect themselves from HIV/AIDS by talking with them about how to avoid getting and spreading the disease, including the correct and consistent use of male or female condoms.
7. HIV infection can be passed from a mother to her child during pregnancy or childbirth or through breastfeeding. Pregnant women or new mothers who are infected with HIV, or suspect that they are infected, should consult a qualified health worker to seek testing and counselling.
8. HIV can be spread by unsterilized needles or syringes, most often those used for injecting drugs. Used razor blades, knives or tools that cut or pierce the skin also carry some risk of spreading HIV.
9. People who have a sexually transmitted infection (STI) are at greater risk of getting HIV and of spreading HIV to others. People with STIs should seek prompt treatment and avoid sexual intercourse or practice safer sex (non-penetrative sex or sex using a condom).





Supporting Information

HIV/AIDS

1. AIDS is an incurable but preventable disease. HIV, the virus that causes AIDS, spreads through unprotected sex (intercourse without a condom), transfusions of unscreened blood, contaminated needles and syringes (most often those used for injecting drugs), and from an infected woman to her child during pregnancy, childbirth or breastfeeding.

AIDS is caused by the human immunodeficiency virus (HIV), which damages the body's defence system.

People infected with HIV usually live for years without any signs of the disease. They may look and feel healthy, but they can still pass on the virus to others.

AIDS is the late stage of HIV infection. People who have AIDS grow weaker because their bodies lose the ability to fight off illnesses. In adults, AIDS develops 7 to 10 years after infection, on average. In young children it usually develops much faster. AIDS is not curable, but new medicines can help people with AIDS live healthier for longer periods.

In most cases, HIV is passed from one person to another through unprotected sexual intercourse, during which the semen, vaginal fluid or blood of an infected person passes into the body of another person.

HIV can also pass from one person to another through the use of unsterilized needles and syringes (most often those used for injecting drugs), razor blades, knives or other instruments for injecting, cutting or piercing the body, and through transfusions of infected blood. All blood for transfusions should be screened for HIV.



It is *not* possible to get HIV/AIDS from touching those who are infected. Hugging, shaking hands, coughing and sneezing will not spread the disease. HIV/AIDS cannot be transmitted through toilet seats, telephones, plates, glasses, eating utensils, towels, bed linen, swimming pools or public baths. HIV/AIDS is *not* spread by mosquitoes or other insects.

2. All people, including children, are at risk for HIV/AIDS. Everyone needs information and education about the disease and access to condoms to reduce this risk.

Babies and young children living with HIV/AIDS have special needs for good nutrition, immunization and regular health care to avoid complications from common childhood illnesses, which can be fatal. If the child is infected, it is likely that the mother, and probably also the father, is infected. Home care visits might be needed.

In countries with high rates of HIV infection, children are not only at risk of being infected, but they are also affected by the impact of HIV/AIDS on their families and communities.

- If children lose parents, teachers and caregivers to HIV/AIDS, they will need help in understanding what is happening and dealing with their loss and grief.
- Orphaned children might have to assume responsibilities as the head of the household and will undoubtedly face great economic difficulties. If orphaned children are cared for by others, then that family's limited resources must stretch to accommodate the additional needs of these children.
- Children living with HIV/AIDS or with families affected by HIV/AIDS may be stigmatized or isolated from their community and denied access to health services and school. Good-quality training on HIV/AIDS for teachers and peer educators can increase understanding and compassion and lessen discrimination.



Efforts should be made to keep HIV/AIDS-affected families together. Efforts should also be made to avoid institutionalizing orphaned children. Orphans are less traumatized if they are cared for by the extended family or the community.

Few young people receive the accurate and appropriate information they need. School-aged children should be provided with age-appropriate information on HIV/AIDS and life skills *before* they become sexually active. Education at this stage has been shown to delay sexual activity and to teach responsibility.

Children living in institutions, on the streets or in refugee camps are at even greater risk of being infected with HIV than are other children. Support services need to be provided accordingly.

3. Anyone who suspects that he or she might be infected with HIV should contact a health worker or an HIV/AIDS centre to receive confidential counselling and testing.

HIV counselling and testing can help in the early detection of HIV infection and in enabling those who are infected to get the support services they need, manage other infectious diseases they might have, and learn about living with HIV/AIDS and how to avoid infecting others. Counselling and testing can also help those not infected to remain uninfected through education about safer sex.

If the result of an HIV/AIDS test is negative, this means the person tested is not infected or it is too early to detect the virus. The HIV blood test may not detect infection up to the first six months. The test should be repeated six months after any possible exposure to HIV infection. Since an infected person can transmit the virus at any time, it is important to use a condom during sex or to avoid penetration.

Families and communities should demand and support confidential HIV/AIDS counselling, testing and information to help protect adults and children from the disease.



An HIV/AIDS test can help couples decide whether to have children. If one partner is infected, he or she could infect the other while attempting to conceive.

It is possible to stop HIV from spreading to the next generation if young people know the facts about HIV transmission, abstain from sex, and have access to condoms.

4. The risk of getting HIV through sex can be reduced if people don't have sex, if they reduce the number of sex partners, if uninfected partners have sex only with each other, or if people have safer sex – sex without penetration or while using a condom. Correct and consistent use of condoms can save lives by preventing the spread of HIV.

Mutual fidelity between two uninfected partners protects them both from HIV/AIDS.

The more sex partners people have, the greater the risk that one of them will have HIV/AIDS and pass it on. However, anyone can have HIV/AIDS – it is not restricted to those who have many sex partners.

- A blood test is the most accurate way to tell if someone is infected with HIV. An infected person may look completely healthy.

Unless partners have sex only with each other and are sure that they are both uninfected, they should practice safer sex. Safer sex means non-penetrative sex (where the penis does not enter the mouth, vagina or rectum) or the use of a new latex condom for every act of intercourse. (Latex condoms are less likely to break or leak than animal-skin condoms or the thinner 'more sensitive' condoms.) Condoms should never be re-used.

- A condom should always be used during all penetrative sex unless it is absolutely certain that both partners are free of HIV infection. A person can become infected through even one occasion of unprotected penetrative sex (sex without a condom).



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- Condoms must be used for vaginal and anal intercourse for HIV prevention.

Condoms with lubrication (slippery liquid or gel) already on them are less likely to tear during handling or use. If the condom is not lubricated enough, a 'water-based' lubricant, such as silicone or glycerine, should be added. If such lubricants are not available, saliva can be used. Lubricants made from oil or petroleum (cooking oil or shortening, mineral or baby oil, petroleum jellies such as Vaseline, most lotions) should never be used because they can damage the condom. A well-lubricated condom is absolutely essential for protection during anal intercourse.

- HIV can be transmitted through oral sex. Hence, a condom should be used on a man, and a flat piece of latex or 'dam' on a woman.

Because most sexually transmitted infections (STIs) can be spread through genital contact, a condom should be used before genital contact begins.

Sex without penetration is another way to have safer sex that greatly decreases the risk of getting infected with HIV (though even this does not protect against all STIs).

A safe alternative to the male condom is the female condom. The female condom is a soft, loose-fitting polyurethane sheath that lines the vagina. It has a soft ring at each end. The ring at the closed end is used to put the device inside the vagina and to hold it in place during sex. The other ring stays outside the vagina and partly covers the labia. Before sex begins, the woman inserts the female condom with her fingers. Unlike the male condom, the female condom can be used with any



lubricant – whether water-based, oil-based or petroleum-based – because it is made from polyurethane.

Drinking alcohol or taking drugs interferes with judgement. Even those who understand the risks of AIDS and the importance of safer sex may become careless after drinking or using drugs.

5. Girls are especially vulnerable to HIV infection and need support to protect themselves and be protected against unwanted and unsafe sex.

In many countries, HIV rates are much higher among teenage girls than teenage boys. Teenage girls are more susceptible to HIV infection because:

- young girls may not understand the risk or may be unable to protect themselves from sexual advances
- their vaginal membranes are thinner and more susceptible to infection than those of mature women
- they are sometimes targeted by older men who seek young women with little or no sexual experience because they are less likely to be infected.

Girls and women have the right to refuse unwanted and unprotected sex. Parents and teachers should discuss this issue with girls and boys to make them aware of girls' and women's rights, to teach boys to respect girls as equals, and to help girls avoid or defend themselves against unwanted sexual advances.



6. Parents and teachers can help young people protect themselves from HIV/AIDS by talking with them about how to avoid getting and spreading the disease, including the correct and consistent use of male or female condoms.

Young people need to understand the risks of HIV/AIDS. Parents, teachers, health workers, guardians or the person in the community in charge of rites of passage can warn young people about the risk of HIV/AIDS, other STIs and unplanned pregnancy.

It can be awkward to discuss sexual issues with young people. One way to begin the discussion with school-aged children is to ask them what they have heard about HIV/AIDS. If any of their information is wrong, take the opportunity to provide them with the correct information. Talking with and listening to young people is very important. If the parent is uncomfortable with the discussion, he or she can ask a teacher, a relative or someone who is good at discussing sensitive issues for advice on how to talk to the child about this.

Young people need to be informed that there is no vaccination and no cure for HIV/AIDS. They need to understand that prevention is the only protection against the disease. Young people also need to be empowered to refuse sex.

Children need to know that they do not run the risk of getting HIV from ordinary social contact with children or adults who are HIV infected.

Those living with HIV/AIDS need care and support. Young people can help by showing them compassion.



7. HIV infection can be passed from a mother to her child during pregnancy or childbirth or through breastfeeding. Pregnant women or new mothers who are infected with HIV, or suspect that they are infected, should consult a qualified health worker to seek testing and counselling.

The most effective way to reduce transmission of HIV from the mother to the child is to prevent HIV infection in women.

Empowering women and promoting safer sex, condom use and better detection and treatment of STIs can reduce HIV infection in women. If a woman discovers that she is HIV positive, she needs emotional support and counselling to help her make decisions and plan for her future. Community support groups and NGOs can support women in making these decisions.

Pregnant women need to know:

- that treatment with specified medicines during pregnancy can greatly reduce the risk of passing the infection to the infant
- that special care during pregnancy and delivery can reduce the risks of passing the infection to the infant.

New mothers need to know the different options for feeding their infants and the related risks. Health workers can assist in identifying a feeding method that can maximize the infant's chance of growing up healthy and free of HIV.

Babies born to women who have not received medication and are infected with HIV have about a 1-in-3 chance of being born with HIV. More than two thirds of the infants infected with HIV may die before they are five years old.



8. HIV can be spread by unsterilized needles or syringes, most often those used for injecting drugs. Used razor blades, knives or tools that cut or pierce the skin also carry some risk of spreading HIV.

An unsterilized needle or syringe can pass HIV from one person to another. Nothing should be used to pierce a person's skin unless it has been sterilized.

People who inject themselves with drugs or have unprotected sex with injecting drug users are at high risk of becoming infected with HIV. People who inject drugs should always use a clean needle and syringe, and never use another person's needle or syringe.

Injections should be given only by a trained health worker. For each child or adult being immunized, a new or fully sterilized needle and syringe should be used.

Sharing needles and syringes with anyone, including family members, may transmit HIV or other life-threatening diseases. No one should share needles or syringes. Parents should ask the health worker to use a new or sterilized needle for every person.

Any kind of cut using an unsterilized object such as a razor or knife can transmit HIV. The cutting instrument must be fully sterilized for each person, including family members, or rinsed with bleach and/or boiling water.

Any instrument that is used to cut a newborn's umbilical cord must be sterilized. Particular care should be taken when handling the placenta and any blood from the delivery. Protective (latex) gloves should be used if available.

Equipment for dental treatment, tattooing, facial marking, ear piercing and acupuncture is not safe unless the equipment is sterilized for each person. The person performing the procedure should take care to avoid any contact with blood during the procedure.



9. People who have a sexually transmitted infection (STI) are at greater risk of getting HIV and of spreading HIV to others. People with STIs should seek prompt treatment and avoid sexual intercourse or practice safer sex (non-penetrative sex or sex using a condom).

Sexually transmitted infections (STIs) are infections that are spread through sexual contact, either through the exchange of body fluids (semen, vaginal fluid or blood) or by contact with the skin of the genital area (particularly if there are lesions such as blisters, abrasions or cuts, often caused by the STI itself).

STIs often cause serious physical suffering and damage.

Any STI, such as gonorrhoea or syphilis, can increase the risk of catching or transmitting HIV. Persons suffering from an STI have a 5 to 10 times higher risk of becoming infected with HIV if they have unprotected sexual intercourse with an HIV-infected person.

- Correct and consistent use of latex condoms when engaging in sexual intercourse – vaginal, anal or oral – can greatly reduce the spread of most STIs, including HIV.



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- People who suspect that they have an STI should seek prompt treatment from a health worker in order to be diagnosed and get treatment. They should avoid sexual intercourse or practice safer sex (non-penetrative sex or sex using a condom). If found to have an STI, they should tell their partner. If both partners are not treated for an STI, they will continue infecting each other with the STI. Most STIs are curable.

A man infected with an STI may have pain or discomfort while urinating; discharge from his penis; or sores, blisters, bumps and rashes on the genitals or inside of the mouth. A woman infected with an STI may have discharge from the vagina that has a strange colour or bad smell, pain or itching around the genital area, and pain or unexpected bleeding from the vagina during or after intercourse. More severe infections can cause fever, pain in the abdomen, and infertility. However, many STIs in women produce no symptoms at all – and some STIs in men also may not have any noticeable symptoms.

Also, not every problem in the genital area is an STI. There are some infections, such as candidiasis and urinary tract infections, that are not spread by sexual intercourse but cause great discomfort in the genital area.

The traditional method of diagnosing STIs is by laboratory tests. However, these are often unavailable or too expensive. Since 1990, WHO has recommended 'syndromic management' of STIs in people with symptoms of STI. The main features of syndromic management are:

- classification of the main germs by the clinical syndromes produced



- use of flow charts derived from this classification to manage a particular syndrome
- treatment for all important causes of the syndrome
- notification and treatment of sex partners
- no expensive laboratory procedures.

The syndromic approach using flow charts offers accessible and immediate treatment that is cost-effective and efficient.

