HIV/AIDS
PREVENTION EDUCATION
TEACHER’S GUIDE
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Characters in the Pictures
Page 13 No. Here you are./ wonderful/ come on / once again
Page 15 Century 20

2
Introduction to the Author

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Dr. He has worked in the Child and Adolescent Health Institute at Beijing University for 10 years on health promotion programmes. She has implemented large-scale surveys on sex and HIV/AIDS prevention aimed at university students and middle school students. Also, she has been involved with health education to handicapped children and primary school students. Dr. He is author of nine publications including *HIV/AIDS Prevention Education Teacher’s Guide*, 2000 and *Children, Health and Science*, 1998. She has published over 20 papers.

Since 1996, Dr. He has been a Programme Officer in UNICEF on HIV/AIDS.
Foreword

‘We, the youth of our country, can make a difference. We can stop the spread of HIV infection.’ This is one of the slogans for World AIDS Day 1999.

It demonstrates the determination of a great number of youth today to prevent AIDS. However, AIDS is a growing epidemic around the world, undermining survival and happiness of families and eroding the work force and the economy in society. Tragically, children carry a great burden of the epidemic: worldwide, more than 8 million children have had to grow up without mothers, and they often suffer from discrimination, malnutrition and a heavier workload.

UNICEF is the lead United Nations organization for children. Based on the provisions of the Convention on the Rights of the Child, UNICEF promotes the concept that the survival, protection, development and participation of children are universal rights of every child. Hence, the threat of AIDS requires more effective collaboration between UNICEF and other international, government and non-governmental organizations in order to operate and target more effective AIDS programs.

Political commitment from a country’s highest level of leadership is crucial for effective prevention services. Public information and education on AIDS are essential to combat the disease. Involving young people in prevention activities is essential if they are to be a positive force for change and the future of their country.

The cost of including HIV education in the school curriculum is marginal. The benefits to society are immense. The Life Skills educational approach has been proven to be valuable and effective for the development of youth in many countries, and this is applicable to HIV/AIDS education.

China is making tremendous efforts to prevent the spread of HIV/AIDS. Young people in China, with determination, ingenuity and courage, can play a key role in educational efforts. I am glad to see this Guide in use, produced through the hard work of Chinese experts, teachers and UNICEF staff. I sincerely hope that Sichuan’s initiatives in its schools will be successfully implemented and will serve as a model for other provinces in China and other countries. UNICEF, together with the government of China and other international organizations, will improve our cooperation and support in this endeavor.

We are fighting for survival of both Chinese society and of all humankind.

Edwin J. Judd

UNICEF Area Representative
China and Mongolia
Preface

AIDS is now endangering the health of all human beings on earth, especially the children, young adults and women. In Africa, the AIDS epidemic has destroyed several decades’ achievements in maternal and child hygiene. As a result, UNICEF sees the active engagement in AIDS prevention as one of the key tasks to improve the existing situations of children, young adults and women.

A change to a more liberal lifestyle is causing a large number of young adults to become susceptible to AIDS. A survey of worldwide AIDS data indicates that most of the HIV-positive people are young and middle-aged. By the end of 1999, in China, 79% of HIV-positive persons were 20 to 40 years of age, while 9.5% were younger than 19 years of age.

Compared with most developing countries, the percentage of school-aged children attending school in China is very high. This means that school can be an effective way to educate youth on this issue. In its fight against AIDS, China will disseminate AIDS prevention information to its young people in an extensive and timely manner if it can meet three key conditions: to continue its achievements in primary and secondary education; to put into practice and administer effective policies and; to train good teachers.

In 1996, UNICEF began its cooperation with the Chinese government in the administration, dissemination and educational aspects of AIDS prevention. In their collaborative efforts, youth education is one of the key elements of the AIDS prevention projects.

In September of 1997, with the aid of UNICEF, the Arts and Health Department of the Ministry of Education held a seminar in AIDS prevention for teachers from across China. Life Skills, which is widely adopted in the international educational field was introduced into this seminar. Life Skills and the closely related Peer Education techniques both aim to develop the ability of youth to make correct choices in real life. The seminar participants agreed the two training techniques were effective and suggested using Life Skills in AIDS prevention in school-based health education in China.

From 1998, UNICEF began supporting the training of teachers of different levels on Life Skills in some Chinese provinces, cities and counties. The aim of the training was to establish a group of qualified teachers and, in combination with Peer Education, to develop long-term, continuous educational activities in secondary schools. The results of this school-based education were to be extended, in a creative way, to families and communities. Thus, the integration of AIDS prevention, quality education and students’ all-around development can be made in this way.

Because of the success of the pilot program in Sichuan province, UNICEF is now using the proceeds from selling greeting cards to broaden and develop AIDS prevention education program in schools. UNICEF is striving, in collaboration with the Ministry of Education and provincial educational departments, to help some areas to be the first to reach China’s Long-Term Program of AIDS Prevention and Control by 2002.

This Guide compiles and summarizes the essence of the training materials on AIDS prevention from China and abroad. Also, it adopts many advanced teaching ideas, as well as teaching materials that have been successfully applied in China. We sincerely hope this Guide can be used as a reference in HIV/AIDS prevention education and that the successful Chinese experiences can be shared by individuals and organisations in the world.
Introduction

Steps and Methods for Achieving the Three-level UNICEF Training of Teachers (TOT) Program

First-level
- Trainers
  - National and provincial experts
  - International consultants.
- Trainees
  - Key teachers from the regions and counties, chosen according to specific standards. Once qualified, these teachers become the provincial or regional trainers.
- Trainees’ tasks
  - Organize and develop the second and third level of teacher training.
  - Organize and develop relevant activities in schools and in communities.
  - Create relevant teaching materials.

Second-level
- Trainers
  - Provincial and regional key teachers – the teachers who received the first-level training.
  - National and provincial experts who can, when needed, provide guidance.
- Trainees
  - Key teachers from all schools. (three to four teachers from each school)
- Trainees’ tasks
  - Organize and develop the third-level teacher training.
  - Direct other teachers in teaching.
  - Organize and develop relevant activities in schools and in communities.

Third-level
- Trainers
  - Key teachers from all schools – teachers who received the second-level training.
  - Provincial and regional key teachers – teachers who received the first-level training.
- Trainees
  - All teachers of each school.
- Trainees’ tasks
  - Combine the relevant subject matter with every school subject.
  - Help to develop relevant activities in schools and in communities.

Activities in Schools and Communities
Activities can include:
- Health education lessons.
- Insertion of AIDS-related content in other subjects such as: Chinese, English, Geography and Biology.
- Extra-curricular activities: theme-oriented class discussions, singing, painting and short skit competitions.
- Parents’ meetings.
- Publicizing in communities.
Selection Standards for Choosing Regional and County Key Teachers
(Participants for the first-level teacher training)

The teachers must:

- Be capable of or have the potential to organize and to conduct teacher training in AIDS prevention education and Life Skills;
- Have good communication skills, leadership abilities and initiative;
- Have more than three years of teaching experiences;
- Be able to guarantee time to take part in the planning, directing and carrying out of all levels of teacher training (will sign a contract with the work unit or school);
- Guarantee at least two years of time, after having been trained, to conduct training.

Suggestions for Using This Guide

Adjust teaching content according to specific situation, for example:

- To delete some content,
- to choose some specific games,
- to adjust time of discussion and the depth of topics, and
- to respect differences between male and female students.

The problems of AIDS are interdisciplinary topics that can be taught through many school subjects.

All the practical activities on AIDS prevention from China and abroad that introduced in this Guide can be used as sources of extra-curricular activities, competitions and quality education in schools.

This Guide can be used together with the school’s sexuality education and social science education curriculum. Also, it can be used as discussion topics for staff training in schools.

Explanation of the Teaching Plan

Time

- In regard to the effectiveness and completeness of teaching, the stipulated time for each lesson in the Guide is 60 minutes.
- By coordinating with relevant departments in school, teachers can prolong the lesson period or choose content that fits into a 45 minute lesson, according to the specific situation.
- We advise teachers to use extra-curricular time or the last lesson for teaching as far as possible. If this is not possible, please coordinate with the teacher of the next lesson. If it is necessary to protract the teaching time, inform the relevant teachers in advance.
Place
There are many activities, games, discussions and short skits in this Guide which require active participation by the students so the atmosphere will be very lively. Teachers should pay attention for the following points in choosing a place for the lesson:

- A classroom with movable desks and chairs is preferred.
- If possible, choose a relatively isolated classroom.
- When suitable, some lessons can be conducted out of doors.

Subject
This Guide is intended for teaching secondary school students. The age range of Chinese junior high school is 12-14 years old and that of senior high school is about 15-17 years old.

Unit One, ‘HIV/AIDS - Basic Information’ and Unit Three, ‘How to Prevent AIDS and How to Deal with HIV-positive People’ are unitary teaching plans for both junior and senior high school students. Teachers need to adjust the teaching content according to the level of the class.

Most of the subjects in Unit Two: ‘How close is AIDS to Us?’ and Unit Four: ‘Use HIV/AIDS Prevention for a Happy, Healthy and Successful Life’ are different for junior and senior high school students. The section intended for junior students emphasizes participation in activities and stimulating enthusiasm.

The section intended for senior students puts stress on fostering analytical ability and discussion of relationships between boys and girls in adolescence. Teachers can use different parts of the junior and senior curriculums to enrich their own lessons.

Thinking and Practice
Aims
The aims are to:

- Guide students to integrate what they learn at school with real life.
- Offer teachers a new way of thinking.
- Enrich students’ extra-curricular activities.
- Foster multi-faceted qualities in students by taking AIDS prevention curriculum as a starting point.

Application

- Every school can choose, adjust and adapt the teaching plans according to their specific situation.
- The premise of using the teaching plans successfully is that teachers break out of their old way of thinking and improve their all-around abilities.
- The training and coordination of peer leaders are key elements of carrying out the program.
- Pay attention to your speaking tone and attitude when taking up this part. Be careful not to pressure students. This part emphasizes real life ability, therefore teachers need
to stimulate students’ enthusiasm and interest and to encourage them to creatively integrate knowledge of books with life.

- Teachers should particularly train students the abilities of how to deal with frustrations and how to break through one’s limitations. For example: how to conquer timidity and how to cope with embarrassing questions in communication.
- Teachers can try to integrate this program with the school moral education policy and quality education.
- Summarize after teaching.

Challenges and Rewards for Teachers Using this Guide

Challenge

Transformation of the Teacher’s Role

- The traditional class, which gives high priority to the teacher’s passing on knowledge, is a teacher-centered class. In this Guide, the key role of the teacher is to be a facilitator. This is student-centered teaching.
- How to pass on knowledge of sexuality education and AIDS prevention
  - It is a long-time headache for teachers to explain sex in a scientific and lively way that students can accept, especially when referring to sexual transmission of AIDS. The trend of the AIDS epidemic is so grim that teachers can no longer avoid this topic. This Guide uses diagrams to help teachers explain these facts and lists references related to sexuality education. It also gives some views of experienced teachers. However, the initiation of the topic is always the most important thing when teaching.
- Dealing with embarrassing situations (The following may arise):
  - Students do not want to discuss the topics and the atmosphere of the classroom is apathetic.
  - If the time for doing an activity or playing a game is too long or too short, it can lessen the effectiveness of the lesson.
  - The class may be out of order when doing some games.
  - If the students’ thinking is not stimulated they may make irrelevant replies to questions.
  - Some students may purposely ask embarrassing questions.
- Teachers should have a good understanding of the above situations and prepare the lessons thoroughly in advance. Peer leaders can be very helpful if used appropriately.
- The effectiveness of a lesson depends, to a great extent, upon the teacher’s personal charm and upon mutual trust between teacher and student.
- Teachers need to acquire the ability to collect and absorb information efficiently, and be flexible when dealing with changing circumstances and communicating with different kinds of people.
Rewards

The teacher may be the person to whom students will be eternally grateful.

Students in their adolescence seldom have the opportunity to consult adults who they trust about sex, drugs and AIDS. However these are problems that confuse them a lot and even threaten their healthy growth. Therefore, students will be particularly grateful to those who can help them to resolve these problems. On the long road of growing up, students will not forget what they learned in class and from discussions concerning such topics.

Self-Improvement for Teachers

Carrying out AIDS education and using new teaching techniques can help teachers break out of their old ways of thinking. Through interacting with students, teachers can greatly improve their own abilities in class control. This will enable them to improve the art of teaching and open a new road to quality education.
The Origin of the Red Ribbon

Once upon a time, in the early part of our era, AIDS was ‘JUST A DISEASE...’

Some of the American artists began to wear red ribbons to silently remember their companions who died of AIDS.

At one of the international conferences on AIDS, people living with HIV/AIDS cried out, for human AIDS programmes...

Long red ribbons were thrown over and landed on people seated at the plenary hall...

Supporters of the action cut the ribbons into small pieces then folded and pinned it on their shirts, over their hearts.

Red Ribbon

A symbol of people binding together to show support and care for people living with HIV/AIDS,

A symbol of our love for life and thirst for equality.

A symbol of our determination to participate AIDS prevention with our heart.
SECTION ONE:  
THE TEACHING PLAN  
Effective Ways to Build up Classroom Atmosphere  
Encouragement: You Are Really Something, I Am Really Something!  

Unit 1:  
HIV/AIDS - Basic Knowledge  
I The Teaching Goals  
II Teaching Content and Timetable  
III Teaching Details  
   Warm-up Activity: Where are You?  
   Ground Rules  
   Group Discussion: Talk Straight  
   Activity: Picture Drawing  
   Questions and Answers  
   Thinking and Practice: Focus Interview  
IV Teaching Reference  
   Basic Knowledge About HIV/AIDS and STDs  
   Basic Knowledge about Narcotics  
   Smoking – An Initiator of Drug Abuse  
   Table to Record Classroom Activities  

Unit 2:  
How Close Is Aids To Us?  
I The Teaching Goals  
II Teaching Content and Timetable  
III Teaching Details  
   Warm-up Activity: I Am Your Eyes  
   For Junior High School Students:  
      Group Discussion  
      Activity: Wild Fire -AIDS is Just Beside Us  
      Teacher’s Summary  
   For Senior High School Students:  
      Analysis of Article: How Do We Understand AIDS?  
      Activity: Are You in Danger?  
      Teacher’s Summary
Thinking and Practice: Collect and Analyse Newspaper Information

IV Teaching Reference
The World AIDS Epidemic
The AIDS Epidemic in China
The Harm of AIDS towards Humans
How AIDS Affects Children

Unit 3:
Ways to Prevent AIDS and Treat HIV-Positive and AIDS Patients

I The Teaching Goals
II Teaching Content and Timetable
III Teaching Details
   Warm-up Activity: Hand Knot
   Activity: Danger Zone
   Case Study: The Story of Ryan
   Teachers Summary
   Thinking and Practice: A letter to a HIV Positive Mother

IV Teaching Reference
Two Different Stories
Care and Support for People Living With HIV/AIDS

Unit 4:
Use HIV/AIDS Prevention for a Happy, Healthy and Successful Life

I The Teaching Goals
II Teaching Content and Timetable
III Teaching Details
   Warm-Up Activity: The River of Life
   Role Play
   How to Make Decisions: T-Analysis
   The Art of Life
   For Junior High School Students
      Human Mirror
   For Senior High School Students
      Rendezvous on the Hills
   Conclusion Activity: Where are You?
   Thinking and Practice:
      Parents involvement in AIDS Prevention Education

IV Teaching Reference
Parents Involvement
Friendship and Love
Preventing Sexual Assault
Juvenile Delinquency in China - General Situation
Qualified Personnel in China in the 21st Century – Trends
SECTION TWO:
REFERENCES

I  Extracts from Speeches by Officials of the Chinese Government and International Organizations
Instructions of Premier Zhou Enlai
Instructions of Vice premier Li Lanqing
Instruction of Dr. Wu Jieping, Vice-Director of the Standing Committee of the National People’s Congress
Speech of Madam Peng Peiyun, State Councilor, in the Second Coordination Meeting of Prevention and Treatment of STD/AIDS
Dedication by Professor Luc Montagnier, President of the World Foundation for Aids Research and Prevention
Extracts of speeches by Dr. Peter Piot, Director of UN AIDS Planning Committee


III  Basic Knowledge Concerning AIDS Prevention
The ABC of HIV/AIDS Prevention
Ten Basic Messages Concerning HIV/AIDS Prevention
Questionnaire about Attitudes and Awareness of HIV/AIDS

IV  Life Skills and Peer Education: Theory and Practice
Life Skills
Sample Class Activities for Life Skills Training
Peer Education

V  School Life Skills for HIV/AIDS Prevention
Educational Channels
Teaching Methods

VI  Integration of UNICEF Resources with Local Creativity in HIV/AIDS Prevention Projects
Summary of HIV/AIDS Prevention and School Life Skills Education Experiences on Third-Level Training for Teachers
Programs Effectively Implemented in Fuyuanhao Vocational School
Recommended Teaching Plans

VII  Permeating AIDS Education into School Subjects
Integration with Verbal (Chinese) Class
Integration with English Class
Integration with Geography Class
Integration with Mathematics Class
Integration with Social Sciences Class
VIII Experiences and Methods Used to Promote Sex Education and AIDS Prevention
Nine Ways to Talk at Home With Your Kids About Sex Experiences with Sex Education and AIDS Prevention Education in Schools

IX The World Youth Against AIDS Campaign
Youth and HIV/AIDS Slogans to Fight AIDS

X World AIDS Day
The Origin The Themes Exemplary Activities

XI Useful Information About AIDS
Where can an HIV Antibody Test be Performed? AIDS Hotlines in China Relevant Websites

Bibliography
Afterword
Abbreviations
SECTION ONE:
THE TEACHING PLAN
Effective Ways to Build up Classroom Atmosphere
New Methods to Divide the Class Into Groups

In order to break out of the formal structure and thinking pattern of regular class, as well as the restriction of communications resulting from fixed seats, the following could be adopted to rearrange the class so students will have more desire to take part in discussions and games. The class can be divided into groups in the following ways:

- **Calling numbers.** According to the number of groups required by the activity, the teacher asks students to call out numbers in sequence and those who have called out the same number will form one group. For instance, in a class of 21 students, each student will call out numbers from 1 to 7. Every 7th student will end up with the same number and form one group with a total of three groups of 7 students.

- **Birthdays.** Divide up the class by the months that they were born in, forming twelve groups. Alternatively, the class can be divided by seasons, thus forming 4 groups.

- **Animal sounds.** Distribute cards with animal names on them with one kind of animal for each group. Each student will then imitate the sound of the animals he/she has on his/her card and will then look/listen for other students making the same sound, thus forming their respective groups.

- **Shaking hands randomly.** The entire class will stand up and each student will walk to and shake hands with whomever they want. After a while, the teacher will call out ‘STOP,’ and the pairs of students shaking hands at that moment will form groups of two.

- Other methods include dividing the class by math symbols, geometrical figures, chemical elements, mountains, rivers, lakes, railways, synonyms, antonyms or English words.

**Encouragement: You are Really Something, I am Really Something!**

*Timing:*
Before or after an activity, such as a game or a discussion.

*Process:*
The students sit in a circle. Each person with both hands clenched as fists. The arms are held out across the body (but not quite with crossed arms), and the arms and fists are rolled in a circular motion around each other.

When rolling their arms in an outwards circular direction, they will say, ‘You are really something, you are really something, you are really really really something!’

Immediately after the last word ‘something’, everyone points his thumb to a person in the circle.

Roll the arms again, this time in a circular direction towards oneself saying ‘I’m really something, I’m really something, I’m really really really something!’ Then point the thumb to oneself.

Repeat the process.
UNIT 1
HIV/AIDS - BASIC KNOWLEDGE

I  The Teaching Goals

This section explains the following:

- Basic knowledge of HIV/AIDS.
- Three main ways of being infected with HIV/AIDS.
- The symptoms and threats of HIV/AIDS.
- Behaviors that are not at risk of HIV/AIDS infection.

II  Teaching Contents and Timetable

Duration: 60 minutes

<table>
<thead>
<tr>
<th>Contents</th>
<th>Duration</th>
<th>Key points for training</th>
<th>Materials needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparations before the class</td>
<td></td>
<td>Invite parents to the prevention class</td>
<td>Refer to Unit 4 ‘Parents participation’</td>
</tr>
<tr>
<td>1. Warm-up activity</td>
<td>15 min</td>
<td>Activate the class and test the students to find out how much they know about HIV/AIDS</td>
<td></td>
</tr>
<tr>
<td>2. Ground rules</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Group Discussion</td>
<td>20 min</td>
<td>Learn about the students’ current knowledge on HIV/AIDS and their attitude towards the disease. Through discussion have them contemplate the issue.</td>
<td>Cards</td>
</tr>
<tr>
<td>4. Activity: Picture Drawing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Questions and Answers</td>
<td>15 min</td>
<td>Answer questions and clear students’ doubts. Give details of the knowledge on HIV/AIDS</td>
<td>Pictures</td>
</tr>
<tr>
<td>6. Thinking and Practice</td>
<td>10 min</td>
<td>Inspire the students to learn more in life and get them prepared for the next class.</td>
<td></td>
</tr>
</tbody>
</table>

III  Teaching Details

Warm-up Activity: Where are You? (10 minutes)

Goals

- Test the students to find out how much they initially know about HIV/AIDS.
- Activate the class, making the students feel refreshed.
- Repeat this activity in Unit 4 to compare the effects of having these classes.
Process
- The teacher puts up the following question (on the blackboard, or with a slide projector): Do you think we have to learn about HIV/AIDS?
- Divide the blackboard into three parts and write the following on the respective parts: Absolutely Necessary / Necessary / Unnecessary
- Ask 10-15 students to stand in front of one of the three parts, according to their own attitude towards AIDS thus forming three groups.
- Ask each of them to tell the class why they chose the part they did.
- The teacher then says: ‘If any of you have been convinced by the reasons of students in other groups, you can join them.’
- Ask those students who changed their position to tell the class why they did so.

Teacher’s Summary
The teacher points out that everyone has his own understanding of HIV/AIDS and its prevention, then ask the students to express what they expect from the class.

Important:
The teacher should not make any comments of his/her own nor should he/she intentionally lead the discussion during the process.
The teacher should try to create a relaxed and active environment for the students to express what is really on their minds.
During the activity, you should encourage students to act bravely in changing positions.

Ground Rules (5 minutes)
Goal
The education of AIDS prevention involves the topic of sex and health. Therefore, an environment of mutual respect, trust, safety and relaxation is vital to the effectiveness of the class. So it is very important to make the rules clear to the students in the first class.

Ground Rules
- Respect everyone’s opinions.
- Listen attentively and unnecessary interruptions should be avoided.
- No personal questions. Discuss the topic and not about anyone in particular in the class.
- Encourage each other.
- Approach the class content with a scientific attitude.
- If the speaker wants his/her opinions to be restricted to the class, everyone is obligated to keep it a secret.

Important:
When announcing the rules, the teacher should be confident and natural.
Try to get the students’ positive response and support for the rules.

Group Discussion (10 minutes)
Goal
Learn about the students’ current knowledge on HIV/AIDS and their attitude towards the disease. Through discussion, make them contemplate and speak.

Process
- Divide the students into groups of four.
- Distribute one card to each group with questions concerning HIV/AIDS written on them.
- The students are free to talk while the teacher walks around giving instructions and hints, but does not directly answer any specific questions.
- The teacher invites a representative from each group to report on the results of the discussion.

Questions for Discussion
- What is AIDS and HIV?
- What is the difference between AIDS patients and HIV positive people?
- What are the main ways AIDS is transmitted?
- Will hand-shaking, mosquito-biting and pool-swimming get people infected with HIV/AIDS?
- What other behaviours do you know is impossible to transmit AIDS?
- How can you protect yourself from AIDS?
- What type of people can be easily infected with HIV?

Activity: Picture Drawing (10 minutes)

Goal
Get to know how much, or little, the students know about HIV/AIDS and help the students realize the extent of their knowledge on this topic.

Process
- Ask the students to close their eyes and imagine what an AIDS patient could look like then ask them the following questions:
  - Are they male or female?
  - Are they young or old?
  - Are they fat or thin?
  - Are they poor or rich?
  - What do they do for a living?
  - What does their skin look like?
  - Ask the students to draw the imaginary patient on a piece of paper.
- Compare their picture with a classmate (e.g. student sitting next to them).

Teacher’s Summary
Anyone can be HIV positive, you cannot tell just from how a person looks. Young people are at higher risk of infection because of their features and behavior patterns.

Questions and Answers (15 minutes)
Highlights

• What is AIDS?
• What is HIV?
• What is the difference between AIDS patients and HIV positive people?
• How the process of AIDS takes effect and the symptoms (window period, incubation period, infective period and clinical symptoms).
• What are the three main ways that AIDS is transmitted?
• What are the behaviors in everyday life that cannot transmit HIV?

Important:
The above highlights are discussed and illustrated in the Teaching Reference. The teacher can refer to this information and the pictures to give a more vivid explanation.

When explaining AIDS transmission, keep in mind the age group of the class and include as much information as appropriate (refer to Part 2, chapter 8, 'Experiences and methods on promoting sex education and AIDS prevention in China').

When explaining AIDS symptoms, try to be scientific.

Thinking and Practice: Focus Interview (10 minutes)

Goal

Help students develop the following abilities:

• To communicate and capture the point of an interview.
• To collect information and analyze the comments received.
• To adjust one’s mind to face rejection (if an interview is refused).
• To put words into action.
• To put the newly learned knowledge into use and share it with others.

Process

• Every student takes on the role of a reporter
  (They can pretend to be from any newspaper they like.)
• They have to hold oral interviews, taking notes if necessary, with at least three people (parents, friends, strangers or any other person) before the next class.
• The teacher writes out the three main questions for the interview
  (on the blackboard or with a slide projector):
  - Do you know anything about HIV/AIDS?
  - How far away do you think AIDS is from us? Why?
  - Will you accept and take care of AIDS patients? Why?

Important:

Present the assignment to the students as an interesting and challenging job.

Explain the feasibility of the assignment and leave some time for the students to ask questions.

Tell the students that there may be awkward situations, rejections and psychological barriers and leave some time for the students to ask questions.

Give guidance to peer leaders and encourage them to make preparations for their interviews in the next class.
IV TEACHING REFERENCE

Basic Knowledge about HIV/AIDS and STDs

1) What is AIDS?

AIDS is the acronym for the term *acquired immunodeficiency syndrome*. ‘Immunodeficiency’ means that there is something wrong with the human immune system. Immunity is the capacity of the body to resist the invasion of bacteria, viruses, and other pathogenic microorganisms, prevents the body from falling ill every day and allows one to lead a healthy life. HIV destroys the immunity of the body. Patients suffering from AIDS become very vulnerable to microorganisms that are unlikely to affect normal people. Diseases which manifest only very mildly in people with normal immune ability, become very severe and incurable in people with AIDS.

2) What is HIV?

HIV is the abbreviation of *human immunodeficiency virus*. After invading the human body, HIV destroys the T lymphocytes. It transmutes (varies) so rapidly that it is very difficult to develop a vaccine to combat it.

HIV directly invades the immune system of the human body, destroying the immune cells that resist infection with the result that the immune ability of the body is grossly compromised. However, the HIV virus is itself very vulnerable. Outside the lymphocyte, HIV dies rapidly in the outer environment. Commonly used disinfectants, such as ‘84’ sterilizing fluid, bleaching powder and alcohol kill it.

3) People Infected with HIV

People with HIV, or who are HIV carriers, are those who are infected with HIV but have no symptoms. They can be characterized as someone with ‘two eyes, one nose, and one mouth’, that is to say that they have the same appearance as any other person.

4) AIDS Patients

For people infected with HIV, their resistance to diseases is severely destroyed by HIV, to the extent that their bodies fail to resist even mild disease and different manifestations of diseases appear. Such people are called AIDS patients.

When a person infected with HIV becomes an AIDS patient, he/she may die within half a year to two years.

5) HIV Positive and AIDS Patients - Basic Concepts that are Easily Confused

When people think of AIDS, they often confuse HIV positive with AIDS patients; what is the difference between the two?

At the point when HIV enters the human body, the body immediately resists it. The virus needs some time to reproduce itself in the human body. People infected with HIV do not fall ill beyond cure on the very day HIV invades their bodies. Initially, the immunity of the
infected person has not been severely compromised so no remarkable symptoms are apparent. Such a person is considered a person who is infected with HIV or HIV positive.

During the second to fourth week after HIV has enters their bodies, some people infected with HIV may have certain clinical manifestations, similar to flu-like symptoms such as a fever, muscular pain or a rash. However, such symptoms often escape notice and not everyone infected with HIV has such manifestations. People infected with HIV often look healthy and live and work just like those who are not infected.

When the immunity of a person infected with HIV becomes severely compromised, to the extent that the body fails to resist the attack of HIV, other pathogens exploit this weakness. Pathogens invade and cause different diseases, such diarrhea, pneumonia, some carcinomas and even dementia. At this stage, people infected with HIV are considered AIDS patients. The clinical manifestations of AIDS are many and varied. AIDS patients may die of exhaustion caused by severe diarrhea, pneumonia and cancer.

Based on the statistics from around the world, there is often a period between infection of HIV and the onset of AIDS. Such a period can last from several years to 10 years or more. It is called the incubation period. However, the length of the incubation period varies greatly. Some people with HIV fall ill one to two years after the diagnosis. There are a lot of factors that influence the speed of onset. Seeking medical guidance, effective preventive measures, good nutrition, and health care are factors that play an important role in postponing the onset of AIDS.

6) Window Period
It is impossible to diagnose HIV infection immediately after the virus enters the body. Generally, the HIV antibody can be tested two to three months after infection. The period between the infection of HIV and the successful detection of HIV antibodies is called the window period. Only when HIV antibodies are detected can one’s HIV status be determined.

Although the HIV antibody cannot be detected during the window period, a vast amount of the virus already exists in the body fluid, especially blood, sperm and vaginal secretion. People in the window period are highly infective. If a person is tested shortly after a particularly risky activity and receives a negative result, he/she must be tested again three months later. It is only then that the antibodies will be detected if that person is infected.

7) Incubation Period
The time between being infected with HIV and the clinical manifestation of AIDS is referred to as the incubation period. The length of the incubation period is generally 5-7 years, the shortest being 6-12 months and the longest being more than 10 years. The average length of this period is 8-10 years.

During the long incubation period, an HIV-infected person shows no symptoms. They look and feel healthy and may not even know their own HIV status unless HIV antibodies are detected in their blood. However, HIV-infected persons during the incubation period are highly infective. They can transmit HIV to other people through sexual intercourse and through their blood. Therefore, any person who might be infected with HIV should seek HIV/AIDS counseling and/or HIV testing.
8) **Infective Period**

The so-called infective period is the period when the HIV-infected person or AIDS patient is able to transmit the virus to others. With regards to AIDS, the entire period between being infected with HIV and the death of the patient is considered the infective period.

Generally speaking, the HIV-infected person is the most infective during the window period and at the very onset of AIDS, and less so during the incubation period. However, since the incubation period tends to last for a rather long time (average of 8-10 years), this plays a major role in the transmission of HIV.

9) **Main Clinical Manifestation of AIDS**

When the immune system of an HIV-infected person is severely destroyed and fails to resist the attack of opportunistic diseases, this person eventually becomes an AIDS patient. The advanced stage of the disease is reached once the HIV-infected person fails to prevent the onset of AIDS. There is no escape from death.

AIDS has no specific clinical manifestation. Its symptoms and signs are varied and complicated. The following are some clinically common symptoms: protracted low fever, weight loss by 10% or over during a short time, pathologic leanness, fatigue, night sweat, chronic diarrhea, chronic cough, general lymphadenectasis, vertigo, headache, dementia and inactive response.

The most common infection in AIDS patient is Kaposi’s sarcoma, manifested as dark blue or purple maculopapules and nodes in the skin. Other tumors, such as lymphoma, liver cancer, and kidney carcinoma are also common.

So far, medicines for AIDS have no long-lasting effect. AIDS is still an incurable disease. The course that AIDS will take depends on the constitution of the patient, his/her living conditions and the level of medical treatment. In the end, AIDS patients die of prostration caused by infection and cancer.

10) **How to Determine if a Person is Infected with HIV?**

It is impossible to determine if a person is infected with HIV or not through one’s appearance, since the virus can be hidden in the body for a long time without manifesting any signs or symptoms.

To determine if a person is HIV-infected, generally a blood test has to be done to see if there are HIV antibodies in his/her blood. Antibodies is a substance in the blood used to resist the invasion of bacteria and viruses. Antibody is produced by the immune system. The presence of the HIV antibody in the blood shows that the person is HIV-infected. The absence of the HIV antibody in the blood, i.e., negative test result, shows that the tested person: is not infected; or is infected but is within the window period (since the production of antibodies needs three months), and a further test should be suggested.

11) **Transmission of HIV**

Since HIV mainly exists in blood, semen, vaginal secretion and breast milk of people who are infected, any behavior that causes such body fluids to enter another person’s body may cause HIV infection.

Under normal conditions, skin and mucous membrane are natural barriers against infection. However, those barriers may be damaged by cuts, abrasions, sores, or ulcers, all of which are capable of infection.
There are three modes of HIV transmission:

- **Sexual transmission**
  - The HIV in the semen, vaginal secretion, or menstrual blood of an infected person may enter the body of another person through the membrane of genitals. Other STDs, such as gonorrhea, syphilis, genital herpes, etc. can also be transmitted by sexual intercourse.
  - Homosexual and bi-sexual behavior are high-risk activities exposing the participants to HIV/AIDS infection

- **Transmission due to blood or blood products contaminated with HIV, such as through the following means:**
  - Intravenous drug users sharing unsterilized syringes and needles;
  - Transfer of blood products contaminated with HIV;
  - Transplant of an organ of an infected person;
  - Syringes or needles used have not been sterilized or adequately sterilized (the principle of one syringe per person fails to be observed during EPI for children);
  - Other medical instruments that pierce the skin, such as those used in dentistry, obstetrics, gynecology, surgery and acupuncture that have not been sterilized or adequately sterilized before reuse;
  - Instruments used in barber shops, beauty parlors, tattooing, pedicure and ear-piercing are not sterilized before reuse;
  - Personal items such as razors, electric razors or toothbrushes are shared;
  - Bleeding and physical contact occurs during sports;
  - The damaged skin of a person providing first aid comes into contact with the infected blood from the wounded

- **Mother to infant transmission**
  - Transmission of HIV from an infected woman to her fetus or infant may occur before, during or after birth and during breastfeeding.
  
  (See figure 1)

12) **The Conditions under which HIV Can’t be Transmitted**

It is as important to know under what conditions HIV cannot be transmitted as opposed to conditions where HIV can be transmitted, so as to avoid unnecessary fear of AIDS.

HIV can’t be transmitted by the following routes:

- food, drinking water and air,
- casual person-to-person contact in public places, e.g., in classroom, cinema, market, and swimming pool, or contact with seats, handrails, notes, coins, and bills, things for office use, transportation, or in workshops, etc,
- courtesy kissing,
- courtesy hug,
• hand-shaking,
• sharing of toilet and bathtub, or
• mosquito bite.
    (See figure 2)

13) Why Don’t Mosquito Bites Transmit HIV?
There is no evidence to indicate that mosquito bites transmit HIV. HIV live in cells in the human body but cannot survive in the body of a mosquito. Mosquitoes are not an appropriate host for HIV.

14) Is Blood Donation a Risk for Transmission of HIV?
Donating blood will not put a person at risk of being infected by HIV, provided new or thoroughly sterilized instruments are used.

15) Is Contact with AIDS Patients Dangerous?
Contact with AIDS patients and HIV-infected persons during one’s daily life, including class settings, are safe and without risk of HIV infection, since daily person-to-person contact doesn’t transmit HIV. Only a transfer of body fluid with an HIV-infected person is dangerous.

Figure 1
Three Modes of HIV Transmission
• Sexual Transmission
• Blood Transmission
• Mother to Infant Transmission

Figure 2
Behaviors That Do not Transmit HIV in Daily Life

16) How to Avoid HIV Transmission?
To avoid contracting or transmitting AIDS:
• Beware of transfusions of blood and blood products. (Hospitals must provide blood and blood products that are screened and cleared before transfusion.)
• Do not share syringes, needles, gauze, and absorbent cottons with others, especially with intravenous drug users.
• Avoid premarital sexual behavior.
• Have a mutually faithful, monogamous sexual relationship with your partner and avoid sexual promiscuity.
• Always use high-quality condoms correctly and consistently while having sex.
• HIV-infected women should avoid pregnancy, and
• Avoid using any instruments that may pierce the skin, such as a toothbrush, ear-piercing needle, tattooing needle, razor, pedicure knife, etc.

17) Is There a Vaccine Against AIDS?
AIDS is a very serious infectious disease. To date no cure or effective vaccine for AIDS has been developed. There are some drugs that can be used to treat AIDS-related infections. While these drugs improve the patients’ condition and postpone death, they cannot cure AIDS. Some drugs work to inhibit the reproduction of HIV in the infected person’s body and effectively prolong the life of the infected person, although not eradicating the virus. However, these drugs are too expensive in developing countries for most HIV-infected persons to afford.

The development of a vaccine is under way. However, it seems that it will take several years to develop safe and effective vaccines. HIV, unlike many other viruses, varies rapidly. This characteristic makes the human immune system incapable to resist the infringement of the virus and causes a great difficulty in developing a specific remedy and an effective vaccine.

18) What is a STD?
The term STD, is the abbreviation for sexually transmitted disease, which is any infectious disease transmitted by sexual contact, i.e., sexual intercourse with a person with STD.

As laid out in Article 2, Chapter 1 of the Order No.15 of the Ministry of Health, Measures of Control and Management of STD, issued August 12 1991, STDs include. 1) AIDS, gonorrhea, syphilis. 2) chancroid, venereal lymphogranuloma, non-gonorrheal urethritis, condyloma acuminatum, and genital herpes. These are all in the category of type B infectious diseases in the Law of Control of Communicable Diseases of the People’s Republic of China.

19) What are the Clinical Manifestations of STDs?
• Abnormal discharge from genital organs, sometimes with abnormal odor.
• Itching, pain, blister, ulcer, wart, or rash in the genital organs or by the anus
• Dyspareunia, urodynia.
• Fever, fatigue, or hypogastralgia.

In some patients, the clinical manifestations of STDs are very mild and easily ignored.

20) Do STDs Increase the Risk of HIV Infection?
There is ample evidence that indicates that STDs greatly increases the risk of HIV infection and rate of spread, due to the fact that STDs can damages the skin and mucous membrane. Those who suspect themselves infected with STD should go to a hospital to be examined. STD patients should be aware that unprotected sex causes them to be at a great risk of HIV infection.

21) Who are at High Risk of HIV Infection?
Comparatively, the following populations are at a very high risk of HIV infection:
• People with multiple sex partners;
• People engaged in unsafe sex behavior, such as penetrative sex without the use of condoms;
• People still having sex in spite of being infected with STD; and
• Intravenous drug users.

22) What is Unsafe Sex?
Unsafe sex means sexual behavior that causes the entrance of blood, semen, or vaginal secretion into the bodies of one or both sex partners.

What Does Unsafe Sex Result In?
It may cause:
• unwanted pregnancy that may result in artificial abortion, influencing mental and physical health, school performance, and one’s career,
• infection by STDs resulting in infertility and systematic diseases, and
• infection by HIV that endangers one’s life.

How to Avoid the Results of Unsafe Sex Behavior?
• Avoid premarital sex.
• Be faithful to a single sex partner and avoid promiscuity.
• Correct use of high quality condoms while having sex.
• It would be best if both the male and female partners adopt protective measures simultaneously: the male using condoms and the female taking contraceptive pills and using an intrauterine device (IUD), a female contraceptive placed within the uterus.

How do Condoms Reduce the Risk of HIV Infection?
Correctly using condoms while having sex may reduce the risk of HIV/STDs infection. A condom is a thin rubber cover to put on the hard penis so as to retain the semen therein after ejection. It functions as an extra skin to protect the human body against the entrance of infective bodily fluid.

The correct use of condoms include the following:
• Pay attention to the expiry date. Do not use condoms that have expired.
• Do not damage the condom while opening the package. Do not try to open it with one’s teeth.
• Put the condom on the erect penis before it touches the sex organ of the sex partner.
• While putting on the condom, pinch the air out of the tip of the condom with the thumb and index finger of one hand, placing the condom on top of the penis, and with the other hand, extend the condom gradually to the root of the penis. There should be no air left in the tip of the condom as it is used to hold semen after ejaculation.
• If small pores are discovered or suspected in the condom during the process of putting it on or during use, it should be rejected and replaced by a new and intact one.
• After ejaculation, hold the base of the condom before the penis becomes soft and carefully retreat it out of the body of the sex partner. Be careful not to slip it in the body of one’s sex partner and not to let semen spill from the condom.
Basic Knowledge about Narcotics

1) What are Illegal Drugs?
Drugs, in a broad sense, refers to all substances that are used to treat diseases. In a narrow sense, it refers to certain addictive materials, such as opium, heroin, cannabis, cocaine, and other narcotics and psychotic drugs that are controlled by specific laws and regulations issued by the State Council that can cause severe dependence in human beings. Sometimes the term narcotics (or illegal drug) is used to refer to all addictive drugs, generally referred to as narcotics.

Nowadays the narcotics commonly used by drug users in China include heroin, opium, cannabis, ice and MDMA.

2) What is Considered Drug Use?
Drug use means taking addictive drugs, through swallowing, inhalation, or intravenous injection for non-medical purpose. Intravenous drug users are at a high risk of being infected with HIV.

3) Harm of Addictive Drugs to the Human Body
Narcotics cause drug dependence in human beings. For example, once a person has been addicted to narcotics (a single dose of heroin may cause drug dependence), if he/she stops using, great physical and psychic discomfort follows, such as; muscular pain, abdominal pain, lacrimination, running nose, anxiety, and insomnia. Drug users cannot extricate themselves from dependence on these drugs either mentally or physically.

There are also other dangers to drug use. Heroin taken in a large dose can cause respiratory failure and death. The infection of many pathogens, including HIV, may be caused by the contamination of syringes, needles, solutions, and drugs or through the sharing of syringes. Many drugs can enter the body of a fetus through the placenta. Drug use during pregnancy may harm the fetus causing congenital deformity, developmental disorders, miscarriages, premature labor and still birth.

4) Harm of Narcotics to Society
Narcotics not only ruin the body and mind of the drug users themselves, but they also transmit hepatitis, AIDS and other diseases. According to the statistics of the World Health Organization (WHO), the infection rates of hepatitis B and hepatitis C among drug users are as high as 22% and 68% respectively, due to the use of dirty syringes. Up to the end of December 1998, 69.4% of the 12,639 persons confirmed as HIV positive by blood testing in China, were drug users.

Drug use over a long time makes the drug users indulge in illusory self-experience from which they cannot extricate themselves. They lose interest in association with other people, and can even lose interest for life itself. They lose the feeling of human honor and conscience. In order to obtain money to buy drugs, they are liable to act out of desperation,
practicing unhealthy behaviors or committing crimes, thus threatening the safety of their families, other families and the stability of society.

The harm of narcotics to society are mainly manifested as:

- Loss of family savings, falling-out among family members and relatives, breakdown of the family, and misfortune to descendents.

- Transmission of diseases to others. In the areas where drug use is prevalent, many drug users are infected with HIV. They often transmit the virus to their fellow drug users, their spouses and innocent relatives and friends.

- Corruption of social value and disturbance of public order. Once in the habit, drug users often commit theft, robbery, embezzlement, corruption, prostitution, and even murder to obtain money to buy drugs, regardless of the consequences. According to statistics, 80% of female drug users have become so desperate as to be willing to sell their bodies for the money to buy drugs.

- Hampering of the economic development of a society, thus causing colossal socio-economic loss. For example, many villages near the Gold Triangle, a cross border region between China, Thailand and Myanmar, where a great amount of drugs are produced, are short of laborers and crops, with land and empty houses lying waste under the devastation of drugs.

**Smoking -An Initiator of Drug Abuse**

The burning of tobacco releases many harmful materials, such as coal tar, nicotine, carbon monoxide, aldehydes, nitrides and radioactive materials. The harm that tobacco causes to the human body is multidimensional.

A great number of documents show that the more one smokes, the more at risk one is to lung cancer. Smokers are at risk of lung cancer 10-20 times more compared with non-smokers. Long-term smoking causes chronic bronchitis, emphysema, and chronic inflammation of nose, pharynx, throat, and nasal sinuses. Smoking is one of the risk factors of atherosis. It also causes coronary heart diseases and reduces the body’s immunity.

Miscarriages and premature labor are likely to occur to the pregnant women who smoke. The harmful materials, such as nicotine and cyanide in cigarette smoke may enter into the fetus’ body to influence the normal development of the fetus. Smoking may cause oral ulcer and periodontitis. The incidence rate of gastric and duodenal ulcer among smokers is 2-3 times higher than that among non-smokers.

Smoking not only harms the smoker, but also others. Studies show that living with second-hand smoke for a long time can cause bronchitis, pneumonia, emphysema, lung cancer, cardiovascular diseases, and other diseases that first-hand smokers are susceptible to. Additionally, smoking may lead to other dependent drug use, and as previously described, the sharing of syringes among intravenous drug users is one of the dominant modes of transmission of HIV. Thus, adolescent should not try smoking. Those who already smoke should try to quit.
<table>
<thead>
<tr>
<th>Activity: Where Are You</th>
<th>Number of Participants</th>
<th>Number of Students with Different Opinions</th>
<th>Students Remarks</th>
<th>Time taken</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1st Unit) Do you feel it necessary to know about AIDS?</td>
<td></td>
<td>Very Necessary</td>
<td>Necessary</td>
<td>Not Necessary</td>
<td></td>
</tr>
<tr>
<td>(4th Unit) Do you feel it necessary to know about AIDS?</td>
<td></td>
<td>Very Necessary</td>
<td>Necessary</td>
<td>Not Necessary</td>
<td></td>
</tr>
<tr>
<td>(4th Unit) Are you confident in being able to prevent AIDS?</td>
<td></td>
<td>Very Confident</td>
<td>Confident</td>
<td>Not Confident</td>
<td></td>
</tr>
</tbody>
</table>

The table is used for the activity ‘Where Are You’ in the Unit 1 and Unit 4 to help teachers compare the changes in knowledge and attitudes among students before and after the lessons. Teachers may have this table copied or they may return to this page to make a record after finishing the 4th session.
UNIT 2
HOW CLOSE IS AIDS TO US?

I THE TEACHING GOALS

This Unit deals with the following topics:
- The upward epidemic of AIDS in the world and China.
- The impact of AIDS to society, family and individuals.
- A sense of crisis about AIDS epidemic.

II TEACHING CONTENTS AND TIMETABLE

Duration: 60 minutes

<table>
<thead>
<tr>
<th>Contents</th>
<th>Duration</th>
<th>Key points for training</th>
<th>Materials needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Warm-up Activity</td>
<td>15 min</td>
<td>Listen and communicate, build up confidence</td>
<td>Blindfold</td>
</tr>
<tr>
<td>2. Group Discussion (junior high school)</td>
<td>38 min</td>
<td>Make confident speeches, clearly express oneself; learn about the AIDS epidemic trend</td>
<td></td>
</tr>
<tr>
<td>3. Activities</td>
<td>38 min</td>
<td>Develop an ability to analyze, speak and imagine; Create a sense of crisis</td>
<td>cards</td>
</tr>
<tr>
<td>4. Summary</td>
<td>7 min</td>
<td>Develop an ability to analyze data; build up a sense of responsibility for society.</td>
<td></td>
</tr>
</tbody>
</table>

III TEACHING DETAILS

Warm-up Activity: I am Your Eyes (15 minutes)

Goals
The goals are to teach students to:
- Learn to listen attentively.
- Learn to give clear instructions.
- Build up team spirit.
- Activate the class.
**Process**

Pick a student to act as the ‘Blind person’ and blindfold him/her.

Pick another student to be his/her eyes. That student will take the hands of the blind person and help him/her walk through the aisles in the classroom or other places.

Put some barriers in the way, such as a chair, or have the other student lead the blind person to some stairs to increase difficulty.

The guide will then let go of the blind person’s hand and give oral instructions to guide him/her. Other students must remain silent during this part.

After the walking is done, the teacher asks the blind person to tell the class the different feelings he/she had while being guided by the hand and by oral instruction, and when the oral instructions were clear and unclear.

**Important:**

For the safety of the blind person, the teacher should forbid other students in the class to do mischievous and dangerous things when the blind person is walking through the barriers, such as leg stretching and clothes pulling. This is especially important when only oral instructions are being given.

During the whole walking process, the teacher and other students should keep encouraging the blind person to walk bravely.

★ **For Junior High School Students**

**Group Discussion: Talk Straight** (10 minutes)

**Goals**

Provide an opportunity for the students to make a presentation after their first try on the ‘Thinking and Practice’ section.

Perfect students’ oral and analyzing ability.

**Process**

The teacher writes out the following topics (on the blackboard or slide projector):

- Who did I talk to?
- What were their answers to the three questions and what were the attitudes of the people interviewed towards these questions?
- What reasons did they give?
- What can I learn from their answers?
- Did I encounter any difficulties during the interview?
- How did I solve the problems?
- What impressed me most during the interview?
- What can I learn from the other students’ interview experiences?
- How can I do a better job if I go on another interview?
- Were there any students who did not conduct the interviews, what were the reasons?
The teacher divides the class into groups of 4 or 6 and distributes the above questions among the groups, asking the students to exchange their responses. The teacher then asks a representative from each group to make a presentation.

**Important:**
During the discussion, maintain a lively atmosphere, encouraging all students to participate. The teacher should try to make the students think about the reasons behind the actions. Control the presentation time for each representative so as to leave more time for other speakers.

### Activity: Wild Fire - AIDS is Just Beside Us (20 minutes)

**Goals**
Create a sense of crisis for the students, make them understand that the spread of AIDS is a serious problem and it is possible for everyone to be infected.

**Process**
1) Ask 20 students to come up and stand in a circle with everyone facing the inside.
2) Ask the students observing the game to remain silent and to pay attention to the participants’ facial expressions during the process.
3) The teacher walks towards one of the participants and shakes hands with him/her, while explaining to all students that hand shaking stands for high-risk behavior in the game. The teacher goes on to explain that they need to have a gesture to show that a person is exposed to the infection of HIV. The gesture is, when shaking hands, to slightly scratch the center of the other person’s palm. Then the person who is scratched will go on to do the same to others. The teacher demonstrates the action while explaining.  
   *At this point, the teacher reminds the class that what he/she did was just a demonstration, and no one has yet been exposed HIV infection.*
4) Ask the students to turn around and face the outside of the circle with their eyes closed. The teacher then walks around the circle and scratches the shoulders of one or two players, which means they have been infected with HIV in the game.
5) Ask all the players to open their eyes and turn around and face the inside of the circle. Then ask them to watch the facial expressions of each other to see if they can detect the supposed HIV infected person. 
   *The conclusion is, we can never tell whether someone is HIV positive or not from his appearance.*
6) Make the students talk about their feelings when the teacher walking around and designating the infected persons.
   *The conclusion to be drawn is that no one wanted his/her own shoulders to be scratched, even in the game, because everyone is afraid to be even, supposedly, HIV positive.*
7) Remind the students that there are one or two HIV positives among them. After the game has started, the HIV positive people will scratch the center of others’ palms when they are shaking hands, and subsequently, those people will do the same to others.
8) The teacher stands outside of the circle and asks the students to walk freely and to shake hands with up to one or two other participants.

9) After the hand shaking is done, ask the students to form a circle again and ask them whether there was anyone who didn’t want to shake hands with others.

   *The conclusion is that everyone can make his/her own decision and has the right to stay away from high-risk behavior.*

10) Ask all the students whose palm centers were scratched to walk a step forward to form an inner circle, the rest of them remain on their positions in the outer circle.

   *Now the students forming the inner circle are supposed to have engaged in high-risk behaviour, and are exposed HIV infection. The students forming the outer circle are not yet exposed to the infection, but they are not 100% safe.*

11) Have the students who observe the activity ask the participants questions about their experience with the game.

The following questions are for reference:

**Questions for the outer circle**
- How do you feel now?
- What do you think of the students forming the inner circle?
- Do you think you have a chance of getting HIV infected?
- Do you think you can stay in that safe environment for your entire life?

**Questions for the inner circle**
- How do you feel about getting HIV infected?
- Will you tell anyone about your being infected? Who will you tell?

12) Ask all the participants to form a new circle and express their feelings in words.

13) End the game by asking everyone to clap hands three times, symbolizing the death of the HIV. Then everybody goes back to his normal life.

**Teacher’s Summary** (8 minutes)

The teacher explains the harm AIDS does to the society, families and young people. Help the students recognize the crisis and urgency, linking themselves with the problem of AIDS.

★ For Senior High School Students

**Article Analysis: How do We Understand AIDS** (20 minutes)

**Goals**
This will help the readers to clear their minds and explain some students prevailing attitudes towards AIDS

**Process**
- The teacher writes out the 10 questions (On the blackboard or projects them to the wall).
• If possible, give a copy of the article to each student or to each group containing 4 students. If there are not enough copies, the teacher reads the article or asks a student to read it.

• Divide the class into groups of 4 or 6, and asks them to exchange ideas on the 10 questions.

• Ask the students to combine their ideas with the interview results to make a presentation.

**Important:**

Develop the students' oral ability to express themselves.

When the students talk about their ideas, interview results and the difficulty they met, the teacher should help them analyze the reasons behind what they encountered.

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**Analysis of Class Reading Material: How Do We Understand AIDS**

*Zhu Xuantong, Class 96-3, Dongbei Yucai senior high school, Shenyang*

Although AIDS has become a widely discussed subject in the world nowadays, it still seems far from us students.

Just the other day, when I was supposed to suggest a topic for presentation in class, I started off by asking my classmates to raise their hands if they were interested in the topic of AIDS. Out of 31 classmates, only two raised their hands. What surprised me was that after the class was over, nearly 20 classmates came to me and asked about the AIDS thing. I said, ‘You are the majority of the class, why couldn’t you have just raised your hands if you really want to know about it?’ Their answer was simple: ‘We do want to know, but we feel weird about it, it’s so far from us.’

I didn’t sleep well that night. I prepared a lot of content for my presentation. As a disaster of the century, AIDS has taken more than 11,700,000 lives, with the daily rate of 8,500, including 1,000 children. And the rate is growing fast. These figures broke into my dream like a nightmare.

We can’t afford to hesitate. During the winter vacation, I carried out a survey among some students in our class. The theme was ‘How do you understand AIDS’ The survey was divided into two parts. The first part consisted of 6 questions concerning the general medical knowledge. The second part consisted of 10 questions, asking about their attitudes towards AIDS.

In the first part, my classmates’ answers to the questions about the full name of AIDS, ways of transmission and easily infected groups, were nearly 100% correct. The answers to the questions about the subsequent symptoms, incubation period and death rate were not bad - more than 60% were right.

In the second part, the questions are:

- **Question One** ‘Do you think AIDS is a horrible disease?’ Some answered: ‘No! If I got it, I’ll just shake hands with death.’ A few answered: ‘It’s not horrible if you mind your own behaviour, but it’s still a barrier for human contact.’

- **Question Two** asked what they thought of AIDS infected people. Their answers were unanimous: Children are innocent, we should sympathise with them. However, for the adults who didn’t behave themselves, they deserve it, and are not deserving of sympathy.

- **Question Three** asked whether we should allow them to continue living: One response was to let them live. Another response was to let them be, since they can’t live much longer anyway. A following response was that their existence scares people, so they shouldn’t be allowed to live.
- Question Four asked whether they thought the dissemination of information about AIDS in the school and in society was enough? Some answered that it was not enough, while others answered 'so-so.'

The rest of the questions had almost unanimous responses:

- Question Five asked whether they would devote themselves to the dissemination of information about AIDS. Everyone responded by saying that someone should do it but not them personally.

- Question Six asked whether they thought that AIDS was far from them. They all answered 'very far and it doesn’t have much to do with me'.

- Question Seven asked, if someone they knew was proven to be HIV positive, would they take care of him/her or donate money. They all answered no.

- Question Eight response to the to what they would do if they knew that their neighbour was HIV positive, they responded they would move immediately.

- Question Nine asked if they were HIV positive, they said they would absolutely not tell others about it.

- Question Ten response to how they would live on if they were HIV positive, only one person said that they would go to the hospital for medical treatment, and all the others said that they would not continue to live.

According to the results of the survey, my classmates have a general understanding of AIDS as a disease. But our infected people are being discriminated against, it’s harmful for them to let the public know who they are.

Thirdly, we are not aware that we all have a chance of getting infected. We don’t know that AIDS is a threat to every one of us.

Currently, the most serious problem among my classmates is not the lack of medical knowledge about AIDS, but the emotions we put on the disease. This compromises our understanding of AIDS and the patients. As an ordinary middle school student, I call for a positive social environment to match the dissemination of information on AIDS, so that we can end the fear and discrimination that keeps an understanding of AIDS far from us.

I hope that AIDS will be conquered soon.

(Submitted in November 1997, it won the first prize in May 1998)

Activity: Are You in Danger? (10 minutes)

Goal
Make the students realize the seriousness of the spread of AIDS and make them understand that everyone is responsible for the prevention of AIDS.

Materials
Enough numbered cards for each student.
One out of every ten cards should be picked out and recorded by the teacher. These selected numbers will be the HIV infected persons in the game.

Process
Distribute the cards to the students.
Each student is to sign his/her name on the card given to them and should then ask two other students for their signatures. When this is done, the students should then go back to their seats.
Pick out a volunteer from the class to keep track of the time it takes to complete the subsequent part of the game.
The teacher will call out the numbers of those who are HIV infected and ask the students with a card that corresponds to those numbers to first call out his/her own name and then the names of the other two who had signed his/her card. The students who are then subsequently called will also stand up and do the same. Repeat this process until there are no more students to be called.

Ask the student who was keeping track of the time to announce the amount of time the whole exercise lasted. This short amount of time illustrates the how quickly AIDS is spread to a large number of people.

Ask everyone to be seated and ask the ‘infected’ and ‘uninfected’ students to talk about how they felt during the game.

**Teacher’s Summary** (8 minutes)

Explain the rate of spread of AIDS and its devastating effects:

- Emphasize the fact that AIDS is rapidly spreading and that it is a big problem in Asia
- AIDS is not only a medical problem but also a social issue. AIDS is extremely harmful to society, as well as to individuals and families. Everyone is responsible for the prevention of AIDS.

**Thinking and Practice:**

**Collect and Analyze Newspaper Information** (7 minutes)

**Goals**

Learn about the news coverage on AIDS.

Develop the ability to collect and analyze information.

Build up a sense of responsibility for society.

**Process**

- Encourage the students to get information through various types of media, such as newspapers, magazines, radio and television.

- Classify the information and try to analyze it using the following questions:
  - What conclusions could we draw about AIDS if there was no coverage on it?
  - What is the proportion of the coverage on AIDS in the newspapers?
  - What is the significance of having this amount of coverage?
  - How does the media report the problem of AIDS? What do the media tell us about it?

- Encourage the students to form their own groups and use team work in carrying out the activity so they can learn to cooperate and share information with others.
IV TEACHING REFERENCE

The World AIDS Epidemic

Diagram to be included

The AIDS Epidemic in China

HIV infection is rapidly spreading in China. The first case of AIDS was discovered in 1985 in mainland China. As of December 31, 1999, a total of 17,316 HIV-infected cases have been reported, in the 31 provinces, autonomous regions and municipalities directly under the jurisdiction of the central government (excluding Taiwan, Hong Kong and Macao Special Administrative Regions).

These figures include 647 AIDS cases and 356 deaths due to AIDS (see figure 3). Since 1994, the number of cases reported has been increasing annually. Among the reported cases, there are 14,331 males, 2,673 females and 312 who did not specify their sex. The ratio of male to female is 6:1. Since 1994, there has been a large increase in the number of reported cases of HIV infection.

Among the population of intravenous drug users, 72.4% are HIV-infected. The data from the National HIV Surveillance Network indicates that the spread of HIV infection has increased among the sexually promiscuous population. Presently, the provinces or autonomous regions with relatively large accumulative totals of reported HIV-infected cases are Yunnan, Xinjiang, Guangxi, Henan and Guangdong.

Figure 3
Reported HIV/AIDS Cases in China

The history of HIV infection in China can be divided into four stages; Stage of Introduction, Spreading Stage, Stage of Increase and Stage of Rapid Increase.

The first stage, the Stage of Introduction, began in 1985 when most HIV-infected persons were foreigners or overseas Chinese.

The second stage was the Spreading Stage, occurred between the October 1989 and the end of 1994, when 148 cases of HIV-infection were discovered among drug users at the southwest border in Yunnan Province. During this stage, most of the people infected with HIV in China were drug users in that area. At the same time HIV-infection had been discovered among STD patients, prostitutes, and people who returned to China after working abroad or in other parts of China.

The third stage, the Stage of Increase, took place from the end of 1994 to the end of 1995. A considerable number of HIV-infected persons had been discovered among drug users, STD patients, floating populations, and paid blood donors. During this period, the dominant mode of transmission was through the blood (intravenous drug abuse, blood drawing and transfusion of blood and other blood products). The proportion of sexual transmission of HIV was increasing as well.

The fourth stage, the Stage of Rapid Increase, began in 1996. In this period, the number of newly discovered HIV-infected persons doubled and redoubled. 78% of people infected were between the ages of 20-40. The most dominant mode of transmission was still through the
blood, followed by sexual transmission. Mother-infant transmission was also increasing in number.

The prevalence of AIDS in China has already attained the fourth stage of rapid increase. Experts estimate that the actual number of HIV-infected persons in China has grown in excess of 500,000.

The prevalent nature of HIV and the experience of prevention and control of AIDS in different countries around the world indicate that now is the most critical moment in containing the rapid increase of AIDS in China. We must seize this opportune moment to implement different measures of prevention and control of AIDS. Otherwise, a pandemic of AIDS will occur in China, causing a disastrous loss in national economic development and stability.

The Harm of AIDS to Humans

AIDS is a social issue. Each member in society may become a direct or indirect victim of the prevalence of AIDS.

Effect of AIDS on Individuals

HIV-infected persons are often discriminated by society. Concern and care are seldom given by relatives and friends. In addition, finding out about their HIV status can cause great stress and can feel like being given a death sentence.

Once the HIV-infection develops into AIDS, the health of the patient deteriorates rapidly, resulting in even greater psychological stress and terrible physically pain.

Effect of AIDS on the Family

The discrimination against HIV-infected persons by society brings disaster to their families. As with the infected person, family members have to bear a heavy emotional burden, which can lead to conflict and even disintegration. As a result, HIV-infected persons tend to become alienated and homeless. They are shifted into different parts of society, causing other social problems.

Some HIV-infected persons are the main source of income of their families. When they are no longer able to work they instead have to pay heavy expenses for their treatment thus the financial situation of their families will worsen rapidly.

Families with AIDS patients may have to give up their children or their elderly members to be cared for by others.

Effect of AIDS on Society and Economy

The existing medical technology fails to cure AIDS. Upon reaching the point of the onset of AIDS, the patient will die in just a few short years or even months. Thus, AIDS is a threat to the health of human beings, increasing human mortality and shortening life expectancy.

The incubation period between the infection of HIV and the onset of AIDS is much longer than in other infectious diseases, which makes it a rather deadly disease for several reasons. HIV-infected persons do not have any symptoms and can unintentionally infect other people. People who come into contact with an HIV-infected person, who may not know anything about his/her HIV status until much later, do not adopt any protective measures. The fact that there is such a long incubation period until the symptoms manifest (10 years or more) will have a profound influence on society.
Sex is a major mode of transmission of HIV infection. Since sex is a physiological desire and human instinct, it is hard to guard against HIV transmission.

AIDS mainly attacks young adults 20-45 years of age, who are in the prime of life, the producers of society, breadwinners of their families, and the defenders of their countries. Loss of this adult population is irreparable to families and to the society.

The elite of society is not immune from AIDS. The experience in Europe, America, and Africa shows that the HIV infection rate among those who are well educated, or with a high level of scientific and technological knowledge, is the same as those among other populations. This is also another important segment of society that would be of a great loss to a nation.

How AIDS Affects Children

The Orphan Problem

The devastating impact of the AIDS crisis on children in the developing world has yet to be fully understood. The number of orphans, particularly in Africa, constitutes nothing less than an emergency, requiring an emergency response. As already impoverished societies struggle with this tragic loss, their hard-won gains in social development, including improvements in child health, nutrition and education, are being wiped out.

Magnitude of the Orphan Crisis

Loss is an inevitable corollary of disease and death, but the wrenching toll taken by AIDS is unique. So far, the disease has left 8.2 million children without one or both parents, with a vast majority of such children in sub-Saharan Africa. Figures are expected to reach 13 million by the year 2000, 10.4 million will be under the age of 15.

The personal tragedies of the children are enormous. There is also a social crisis occurring, as the most affected communities and nations, among the poorest in the world, struggle to care for the ill and a generation of orphans, on a scale unprecedented in human history.

In most parts of the industrialized world, no more than 1% of the child population is usually orphaned. Before the onset of the AIDS epidemic, societies in the developing world absorbed orphans into extended families and communities at a rate just over 2% of the child population. In contrast, a staggering 11% of children in Uganda are now orphans because of AIDS. In Zambia, 9% are orphans; in Zimbabwe, 7%; and in Malawi, 6%. Where the rate of women who are infected are high, so are the number of orphaned children.

These losses are not abating. In 35 countries, the rate at which children have been orphaned has doubled, tripled or even quadrupled in just three years, from 1994 to 1997. It is feared that due to AIDS, Asia will see its orphan population triple by the year 2000. Currently, according to the Joint United Nations Program on HIV/AIDS (UNAIDS), the number of children living with an HIV-positive parent is far greater than the number of children already orphaned. This leads to a disturbing prospect for the future.

Children who have lost their mother or both parents are society’s most vulnerable members. Socially isolated because of the stigma of AIDS, they are less likely to be immunized, more likely to be malnourished and illiterate, and more vulnerable to abuse and exploitation.

Finding the resources needed to help stabilize the crisis and protect children is a priority that requires urgent action from the international community.
The Impact of AIDS on Children’s Lives

In one of its most devastating and least visible consequences, HIV/AIDS is eroding precious and hard-won gains in infant and child survival in a number of countries in Africa.

In Botswana, for example, where the country has made impressive progress in child health, AIDS will be responsible for 64% of deaths of children under five. In South Africa and Zimbabwe, AIDS is projected to account for a 100% increase in child mortality. Some experts predicted that even more dramatic increases are yet to come. The US Census Bureau projected that by the year 2010, the mortality rate among children under five in Zimbabwe will be three and a half times as high as it would have been without AIDS, and infant mortality may double. In some African countries, hospitals report that three in four pediatric beds are taken by children with AIDS.

The impact on children extends beyond those infected, as millions in the hardest-hit countries suffer the loss of parents and caregivers, thus, incurring much greater risks to their health, nutrition and education. Mounting effects are already being seen in the nutrition of children living in households affected by AIDS.

A study in Kagera (Tanzania) found that food consumption in poorer families dropped by 15% after an adult in the family had died from AIDS. Such a decline can have a significant impact on a child’s development. Furthermore, children orphaned by AIDS run a higher-than-average risk of stunting, and stunting among orphans is around 50% according to the World Bank.

A fall in literacy rates in many countries is expected since children in AIDS-stricken households are taken out of school when families can no longer afford fees or when children are needed to help out at home or to earn an income. Orphans living in extended families are also generally the first to be denied an education. A study in Zambia indicated that in urban areas, 32% of orphans were not enrolled in school, compared with 25% of non-orphans not in school. In rural areas, there are 68% of orphans not enrolled in school as compared with 48% of non-orphans not in school.

Much of the disease’s economic impact remains difficult to measure. However, there is no question that increased health care expenditures and loss of family income are straining resources, placing a large burden on women in particular and putting children at risk of malnutrition, illiteracy and disease. AIDS is also decimating the ranks of the skilled and educated during their prime years, with potentially tragic implications for future development. A recent survey in Malawi indicated that the infection rate among schoolteachers was higher than 30%.

The burden is also great on already inadequate health care systems. In Zimbabwe, government projections indicate that HIV/AIDS will consume 60% of the health budget by the year 2005. In most developing countries, the disease is increasing the cost of health care and reducing its availability, which will have the greatest impact on the poor. In many communities, healthy children whose parents have died from AIDS are at a greater risk of dying of preventable diseases, because their illnesses tend to be attributed to AIDS, and thus, go untreated. There is evidence that orphans are less likely than other children to be immunized and to have their health care needs adequately met.
UNIT 3:
WAYS TO PREVENT AIDS AND TREAT HIV-POSITIVE AND AIDS PATIENTS

I THE TEACHING GOALS

This Unit covers:

- Ways to prevent HIV/AIDS.
- The ability to prevent HIV/AIDS.
- Scientific ways to treat HIV-positive and AIDS patients.

II TEACHING CONTENTS AND TIMETABLE

Duration: 60 minutes

<table>
<thead>
<tr>
<th>Contents</th>
<th>Duration</th>
<th>Key points for training</th>
<th>Materials needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Warm-up Activity: Hand Knot</td>
<td>10 min</td>
<td>Activate the class, emphasize the importance of team spirit.</td>
<td></td>
</tr>
<tr>
<td>2. Activity: Danger Zone</td>
<td>15 min</td>
<td>Make the students realize further the ways AIDS is transmitted and the ways to prevent it.</td>
<td>The whole set of cards</td>
</tr>
<tr>
<td>3. Case Analysis</td>
<td>20 min</td>
<td>Make the students express themselves and help them build up the right attitude to HIV/AIDS patients.</td>
<td></td>
</tr>
<tr>
<td>4. Teacher’s Summary</td>
<td>7 min</td>
<td>Enlighten the students with the foreign materials from the teaching reference.</td>
<td></td>
</tr>
<tr>
<td>5. Thinking and Practice</td>
<td>8 min</td>
<td>Encourage the students to participate in group activities and help them build up a sense of responsibility for society.</td>
<td></td>
</tr>
</tbody>
</table>

III TEACHING DETAILS

Warm-up Activity: Hand Knot (10 minutes)

Goal

Team members join hands to work for the same goal.
Process
1) Ask 10 students to form a circle in front of the blackboard, after having cleared away the desks and chairs.

2) Each student holds the right hand of the student opposite to them, and holds the left hand of the student to the left with his/her own left hand, creating a large human knot. Everyone can move his/her hands but cannot release their hands.

3) Everyone then tries to untie the large human knot. Students can tuck his/her head under hands or step over others’ hands. When the knot is untied, the students will find themselves forming a circle and holding hands with the neighboring persons.

4) Participants can ask on-looking student to help them untie the knot. After the game is over, the students can all go back to their initial positions.

5) The teacher asks: ‘What can you learn from this activity? How do you feel?’ Ask one or two students to answer the questions.

Teacher’s Summary
AIDS is the common enemy of humankind. The whole of society should work to eradicate this epidemic. One must have a social responsibility to prevent AIDS.

Activity: Danger Zone (15 min)

Goal
To enhance the knowledge of HIV/AIDS by learning ways to prevent AIDS and creating the right attitude for life.

Teaching Materials
Cards written with ‘high risk’, ‘low risk’ and ‘safe’. Divide the class into groups of 6, each group with a set of cards.

Each group has a set of notes written of everyday actions (refer to the attached page 1 and 2 for the content of the cards).

Process
1) Ask each group to classify the cards according to the degree of danger involved, supposing that the risk of HIV exists in each situation.

2) After the classification is done, the students can walk around and look at the work of other groups, but they cannot move the cards of other groups, and they have to remain silent.

3) Discuss the differences of classification among different groups. Each group is to give present their own classification and listen to the opinions of other groups.

4) The teacher asks the students to go back to their own groups and asks them whether they have changed their minds about any of the classifications.

5) The teacher writes out his/her summary (on the blackboard or with a slide projector), and reiterates the actions that will or will not transmit AIDS and how to prevent it.
Teacher’s Summary
Tell the students clearly that all the answers should be based on the fact that the threat of HIV exists everywhere. In our lives, we cannot tell whether we are standing next to an AIDS patient or not. So we should always be on the alert and to always make the safest decision.

Case Study: The Story of Ryan (20 minutes)

Goals
To try our best to help and understand AIDS patients and to treat them with compassion.

Process
• The teacher reads the story or asks a student to do so.
• Divide the class into groups of 4 or 6 and give the groups different topics of discussion.
• Before the class, the teacher can write out the topics (e.g. on the blackboard or with a slide projector).

Topics for discussion
• If you were Ryan’s good friend, how would you treat him? Will you help him?
• If you were the principal of Ryan’s school, what would you do? Would you expel him?
• If you were the father or mother of Ryan’s classmates, would you let your kid stay in the class?
• If you were a journalist, how would you cover the story? (Refer to the Thinking and Practice section in Unit 2.)
• What did Ryan think about his disease? How did his attitude inspire himself and other AIDS patients to fight AIDS?
• Suppose that your teacher, who you love very much, is HIV positive, do you think he/she should go on teaching?

The Story of Ryan
Ryan Welt was a grade 7 student in a high school in the state of Indiana in the United States of America. He was infected with HIV when receiving contaminated blood.

In December 1984, Ryan was banned from school for being HIV positive. Before that, Ryan got along well with his teachers and classmates and he did well in his studies.

In August 1985, Ryan’s lawyer tried to convince the judge that Ryan’s disease was not dangerous to other students. But he failed to get Ryan back to school. For his study, his house was installed with a phone line connected to the school, so Ryan could listen to teachers through the phone.

However, Ryan, his mother and lawyer never gave up. The lawyer raised Ryan’s issue to the authorities at the education department of the state government. This time he won.

It was very unfortunate that parents in the local community were unhappy about the ruling. Fearing that their children, by attending the same school with Ryan could become infected, they threatened to transfer their children to other schools.

In February 1986, Ryan returned to school again. But he lasted only one day this time. The lawyer representing the parents against him won. After great efforts, Ryan finally got permanent permission to study in school. Apart from that, Ryan became a well-known figure for his lawsuit and his unremitting struggle against AIDS in newspapers,
magazines, a TV show - he was everywhere. His courage also won him a great deal of donations, gifts and medals from various organisations and individuals.

Ryan’s fame didn’t keep his health from deteriorating though. Like other AIDS patients, he began to suffer from various symptoms. He managed to get on a TV show before he was hospitalised. In the show, he called for more recognition and care for AIDS patients.

Millions of people began to learn about AIDS because of Ryan - he changed people’s attitudes towards the disease. Ryan died in September the same year.

Teacher’s Summary (7 minutes)

Use More Care, Eliminate Discrimination.

Lead the students to think: How does an AIDS patient feel if he/she is discriminated by society? Make the students understand that some of the discriminated AIDS patients seek revenge on the society by contaminating blood donations and by prostitution. Lead the students to treat AIDS patients in the right way and mention the disastrous effects of discrimination.

Thinking and Practice (8 minutes)

Goals

Develop students’ creativity, their ability to empathize and their problem solving skills. Encourage all students to take part in the group activities.

Forms

Notes:
The following is a true story from Southwestern China. The teacher can read the story to the class or distribute copies.

The students will write back to the mother as her trusted friends, trying to solve her problems with the AIDS knowledge they have learned. Encourage the students to put a lot of thought into the letter with which the teacher can later organize students to transform into a script for a play to be performed in the fourth class.

Form One: A Letter to an HIV Positive Mother

To my trusted friends,

I used to have a quiet and happy family life in a small town in south-western China. Two years ago, my husband suddenly told me that he had gotten AIDS. One month later, medical exams showed I was also HIV positive. At that time our kid was in junior high school, in grade three.

My life was never the same again. My husband disappeared a little later, leaving us with a lot of debts. My colleagues avoided me like I was a ghost after they heard the news. They used to love my cooking in the restaurant that I ran, but I couldn’t do that job anymore. So I left the job that I loved so much, and got another one as a half-day cleaner. I hated this kind of life so much that I cried all the time when my son was not around. I tried to end my life a couple times, but each time I thought of my boy, and couldn’t go through with it.

Later a doctor called Zhang came to see me. She sat right beside me the first time we met. My tears ran down my cheeks because she was the first person who had gotten so close to me since I had been infected. I realised then that there are kind people in the world who care about people like me.

Doctor Zhang helped me understand a lot of things, telling me that as long as I live positively, I would be able to watch my child get into senior school, and even college. She also encouraged me to step out of the shadow and to help other AIDS patients, because
they might also be suffering from the same kind of despair. I really want to do something, but the problem is that my son still doesn’t know that I have AIDS. How can I tell him this? How can my son continue to go to school if I tell everyone ‘I have got AIDS’? How can he live with people’s discriminating look?

But he'll know it someday. How do I start? Should I wait until he gets a little older? Where do I go from here?

A Worried Mother

The Box of Ideas

<table>
<thead>
<tr>
<th>The ideas for the mother:</th>
<th>The ideas for the reactions of the son:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Write a letter to her son.</td>
<td>The son has already known about his mother’s disease, but he has kept it a secret because he doesn’t want his mother to be sad.</td>
</tr>
<tr>
<td>Tell her son through a recording.</td>
<td>The mother tells her son in some appropriate way, the son was surprised and sad, but he’s resolved to fight the disease together with his mother.</td>
</tr>
<tr>
<td>Tell him directly.</td>
<td></td>
</tr>
<tr>
<td>Talk to the principal of his school first.</td>
<td></td>
</tr>
<tr>
<td>Ask Dr. Zhang to tell him for her.</td>
<td></td>
</tr>
</tbody>
</table>

Form Two: Proposal

Write a proposal in the name of the whole class to the society, including the messages of HIV/AIDS prevention, and fair treatment to HIV positive and AIDS patient.

Form Three: Preparation for Role-play

Taking the ‘Letters to a HIV positive mother’ as references, create script for next class. Use peer leaders.

IV TEACHING REFERENCES

Two Different Stories

Community A

Every time I coughed, people turned around to see how close I was to them. One day I went to see my friend but she did not seem happy to see me. I asked her what was wrong and she mumbled that her parents didn’t think that we should see each other anymore.

The shopkeeper of the local restaurant recognized me when I asked for a glass of water. He wouldn’t let me have any. He gave me a can of coke instead. As soon as I finished eating he threw away all the dishes I had used.

My parents heard from a friend that one of my teachers didn’t want me back in school. I couldn’t believe it. He was my favorite teacher.

My mom got it the worst. She had four friends at work who wouldn’t even talk to her anymore. In the supermarkets, she wasn’t allowed to touch any of the food. Some stores didn’t even want to take money from her.

The kids from my school were warned by their parents that I had HIV, so they stayed away from me. They told me I would have to use paper plates, plastic cups, spoons and forks that could be discarded after use. They also thought I shouldn’t use the toilets and water fountain.

One kid took one of my books from me and wrote bad things about me in it. He threw it on the street and then ran away laughing at me.
No one would play with me anymore. When I asked two friends to come over they said ‘no’. Their parents had told them they were not to have anything to do with me.

Community B

Students in the community came by to see me. They said they wanted to welcome me to the school and that now I would know some of them on my first school day.

I found out that the school officials had talked to the students and teachers about how you can get AIDS, and that they had nothing to fear. They even informed the press and the communities in town. What a difference compared to community A.

Kids told their parents how one can get AIDS, and that they weren’t scared of me and they wanted to be in the school with me. One family asked their kid to stay home but he said that he didn’t want to.

When I walked into my classroom, a number of students said, ‘Hey, Ryando! Sit beside me!’ One of my classmates was transferring to another city and gave me a big hug before leaving. I felt eight feet tall.

A famous soccer player visited our community and I was invited with my family to watch the big game. Afterwards, he signed his name in my book and told me he was proud of me.

When I turned 18, a man offered me a job at his vegetable stand. This was my first chance at making money. I guess he took a chance on me. Most people were very nice and stopped by and talked with me.

Some even brought food for us – bread, fruit, and jam. When I became ill they brought us a whole meal at home. That sure helped mom.

Care and Support for People Living with HIV/AIDS

The Family of Love in Beijing You’an Hospital (refer to colored page 3).

Since 1990, this organization has treated more than one hundred AIDS patients, giving direct consultation, medical exams, life guidance and family services to more than 600 inquirers.

The goals of the organization is to:

- Provide an all-around medical service
- Provide help and psychological support.
- Persuade social forces to participate in the fight against AIDS.
- Promote healthy ways of living.
- Reduce discrimination in society.

Tel: 86-010- 63292211- 443
Email: zhak@soho.com

The Family of the Red Ribbons (ref. colored page 3)

January 1, 1999, the Family of the Red Ribbons was founded in the STD treatment center of Beijing Ditan hospital. The institute was established to care for AIDS patients. It has provided a hotline service to more than 8000 patients and face-to-face consultation and clinical service to more than 20,000 STD and AIDS patients in the past year.
The timetable for the Family of the Red Ribbon’s activities is:

<table>
<thead>
<tr>
<th>Time</th>
<th>Contents</th>
<th>Participants</th>
<th>Host</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan. 6</td>
<td>Talk about AIDS</td>
<td>Patients/ HIV positive people, lawyers, medical workers, UNAIDS</td>
<td>Doctor Xu Keyi</td>
</tr>
<tr>
<td>Mar. 3</td>
<td>Why should we be so afraid of AIDS? The experts talk about AIDS</td>
<td>Patients/HIV positive people, medical workers</td>
<td>Professor Cao Yunzhen</td>
</tr>
<tr>
<td>Jul. 5</td>
<td>AIDS is not the end of your life. Accept yourself and make yourself accepted by society</td>
<td>Patients, the family of HIV positive people, people who care about AIDS patients</td>
<td>Fu Aimin</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>UNAIDS</td>
</tr>
<tr>
<td>Aug. 7</td>
<td>You can still enjoy life even if you are infected</td>
<td>Patients/HIV positive people and their family</td>
<td>Legal advisor Wang Bingyan</td>
</tr>
<tr>
<td>Sep. 1</td>
<td>Family care is the best medicine for AIDS patients.</td>
<td>Patients/HIV positive people and their family</td>
<td>Doctor Xu Lianzhi</td>
</tr>
<tr>
<td>Nov. 3</td>
<td>Broaden the vision (Watch videotapes)</td>
<td>Patients/HIV positive people and their family</td>
<td>Doctor Lun Wenhui</td>
</tr>
<tr>
<td>Dec. 1</td>
<td>Quality time in the <em>Family of the Red Ribbons.</em></td>
<td>Patients/HIV positive people and their family, medical workers.</td>
<td>Doctor Lun Wenhui</td>
</tr>
</tbody>
</table>

**Thailand: Clear Skies Project** (See inside back cover)

In 1991, an AIDS infected couple launched an organization in northern Thailand to help AIDS patients and the HIV-positive. Its mandate is to serve AIDS patients with AIDS infected staff. They have gone public about their disease and have called for mutual help among AIDS patients and for society to accept them. Their main activities are:

- The teaching of medical knowledge (from the 9th to the 15th day of each month).
- Family visiting.
- Support and contact related organizations.
- Pass along information on AIDS.

Email: clearskies@usa.net
UNIT 4:
USE HIV/AIDS PREVENTION FOR A HAPPY, HEALTHY AND SUCCESSFUL LIFE

I THE TEACHING GOALS
The following topics are discussed in this unit to:

- Guide students to build up positive attitudes towards life.
- Provide students with the necessary Life Skills training.
- Make students realize that HIV/AIDS prevention is a lifetime matter.

II TEACHING CONTENTS AND TIMETABLE
Duration: 60 minutes

<table>
<thead>
<tr>
<th>Contents</th>
<th>Duration</th>
<th>Key points for training</th>
<th>Materials needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Warm-up Activity</td>
<td>8 min</td>
<td>Help the students build up the right attitude and values towards life.</td>
<td>Large sheets of blank paper and color pens.</td>
</tr>
<tr>
<td>2. Role Play</td>
<td>30 min</td>
<td>Team spirit, imagination, evaluation and the tactful ways to resist pressure from friends.</td>
<td></td>
</tr>
<tr>
<td>3. How to Make Decisions</td>
<td>10 min</td>
<td>Learn to admire and compliment others</td>
<td>Cartoon cards or paper</td>
</tr>
<tr>
<td>4. The Art of Life</td>
<td>10 min</td>
<td>Discuss friendship, love, a happy life, and the right ways to handle the relations between opposite sexes.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10 min</td>
<td>Discus friendship, love, a happy life, and the right ways to handle the relations between opposite sexes.</td>
<td></td>
</tr>
<tr>
<td>5. Conclusion Activity</td>
<td>7 min</td>
<td>Check students’ improvements on attitude and knowledge after the class.</td>
<td></td>
</tr>
<tr>
<td>6. Thinking and Practice</td>
<td>5 min</td>
<td>Try to get support from the students’ parents.</td>
<td></td>
</tr>
</tbody>
</table>

III TEACHING DETAILS

Warm-up Activity: The River of Life (8 minutes)

Goals
Help students to build up a clear and positive attitude towards life, inspire students to hold on to the present and work for their ambitions and a better future.
Material
Blank sheets of paper and color pens

Process
1) Divide the students into groups of 6. Each student will have a sheet of paper and the color pens are to be shared.
2) Select a certain point in time in the past and ask everyone to draw his/her life journey from that point. Firstly, draw a winding river to represent the time since that point. Students are then to mark down the important events that have happened in his/her life along the river. Happy events are marked on the upper side of the river, and unhappy events and challenges on the lower side.
3) Everyone shares his/her story and experiences within the group.
4) Select a representative from each group to present the discussion to the class.

Important:
Before the activity, the teacher displays the sample picture and gives details on the activity.
Make clear the designated duration for each part of the activity and keep reminding the class of the time during the activity.
The students should try to use pictures to express their ideas.

Role Play (25 min)

Goals
Encourage the students to fully use their imagination and to build up team spirit.
Guide the students to think about and analyze their own life.

The Themes
Love our Lives and Avoid Contracting AIDS
The script is taken from the article of ‘Write back to an HIV infected mother’ in the Thinking and Practice section of the third class.

Resist Peer Pressure
- For 12 to 15 years old: Must I give expensive birthday gifts to my friend?
- For 16 to 18 years old: Is it cool to smoke?

Scripts for reference:

**Must I give expensive birthday gifts to my friend?**
*(Fang and Yan are good friends, and their friend, Bei Bei, has a birthday coming up)*
Fang: Bei Bei’s birthday is coming up!
Yan: Right, what should we give her as a gift?
Fang: She gave me a 85 yuan doll last year for my birthday. But I don’t have much money to buy her something as good as that!
Yan: It’s no big deal. Real friends can’t be bought with money. Why not just draw her a picture, you draw very well.
Fang: Isn’t that a little too stingy?
Yan: I don’t think so. We still depend on our parents, we don’t earn our own money, how could we spend lavishly?
Fang: What are you going to give her then?
Yan: I’ll make her a birthday card, with all my best wishes for her written on it.
Fang: Could I just draw a beautiful picture on your card then?
Yan: That would be great. Bei Bei is going to love it!

Is it Cool to Smoke?

Characters:
Bean; 15 year old student, male, he loves to study and is always willing to help people.
Lemon; 15 year old student, male, Bean’s desk mate in junior high school.

Lemon: (yells in excitement) Hi, Bean!
Bean: How nice to see you again, Lemon! It’s been a long time! How’ve you been?
Lemon: Not too bad. I’ve been hanging out with just a couple of friends lately.
   How are you?
   (He brings out a couple of cigarettes, hands one to Bean, lights another one for himself.)
Bean: God! You, you’re smoking! I thought you said you hated to see adults smoke, didn’t you?
Lemon: I was too young then. Now I know that having a cigarette when I’m feeling down can make me feel like being in heaven. Come on, try it.
Bean: Who showed you how to smoke?
Lemon: Who needs instructions for smoking? Everyone smokes, even girls do it. It’s so cool! Come on! Don’t you want to be cool? It might irritate your throat at first but you’ll get used to it.
Bean: Forget it, I don’t want my life to be cool and short. Cigarettes are harmful and it won’t do you any good. Moreover, smoke also seriously harms those who stay in places filled with smoke, even if they don’t smoke! You’ll suffer from various symptoms after smoking for awhile.
Lemon: I know smoking is bad for the health. But when I was feeling down, I didn’t know how to kill time, I just had to smoke to forget the bad things.
Bean: Smoking only make you feel worse. You have lots of ways to get over bad things. Like talking to good friends, taking a walk or something. Don’t you like playing football? Try kicking that thing for 5 hours, or just yell when there’s nobody around you. Don’t smoke. It’s the most stupid thing in the world to risk your own health.
Lemon: You have something there.
Bean: Talk to your buddies if you can. Smoking doesn’t make you look cool.
Lemon: Alright. Come on, let’s go play football.
   (He extinguishes the cigarette, and throws it into the trash can.)
How to Make Decisions: T-Analysis (5 minutes)

Goal
Teach the students how to make a decision when they face a tough situation.

Process
1) Have demonstrations related to the theme of the role play.
2) The method is called the *T-Analysis*. Draw a T shaped figure on the paper and put the question to be analyzed on the upper side of the T, the positive elements of the question to the bottom left of the T, and the negative elements to the bottom right.

For example:
(For junior high school) Must I give expensive birthday gifts to my friend?

**T-Analysis Chart**

<table>
<thead>
<tr>
<th>If YES</th>
<th>(Positive)</th>
<th>(Negative)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>* Enhance Friendship</td>
<td>* Add to parents’ economic burden</td>
</tr>
<tr>
<td></td>
<td>* Feel good</td>
<td>* Possibly make friendship rotten.</td>
</tr>
<tr>
<td></td>
<td>* Return good for good</td>
<td>* Creates psychological pressure and undermines the sense of value in the future.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If NO</th>
<th>(Positive)</th>
<th>(Negative)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>* Save money</td>
<td>* May lose a friend</td>
</tr>
<tr>
<td></td>
<td>* Create practical ways</td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Stick to principles</td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Stand peer pressure</td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Win sincere friendship</td>
<td></td>
</tr>
</tbody>
</table>

**Telling Students the Three Steps of Decision-Making.**

Try to collect information and comments from various sources and list them.
Consult trusted friends or older people.
Evaluate the positive and negative elements at least three times to make the best decision.

**Teacher’s Summary**
- Make friends who are helpful, get to know more knowledgeable people and create a good environment for growing up in.
- Under pressing circumstances, when information is limited and emotions are high, try not to make a hasty decision.
- Do not regret the wrong decision if you really tried. Keep using T analysis to make the next decision.
The Art of Life

★ For Junior High School: Human Mirror (10 minutes)

Goals
- Help the students realize their virtues and to appreciate other people’s virtues.
- Learn to encourage themselves and compliment others, and
- Give them the confidence to work for a healthy, happy and successful life.

Process
1) Each student writes three of his virtues on a piece of paper.
2) Each student lists three of his desk-mate’s virtues.
3) Tell each other what his virtues are.
4) Be honest when telling the virtues, be graceful and face the talker when listening to the compliment, and
5) Thank each other when the telling is done.

Teacher’s Summary
- Learn to admire and compliment others.
- Everyone has endless potential.
- Resist temptations. The best way to handle pressure is to improve oneself.
- Help more people with one’s own virtues and confidence.

★ For Senior High School: Rendezvous on the Hills (10 minutes) (See pic. 6)

Goals
To teach young people how important it is to learn how to properly develop and deal with the opposite sex for a happy life in the future.

Process
1) Divide the students by sexes for discussion.
2) The boys discuss what the boy in the picture could possibly be thinking, the girls discuss what the girl in the picture could possibly be thinking. Then change tasks and have each group analyze the other character. Have a student in each group take notes.
3) Select some representatives to make a presentation.

Important
This is a very interesting topic for students and the class should be fully activated. The teacher should be prepared for possible difficult circumstances that might arise during the discussions.

Teacher’s Summary
Friendship and premature love (see class ref.).
How to avoid sexual assault (see class ref.).
Conclusion Activity: Where are You? (7 minutes)

Goal
Test how the students’ knowledge and attitude have improved as a result of the class.

Process
1) The teacher puts the following questions on the blackboard:
   - Do you think we have to learn about AIDS?
   - Do you have the confidence to stay away from AIDS?
2) Divide the blackboard into three parts, left, middle and right, and write the following respectively on the parts: Absolutely Necessary / Necessary / Unnecessary
   Absolutely Confident / Confident / Not Confident
3) Ask 10 to 15 students to stand in front of the three parts according to their own attitude towards AIDS thus forming three groups.
4) Ask them to tell the class in simple words why they choose the part they did.
5) Then the teacher says: ‘If anyone of you think you are convinced by the students in other groups, you can abandon your position and join them.’
6) Ask the students who have changed positions to tell the class why they did so.
7) Ask the on-looking students to give their opinions.

Teacher’s Summary
- We have to guard against AIDS all of our lives.
- Make clear your life goals through ‘The river of life’. Feel what it’s like to be in others’ shoes through role playing. Learn to make rational evaluations through ‘Decision making’. Learn to deal with the opposite sex with more confidence through ‘Story on the mountain’ (or learn to admire and compliment others through ‘Human mirror’). Each of the four classes is expected to make the student realize that AIDS prevention is closely related to one’s life attitude and sense of value.
- The ones with a positive attitude towards life will keep their life journey away from AIDS and will have greater chances to be happy and successful.
- The society is an interrelated family. Everybody needs help sometimes, so we should try to help others and protect ourselves.

Thinking and Practice:
Parents Involvement in AIDS Prevention Education (5 minutes)

Goals
To involve parents and the family in AIDS prevention education

Family education, the relation between parents and the child is of vital importance to student’s growing up and their sense of value. Many parents have realized the harm of AIDS and are supportive of schools in having related courses. Some have reservations, and most of them find it extremely difficult to talk about sex with their children as many lack AIDS
knowledge themselves. Therefore, it would be significant and realistic to bring parents and other family members to the AIDS prevention class.

Process

1) The students write a letter to their parents with the AIDS knowledge obtained from their school, emphasizing how to prevent AIDS and how they feel.

2) After consulting the management of the school, the teacher holds a meeting for parents on AIDS prevention, or invite some enthusiastic parents to a seminar, so as to combine the AIDS education with family education and the students’ comprehensive improvement.

Combining AIDS Prevention with School Activities

Goal

Education of health in classes is somewhat limited for students, so various after-class activities are needed to popularize AIDS knowledge. The following activities have been proven to be effective

Forms

Speech contest and short drama contest

Spreading the AIDS Message within Society

Goal

To help students build a sense of responsibility for society and to take part in the spread of AIDS knowledge under the instruction of their teacher.

Forms

Carry out AIDS knowledge popularization activities in parks during holidays.
(See Chapter Six, Nine and Ten of the reference material in Part II.)

IV TEACHING REFERENCES

Parents Involvement

Sample Letters to Parents:

Instructions for HIV/AIDS Family Education

Dear parent/guardian,

Our school is starting a new program on AIDS education. Your child will learn about AIDS and how to protect him or herself from getting this terrible disease, and other sexually transmitted diseases.

AIDS is a problem in our country, and young people are at risk of getting infected. They need information and skills in order to avoid getting infected. Education about sex and AIDS does not encourage young people to have sex; rather it makes them realize the risks involved and enables them to make responsible decisions about delaying sex or protecting themselves. Studies have shown that this kind of education is most effective if given before young people become sexually active.

Your interest and support in these activities will be most valuable. If you have any questions about the program do not hesitate to contact me.

Yours sincerely,

(Name of school director, teacher, or secretary of school board)

Dear parent/guardian
Your son/daughter will be part of a new program at school about AIDS and other sexually transmitted diseases. He/she will learn important information and skills to help prevent him/her from becoming sick with these serious diseases. For example.

[add here a brief description of the program]

It is important for you to help your son/daughter with his/her learning. You can do this by:

- Asking your child what he/she learned at school about AIDS and other sexually transmitted diseases.
- Reviewing activities that have been done at school with your child or activities that will be sent home with your child.
- Discussing how you feel about these serious diseases.
- Listening carefully and calmly when he/she wants to talk about the subject.

Thank you for your help.

Yours sincerely,

(name of school director, teacher, or secretary of school board)

Sample Instructions to Parents
How to talk to your child about HIV, AIDS and STDs:

- Read the booklet on your own
- Select a quiet time when you and your son or daughter have time to talk
- Start with one easy activity example page
- Have your child read the information to you
- Listen carefully and calmly. Ask for and listen to your child’s feelings and opinions
- Try to avoid ‘preaching’ to your child but be sure to express your feelings and opinions
- If you or your child feel uncomfortable, stop and try again at another time.

Questions Regarding HIV/AIDS/STDs

General Questions:
- What did you learn about AIDS today/this week/during the course?
- What was the most interesting part of the lesson/course?
- What was the most important information that you learned?
- What did you think about the lesson?
- What did the other students think, say, feel, about these topics?
- Were you able to understand the activity? What did you find easy or difficult?
- Would you read the activity to me and explain the information?
- Can we do the activity together so you can help me with the questions and answers.
- What do you think is important for me to know?
- How does the information apply to you?

Specific Questions:
- What is AIDS or STDs (sexually transmitted diseases)?
- How does one get HIV or AIDS?
- How can you avoid getting infected?
- How is one tested for HIV?
- How do you know if someone has AIDS?
- What happens if you live close to someone with AIDS?
- Is there a cure for AIDS?

Other Questions:
- How do you think a person would feel if he/she had HIV or AIDS?
- What things could you do to help a person with AIDS?
- How would you feel if there is someone in your class with HIV?
- Why are people with AIDS sometimes treated unkindly?
- Are you frightened about the AIDS situation? If yes, why?

Friendship and Love

An Understanding of ‘Friendship and Love’

Is it possible that young boys and girls establish pure friendship in campus? How far should they go? What is love that is not mature? How can they prevent falling into such premature love? How should they be taught about it in school?

Every high school would have to worry about the above questions. Firstly, we have to make it clear what friendship is, and what love is. Is there a clear line drawn between the two?

The dictionary defines friendship as ‘fellow relation between friends’. Those with the same interests and hobbies, or have similar personality will form this kind of relationship which is about mutual care and help. The feeling is strong and deep, based on mutual understanding. It doesn’t matter whether you are of the same sex, the same age or have similar characteristics. The most important characteristic of friendship is that it is not a one-to-one thing. It could be formed among several people. It could last for as short as one day, or it may last for a lifetime.

When friendships end, it doesn’t have to hurt, because it could be the result of many things. People might change their circle of friends as they grow older or the circumstances could change. But there are some friends who share a lot in common and would maintain their friendship forever.

Love is different. It means the following things: the mutual attraction of appearances between two people of the opposite sex, the mutual understanding in spirit and the acknowledgement of each other’s intellect. Love is consistent. Loving someone means your fates are linked. One’s pursuit of someone involves pursuing something psychologically, mentally and materially in him/her.

There are also sexual intentions. When love reaches a certain stage, the couple would look to get married for socially acceptable sexual intercourse, through which they vow to each other a lifetime of loyalty.

Adolescence is the best time in one’s life. It may bring one romance and unforgettable episodes. One may receive cards for Valentine’s day, love letters or ‘I love you, I like you’ notes. How would you feel if this happened to you? Panicked? Scared? Excited? Happy?
Confused? This calls for a discussion on how high school students should deal with getting ‘love letters.’

When reaching the age of twelve or thirteen, youths experience dramatic physical changes, and they want to hang out with the opposite sex. It’s a natural desire that comes with age. It’s a good thing to get love letters or Valentine cards as it shows you have charm and that you are noticed by the opposite sex.

However, one should understand that the feelings of ‘like’ or ‘love’ in this period is mainly an instinctive sexual attraction and not truly the mature love, affection, and responsibility that comes later in life.

In China, high school students spend a lot of time studying, so the exchange of love letters may become a serious distraction. However, teachers and parents tend to get too hard on them about love and link the incident to morality, criticizing or punishing students for what they did. That’s a hard blow that usually upsets students. Therefore, we should help them with this part of growing up and teach them how to properly fraternise with the opposite sex.

The following principles could be a guideline for helping students deal with this ‘love letter problem.’

**Be friendly.** You should be friendly to the one who has written you love letters. Hostility and bias should be avoided. You can talk to him/her or simply write back, making it clear to him/her that you are still students, it’s too early for love and you should both concentrate on your studies. Don’t forget to tell him/her that you are still friends.

**Keep the secret.** You ought to keep the business between just the two of you. There’s no point in letting everyone know. If the person you are dealing with doesn’t get the message or he/she is more than you can handle, don’t hesitate to talk to your parents, teachers, psychiatrists or legal workers. They should also keep the matter a secret.

**Keep a low profile.** Public condemnation should be avoided. Keep a low profile and don’t make a fuss about it. You should care about your schoolmate’s reputation and future.

**Encourage.** Understand that the one who wrote you a love letter is not necessarily a rascal. It’s normal among most young students in their adolescence. Their courage to express themselves to the opposite sex should be recognized. You can simply write back ‘We still have a long way to go. I’m sure to consider you in the future. Let’s just see what will happen. Encouragement gives people hope for the future, and a healthy relation between a person of the opposite sex is a good thing. So all we have to do is lead students towards the right way to get along with each other, which is good for their age.

**Make more friends.** According to youth psychology, it takes a long time for the normal contact between two people of opposite sex to turn into love. It usually proceeds in the following sequence: Group meeting - smaller group meeting - selective meeting - stable dates - the beginning of love. High school students are still on the first two phases, with a wide range of friends. They shouldn’t form a two-person world. Only through the comprehensive contact with the opposite sex will they get to know it more and make preparations for their future love.

**Learn from each other.** We should learn from the opposite sex, learn from their strong points that can offset our weaknesses. We shouldn’t brand the love-letter writers as bad people. Instead, we should be objective and recognize their virtues.

**Control yourself.** Love letters and short notes can push students into a whirl of one-sided love or sexual fantasy. It distracts them from their study and may affect their physical and mental health. Therefore, high school students should learn to control their emotions and sensibilities. It’s not about oppressing your mind, but using scientific methods to adjust your thoughts with your will and wit. Take part in positive group activities and gracefully deal with the opposite sex in a way that high school students should.

**Maintain pure friendships.** When still at school, youths are not yet physically and mentally mature. They have to study and have no earnings. They lack knowledge of society and life.
They also don't know what love is about, and therefore, they are not able to offer love and take on the responsibility. So all they should have with each other is pure friendship, and love and sex out of the imitation of adults is not appropriate.

We believe high school students can be at peace with their desires if they can understand the above principles. Young boys and girls are forced by their physical changes and sexual consciousness to write love letters.

The drive can be short or it could last for a while and force others to be involved. So if you receive notes, love letters, Valentine cards or something similar, you don’t have to think too much of it. The best way to deal with it is not tell anyone about it, such as your teachers, parents or even good friends.

You need to understand and respect people’s good intention, their dignity and privacy, even if it feels like you can’t contain it. First, calm yourself down, and then go on dealing with him/her like nothing has happened. Tactfully avoid being with him/her alone and make him/her realize your unwillingness, in a way that doesn’t hurt him/her.

Your calmness will deeply affect him/her, and will calm down his/her impulses. After experiencing episodes like this, you will make a major a step towards maturity.

**Student’s Comments**

**Yu Shi** (16 years-old):

Puppy love happens mostly out of curiosity, which can sometimes result from parent’s protective behavior. For example, when there are intimate scenes on TV, parents will always try to get their kid to look away from the screen using various excuses. But the kids would think: ‘Why am I not allowed to watch? Why can’t I watch?’ Then they’ll try everything to see what they want to see, and once they do, they will think: ‘What’s wrong with that? It’s so interesting!’ this can then lead to the thought: ‘What if I could do the same intimate thing with him/her! What if I can do whatever I want!’ That kind of curiosity starts puppy love.

**Liu Jia** (17 years old):

Love is great, love is sacred. Therefore we should never say love carelessly to degrade the word. We should keep the word deep in our hearts when we are still young, until the day our true love arrives.

Mr. Liang Xiaosheng, the famous writer said that a woman is like a college, and a man can learn a lot from her. Man is also like a college, and in that college a woman can become mature and perfect herself.

I don’t think teachers should brand everything between young boys and girls as premature love and try to strangle it.

It’s now the 90’s, young people should abandon the rotten idea of drawing a strict line between two people of the opposite sex and treat the opposite sex with a true heart and in the right way.

**Zhuo Yang** (18 years old):

The mutual attraction between boys and girls during high school is a normal friendship. It shouldn’t be branded as premature love. For us girls, there is nothing wrong with being attracted to boys and to hang out with them. The important thing is that we have to behave ourselves, avoid being phony, use our wit and grace to gain respect and pure friendship from boys.
Preventing Sexual Assault

To prevent this type of situation developing:

- Always be alert to the possibility of sex assault by evildoers.
- Give no credence to a stranger.
- Try not to stay in a secluded place alone and if possible, don’t go out at night alone.
- You need to get permission from your parents before going out, and must inform them where you are going.
- Don’t visit video game arcades, billiard rooms, karaoke bars, and bars except in cases of necessity.
- Don’t accept money, gifts or toys presented by strangers. Don’t accept a lift in a stranger’s car.
- If you come across someone who is committing a crime, leave and call the police immediately to report the incident.
- Call for help loudly and run quickly to where there are many people if you come across the threat of sexual assault.

Juvenile Delinquency in China - General Situation

Figure: Age and Criminal Pattern of Young Offenders
Sentenced by the Courts Country-Wide (1997)

Qualified Personnel in China in the 21st Century - Trends

<table>
<thead>
<tr>
<th>No</th>
<th>More people</th>
<th>Fewer People</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>traditional industry</td>
<td>high-tech industry</td>
</tr>
<tr>
<td>2</td>
<td>good in carrying forward tradition</td>
<td>good at innovating</td>
</tr>
<tr>
<td>3</td>
<td>monofunctional</td>
<td>multi-functional</td>
</tr>
<tr>
<td>4</td>
<td>at low or middle levels</td>
<td>at higher level</td>
</tr>
<tr>
<td>5</td>
<td>with little education</td>
<td>with higher education</td>
</tr>
<tr>
<td>6</td>
<td>office and institution</td>
<td>enterprise</td>
</tr>
<tr>
<td>7</td>
<td>city</td>
<td>rural and mountainous areas</td>
</tr>
<tr>
<td>8</td>
<td>secondary industry</td>
<td>productive &amp; communication fields</td>
</tr>
<tr>
<td>9</td>
<td>planned economy</td>
<td>marketing economy</td>
</tr>
</tbody>
</table>

Qualified persons in great demand in the 21st century will be people in the following fields:

SECTION TWO:
REFERENCES
I EXTRACTS FROM SPEECHES BY LEADERS AND OFFICIALS OF CHINESE GOVERNMENT AND INTERNATIONAL ORGANIZATIONS

Instruction from Premier Zhou Enlai (1963)
We should let the youth know sexual health knowledge so as to help them solve the health problems encountered in adolescence. In particular, we should strengthen the research of psychology and behavioral hygiene of youngsters, so as to prevent abnormal psychology and behavior, increase the effects of learning and prevent crime among youngsters.

Instruction of Vice-Premier Li Lanqing (6 May 1998)
At present, the most effective measure to deal with AIDS is prevention. So it is of the utmost importance to publicize the AIDS prevention messages. However, the coverage rate of general publicity is still rather low nowadays. In order to obtain a comprehensive coverage and to popularize these messages, we must integrate them into courses in physiology and health. The Sate Council has discussed and approved this project. Please put it into effect.

Instruction of Dr. Wu Jieping, Vice-Director of the Standing Committee of the National People’s Congress
Sex education not only is a must in helping youths smoothly pass the great change in puberty both physiologically and psychologically, but it also directly influences their mentality, morality, scientific and cultural quality and even the formation of a happy family in their later life. We must not ignore such a vital issue related to the future of the country and the rise and fall of the nation. We must motivate more and more people to be involved in sex education, strengthen their understanding, and research and practice sexual education perseveringly.

At the present, many, including some leaders, still don’t have a correct understanding of the prevalence of AIDS in our country and its harm to social development. They lack a sense of urgency. Many cadres and ordinary people just know a little about the prevention of AIDS and are not very aware of how to protect themselves. Different situations show that the AIDS prevention work in China has reached a critical juncture.
Many foreign friends have warned us that China may become another area severely struck by AIDS. There is not much time left. If we fail to seize this opportune moment, it will be difficult for us to avert the dire disaster hitting many African countries and some of our neighboring countries in Asia. Therefore, we must strengthen our AIDS prevention efforts, ensure the implementation of different effective measures, work hard to control the spread of the pandemic, and reduce the harm that AIDS can cause to a nation and people.
Dedication by Professor Luc Montagnier, President of the World Foundation for Aids Research and Prevention (Dec. 1998)

Information and Education on AIDS are Essential to Combat the Disease.
This disease is not contagious but is transmitted by sexual contacts and the sharing of non-sterile needles and syringes between drug users. AIDS researchers throughout the world are doing their best to find potent anti-HIV treatments and vaccines, but without changes in behaviors, our combat against HIV will be lost.

Extracts of Speeches by Dr. Peter Piot, Director of UNAIDS (5 May 1998)

Young people and HIV/AIDS –A Force for Change

If we can give young people the skills and power to make decisions that help reduce their risk of HIV infection, we will also see a reduction in unwanted pregnancies and sexually transmitted diseases. The cost of including HIV education in the school curriculum, for example, is marginal. The returns to society are immense.

As part of our effort to promote better ways for societies to tackle the HIV epidemic, UNAIDS organizes a world campaign every year. In 1998 the focus of the World AIDS Campaign was on young people. Why young people? Because they account for 30% of the population in most countries of the world and the HIV epidemic is largely a young people’s disease.

Just as their parents grew up in the shadow of a potential nuclear war, young people today grow up in the shadow of AIDS. Across the world, new infections in young people are occurring at the rate of five per minute.

A recent UNAIDS study found that sex education does not lead to earlier or to increased sexual activity. This is the exact opposite of what some parents seem to fear. Instead, sex education programs teaches the life skills needed for responsible and safe behavior. We at UNAIDS are working with UNICEF, UNESCO, UNFPA, WHO and the World Bank to help countries translate all these findings into action.

Young people need understanding from their parents, teachers and community leaders to use their potential to act. They need older people they can trust. They need someone to talk to about sexual matters. They need support from people of their own age.

To conclude, AIDS prevention that focuses on young people today can avert millions of cases in the years ahead. Protecting young people’s rights and giving them the means to avoid HIV infection is a sound investment for society as well as an ethical issue.

I am convinced that the young people of China can and will play a key role in helping their country achieve the government’s four ambitious priorities for its AIDS Program as laid out by former State Councilor, Ms Peng Peiyun.

- education of the general public
- elimination of HIV transmission via blood transfusions
- ending HIV-transmission through needle-sharing, and
- decreasing sexually transmitted diseases

And I believe that if the young people of China commit themselves fully today, they can help their country reach its objective of keeping the number of overall HIV cases in this country to
below 1.5 million in 2010. An ambitious objective indeed, since this number is one-sixth of the estimated 10 million infections that the Chinese authorities anticipate seeing if no countermeasures are taken.

This overall objective and the four priorities of China’s AIDS program are all lofty and noble goals. Let me reaffirm to you and to your young people our pledge of cooperation and support in your endeavors. UNAIDS and the international community will be following your achievements in tacking this major challenge with understanding and hope, not just for China but for the survival of humankind.

II CHINA’S MEDIUM AND LONG-TERM PROGRAMME FOR THE PREVENTION AND CONTROL OF AIDS

Goals
To establish a STDs/AIDS prevention and control system, with the leadership provided by the government, multisectoral cooperation, and participation of the whole society to popularize relevant knowledge and promote STDs/AIDS prevention and control.

To stop the transmission of HIV due to blood collection and supply and suppress the tendency of spread of HIV infection among intravenous drug users. This is to control the annual increase of number of STDs cases under 15%, to stabilize and even decrease the annual increase of STD cases, and to control the number of HIV-infected persons under 1.5 million by the year 2000.

Operational Objectives
The objectives are:

- Establish and improve leadership and managerial mechanisms.

- Popularize knowledge about STDs/AIDS among the whole population and reduce relevant risky activities among target populations.
  - By 2002, the distribution rate of health education materials about STDs/AIDS to new students of ordinary institutions of higher learning and secondary vocational schools should be 100%.
  - Knowledge on prevention and control of STDs/AIDS is to be incorporated into the health education curriculum of ordinary junior school. The teaching rate of courses on prevention and control of STDs/AIDS is to be 100% in schools in capital cities of provinces, and autonomous regions and municipalities directly under the jurisdiction of central government, and cities with separate economic planning. It is to be over 85% in schools at the county level and above and to be no less than 70% in schools at township levels and under.

- Establish and improve STDs/AIDS surveillance systems to timely and accurately analyze and predict the epidemic situation and tendencies; and establish a service system for prevention and control of STDs/AIDS.
Accelerate the scientific research of prevention and control of STDs/AIDS, including the research of surveillance, treatment, epidemiology, social behavior science, and health economics.

Establish and improve the system of laws and regulations governing prevention and control of STDs/AIDS.

### Actions to Prevent and Control AIDS

These actions will:

- Strengthen the leadership and implement comprehensive administration.
- Achieve the set objectives and carry out classified leadership.
- Strengthen publicity and raise the awareness of disease prevention among the masses.
- Administer according to the law and strengthen supervision and surveillance.
- Improve organization and strengthen team building
- Strengthen scientific research and actively carry out international cooperation.

### III BASIC KNOWLEDGE ABOUT HIV/AIDS PREVENTION

#### The ABC of AIDS Prevention

At present, 80% of HIV-infected persons, including AIDS patients, were infected sexually. There are three measures effective in preventing HIV infection. They can be arranged according to the order of their reliability.

**Abstinence**

Abstinence means complete avoidance of sexual activity. It is the most reliable means of preventing the spread of HIV. However, in real life, people have sex for several reasons, including procreation and pleasure. Life-long abstinence is not commonly practiced. However, we maintain that young people who have not reached maturity should practice sexual abstinence.

**Be Faithful**

To be faithful means that a person only has sex with one non-HIV-infected partner during his/her life. Monogamous sexual activity is the most decisive measure to prevent sexual transmission of HIV. Premarital and extramarital sex, promiscuity and polygamy should be avoided.

**Condoms**

In cases where there are multiple partners, regular condom usage should be encouraged to protect both partners and reduce the chance of HIV infection. Although using condoms does not eliminate the risk of contracting HIV entirely, it is still an effective, safer alternative to unprotected sex. The risk of HIV transmission during unprotected sex is ten thousand times greater than the risk during sex with proper use of condoms.

The three protective measures listed above are known as ‘ABC’ for Prevention of HIV/AIDS. The ‘ABC’ acronym is made up of the first letter of each of the terms.
Ten Basic Messages Concerning AIDS Prevention

1) AIDS is a severe infectious disease with a very high fatality and is presently incurable. However, AIDS is preventable.

2) AIDS is transmitted mainly by unprotected sexual intercourse, by contaminated blood and blood products, and by infected mother to baby.

3) Living and working with an HIV positive or AIDS person cannot infect you with HIV.

4) To be abstinent before marriage and not to be promiscuous are the fundamental ways to prevent HIV infection.

5) To use condoms correctly prevents pregnancy and also reduces the risk of contracting an STD or AIDS.

6) To treat and cure an STD as soon as possible reduces the risk of HIV infection.

7) Sharing syringes and needles for injecting drugs is a main channel of HIV infection. So say NO to drug use and treasure your life.

8) Unnecessary blood transfusion and injections should be avoided. If you must, the blood or blood product must be HIV-negative confirmed by testing.

9) It is a key part of AIDS prevention and control by caring, helping, and not discriminating against people living with HIV/AIDS.

10) AIDS threatens every person and family. It is a commitment of the whole society to prevent AIDS.
# Questionnaire about Attitudes and Awareness of AIDS

**Questions on Attitudes**

Please read the following statements carefully and mark the viewpoint that most accurately reflects your own opinion. Please respond as honestly as possible and do not be influenced by other's opinions.

<table>
<thead>
<tr>
<th>Viewpoint</th>
<th>Completely agree with</th>
<th>Partly agree with</th>
<th>Completely disagree with</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. All HIV-infected persons should be isolated from the rest of society.</td>
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<td></td>
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<tr>
<td>2. Unsafe sexual behavior brings about AIDS.</td>
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<tr>
<td>3. If a woman is an HIV carrier, she should not consider having a baby.</td>
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<tr>
<td>4. An HIV-infected person is morally bound to inform his/her partner(s) of his/her HIV status.</td>
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<tr>
<td>5. Only those who are susceptible to HIV infection need to think about AIDS prevention.</td>
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<tr>
<td>6. Correct and update information helps control the spread of AIDS.</td>
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<tr>
<td>7. Careless sexual behavior causes AIDS to spread beyond control.</td>
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<tr>
<td>8. Adolescents should not engage in sexual behavior.</td>
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<tr>
<td>9. I would encourage friends who are sexually active to use condoms.</td>
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<tr>
<td>10. If possible, I will express my feelings through avenues other than sex.</td>
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<td>11. It is okay for young people to try taking drugs intravenously, since the odds of HIV infection are low if they just try it once.</td>
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<td>12. If I suspected that I might be HIV-infected, I would go get tested.</td>
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<tr>
<td>13. It is okay to have AIDS patients as fellow students in the same classroom as me.</td>
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<tr>
<td>14. I think more support should be provided for AIDS patients.</td>
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<tr>
<td>15. I won't be persuaded by friends to participate in risky activities.</td>
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<tr>
<td>16. It is okay to accept gifts from strangers.</td>
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<tr>
<td>17. I will do my best to encourage friends to take part in beneficial and healthy activities.</td>
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</tbody>
</table>
Questionnaire about Awareness

Please read the following statements carefully and mark the viewpoint that most accurately reflects your own opinion. Please respond as honestly as possible, do not be influenced by other's opinions.

<table>
<thead>
<tr>
<th></th>
<th>Right</th>
<th>Wrong</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>It is impossible to judge whether or not a person is infected with HIV solely by his/her appearance.</td>
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<tr>
<td>2.</td>
<td>HIV can be transmitted by sexual intercourse.</td>
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<tr>
<td>3.</td>
<td>Sitting on a toilet seat that has been used by an AIDS patient can cause HIV infection.</td>
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<tr>
<td>4.</td>
<td>Eating together with an AIDS patient can transmit HIV.</td>
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<td>5.</td>
<td>Sharing needles can transmit HIV.</td>
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<td>6.</td>
<td>HIV can be found in semen, vaginal secretions and blood.</td>
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<tr>
<td>7.</td>
<td>Some people have been infected by HIV by sharing a swimming pool with AIDS patients.</td>
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<tr>
<td>8.</td>
<td>HIV can be transmitted by mosquito bites.</td>
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<tr>
<td>9.</td>
<td>HIV can be transmitted by coughing and spitting.</td>
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</tr>
<tr>
<td>10.</td>
<td>It is impossible to tell if you are HIV-infected.</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>It is safe to embrace an AIDS patient.</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>If take medicine properly AIDS can be cured.</td>
<td></td>
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<tr>
<td>13.</td>
<td>AIDS cannot spread beyond a national boundary.</td>
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<tr>
<td>14.</td>
<td>There is already an effective vaccine against AIDS.</td>
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</table>

IV LIFE SKILLS AND PEER EDUCATION: THEORIES AND PRACTICE

Life Skills

What are Life Skills?

Life Skills enable children and young people to translate knowledge and values into real action. Life Skills help you to interact with different people in various circumstances. This entails critical understanding of situations so that an appropriate response can be made which will lead to a positive outcome. Examples of Life Skills are establishing and maintaining rewarding relationships, or modifying one's physical and social environment.

Content That Makes Up Life Skills

(1) Decision making. The decision-making process should be dealt with constructively. When students have to make a decision concerning their health, they should be able to evaluate the choices and think about the respective consequences before making positive, healthy decisions.

(2) Problem solving. Students can begin to approach problems using the following steps: A. Define the problem. B. List any ideas which are possible solutions. C. Evaluate the options.
D. Pick the optimum solution and make a plan to put it into action. Through training in problem-solving, students can learn to deal positively with problems they may encounter in real life.

(3) **Creative thinking.** Through training in creative thinking, students learn to be innovative in looking for all kinds of possible choices and then evaluate their respective value as solutions.

(4) **Critical thinking.** Critical thinking entails objective analysis of information and experience. This training will give students insight on how things like personal values, peer pressure, and mass media can influence individual attitudes and behavior. Training will also lead students to think about how they can personally deal with these influences when they are faced with them.

(5) **Effective communication.** Effective communication means expressing oneself through language and other means. Means of expression should be consistent with one's cultural background, and be specific to a particular situation. This training will help students realize the best ways to express their views, desires, needs and emotions. They should be able to ask for advice and help when they need it most.

(6) **Interpersonal relationship skills.** The training helps students form and maintain friendships with other people, which is very important for mental health and constructive participation in society. Students should have good relationships with family members. They should also learn how to break off personal relationships that are harmful or negative influences.

(7) **Self-awareness.** Self-awareness is a realization of one's own special characteristics, strengths, weaknesses and desires. This training helps students cope with stressful situations by looking inward. More often than not, self-awareness is a prerequisite for effective communication and creative thinking.

(8) **Empathy.** This training can help students understand others' life situations. It leads to acceptance of others who are different from them, which fosters cross-communication. It encourages students to care for, help and look after those in need.

(9) **Coping with emotions.** This makes students realize how emotions can affect action and helps them maintain a peace of mind.

(10) **Coping with stress** This training educates students about where stress may come from and how it can affect people. Students can learn to take precautions to reduce tension. They can also learn to relax by changing their environment and their ways of living.

**Integrating Life Skills into the Curriculum**

(1) Subject-based analysis of behavior.
   The English Curriculum Profile for Australian Schools includes at level 7, Reading, Viewing and Analysis of Social Norms, e.g. evaluating films, magazines, books; and critical analysis of current messages e.g. on war/peace, gender roles.

(2) Personal time management and study skills.

(3) Human rights education, including understanding human rights conventions, issues of justice, the role of minorities, the effects of globalization, etc. Multinationals in society

(4) Work experience is a Life Skills curriculum activity that places students for extended periods of time in the workplace environment. Time spent in the classroom is used to
review the experience. Learning how to apply for a job, how to respond during interviews, and how to dress appropriately in the workplace are all topics to be covered here.

(5) Lessons in personal finance management may involve learning how to open bank accounts and how to follow regular savings plans. More advanced classes can learn how to set up small businesses, how to handle investments, and other general finance topics.

(6) Health/safety education may involve traditional health and nutrition education (the five food groups, clean hands, oral hygiene), the development of healthy lifestyles (drug & alcohol education, diet, exercise, nutrition, importance of sleep, traffic safety, sexual health), and how to access health services, counseling services and self-help groups.

(7) Learning particular sports and games are possible avenues for the development of life skills, because they provide opportunities to interact with groups of people, to compete with others and to learn how to cooperate through teamwork.

(8) Learning the dynamics involved in relationships in families, dating and parenting may also contribute to the development of Life Skills.

(9) Life skills connected to issues of discrimination should include how to approach these issues positively, with regard to race and gender. These topics are of great importance for living in a global society.

Processes/methods Used in Life Skills Education

Life Skills are best learned through interactive methods centered around the student. The acquisition of Life Skills is based on a social learning process of observation, practice and application. Methods in the classroom include small group work or work in pairs, brainstorming, role playing, debates, open discussions, analysis of media messages and biographies, recreational and sport activities and writing dialogues.

Community projects make up an important component of Life Skills education, and provide opportunities to apply abstract ideas to a purpose. For example, in Zimbabwe, students have conducted surveys about the responsibilities, rights and privileges of men and women. They have also interviewed police about drug trafficking and crimes committed under the influence of drugs, and they have organized visits with AIDS patients.

Learning should extend beyond the classroom, and activities may include visits to other schools, leadership camps, and exchanges with people from other cultural/ethnic backgrounds. The use of buddy systems helps to increase sensitivity towards others who are different or perceived to be enemies.

For instance, in Egypt, as part of the Peace Education program, children from different backgrounds will participate in recreation camps together and existing prejudices will hopefully be further broken down.

Other examples of activities designed to build Life Skills include forming children's reading groups and training peer educators to facilitate the education of young people out of school. Schemes linking children across grades are useful. Connections can be made through community clubs or organizations (e.g. Scouts, sports groups, Red Cross). Children can also be encouraged to express their opinions through writing letters to magazines and newspapers, participating in phone-in radio programs, and using E-Mail to voice their opinions.

In Vietnam, the Young Pioneers are involved in a number of community-based efforts in health education, environmental clean-ups, and health communication and mobilization.
Sample Class Activities for Life Skills Training

Drawing Pictures (The ability to communicate)

- Divide students into pairs and make them stand back to back. Student A holds a picture in his hand and is asked to describe the picture to student B. Student B draws his/her own picture according to what he or she is told, but he/she is not allowed to ask questions. The process lasts three minutes.
- Repeat the above steps, this time student B can ask questions. Duration: three minutes.
- Student A and student B turn around and face each other, and they talk while student B draws. Duration: three minutes.

Compare the resulting pictures drawn through each of the three methods.

Summary

- Be friendly when communicating.
- Student A and student B are equals when communicating.
- Focus on the subject.
- Listen attentively and answer positively.
- Pay attention to the effects that result from one-way communication and two-way communication.

What Should I Do? (The ability to make decisions.)

Form Groups and discuss the following questions:

- At the end of an exam, my good friend asks me for the answer to a question on the paper. I should: A. Tell him. B. Not tell him. C.Try to meet him half way.
- We are told that all the teachers will have a meeting in the afternoon, so classes have been cancelled. What would we like to do in the afternoon: A. See a movie  B. Play computer games  C. Go over school books

Summary

- Analyze the background of the incident.
- Make decision after comprehensive evaluation.
- Predict the possible consequences of the incident and make the optimum choice (according to the evaluation).

Live Out Your Best Self! (The ability to set goals.)

- One day target: Let students resolve that they have to reach a goal or get rid of a bad habit, e.g. recite 10 new words, stay away from spicy food and avoid smoking cigarettes.
- Draw your ‘life line’: Be prepared for the coming century.

Divide students into 5 groups. Have each group draw a ‘life line’ on a big sheet of paper. Divide the line into parts, and write down goals and ways to achieve them.

Summary

- Set long term and short-term targets for different stages in life.
• Good health is necessary to reach the goals set in life.
• There will be positive and negative events during the process of reaching your goals. Analyze them when setting the targets.
• Set goals according to your real ability. Don't set goals that are too easy or goals that are too unrealistic.
• Figure out a plan as you set goals. Think about how to reach them.

Outcomes of Life Skills Programs

The results of life skills programs should be observable changes in behavior. A program should be judged by its effectiveness in influencing behavior. Children, young people and adults (teachers, team leaders) should be able to:

• cooperatively work in a team
• take responsibility for their own health and engage in healthy lifestyles
• solve conflicts in a peaceful manner
• critically analyze values/social norms in media and society
• perform successfully in job interviews
• behave assertively and fairly
• display: tolerance, respect, self esteem, gender sensitivity, respect for human rights, and concern which leads to action for people in need of assistance

A three-year research project (June 1998-July 2000) on the *Life Skills Education* program was conducted by Professor Ye Guangjun and Ph. D. candidate Zhoukai from Beijing University, involving nine middle schools in Beijing.

In response to the study, students giving their overwhelming positive feedback contributed hundreds of articles. The following is one of these articles providing her personal perspective on the Life Skills program and its effectiveness in helping the students live healthy and happy lives.

**I Love the Class!**

**Sun Qianqian**, class 2, junior grade 2, Beijing No.85 high school

How time flies! Another year has gone and the new semester is approaching. Since we began our high school careers in the summer of 1998, nearly three semesters have passed. We learned a lot during that period, especially from our Life Skills class.

In the Life Skills class of the first semester, we had lessons with titles like 'Learn to Listen' and 'Learning About My Own Emotions.' During the second semester, we studied topics like 'Eliminate Misunderstandings Among Classmates.' And this semester we are learning about ‘Confusions Caused by Adolescence’ and ‘How to Protect Yourself.’

What impressed me most was the 'Learn to Listen' lesson. I used to interrupt my classmates when chatting with them. Even at home, I just broke into my parents' conversations whenever I felt like it. They always snapped back: 'What do you know about that? Shut up!' Now I realize that I have to let people finish their speech. I can't interrupt whomever I'm listening to. I have to let the speaker know that I respect him/her and that it's worth his/her time to talk to me.

In the second semester, I learned how to eliminate misunderstanding and how to say 'I'm sorry.' I have had better relationships with my classmates since then. And the lesson on 'Learning about My Own Emotions' has done me a lot of good. I used to keep everything...
to myself when I felt down, which made me even more depressed. Now I know how to let it out, how to relieve tension, and how to distract myself from troubles.

We also learned ‘The Dangers of Cigarettes’ this semester. I knew smoking was bad for your life skills before, but this class gave me a much clearer picture of how harmful cigarettes are to human beings. Tobacco contains lots of tar and nicotine. Heavy smokers will likely contract serious diseases like pneumonia. So I have one thing to say to all of you: ‘Don't ever smoke’ My last lesson was ‘How to Protect Yourself.’ In the class I learned something I never knew before, such as what is appropriate bodily contact from other people, particularly with people I don't know very well. I also learned ways to protect myself.

Basically, the Life Skills classes have been of a lot of help in my life and in my studying. We were so lucky to be chosen as the experimental class for the Life Skills course. Though we missed some other courses, I think it was worth it. The course will help us handle things and treat people in a better way in the future.

In the class meeting held on December 18, the teacher asked us whether we thought the life skills class was interesting. We all responded loudly ‘Yes!’ In the Life Skills class, we could perform short dramas, discuss topics in groups and talk about our own opinions. Exchanging ideas among students turned out to be very effective.

Of course, we also gave quite a few suggestions for improving the life skills class. More students should be allowed to take part in the drama, and role-playing shouldn't be restricted to several people. There should be more ways for teachers to summarize lessons besides writing. Creative activities are best, like drawing pictures, acting, or making a school newspaper! I personally hoped that teachers would help us learn more than just what was in the books.

This semester's Life Skills class is drawing to an end. I feel sad about it. I wish we could enjoy this kind of class every semester. Not only do we learn from it, but we also learn really practical life skills.

Peer Education

What is Peer Education?

Young people listen more attentively and more readily to what respected peers say than to a teacher. This is especially true when talking about issues of Life Skills, safety and sexuality. This powerful and effective influence is called ‘peer influence.’

Peer Education takes advantage of the positive aspects of peer influence to educate young people. It usually begins with training of peer leaders.

Who is a Peer Leader?

A peer leader is selected for his/her leadership potential in helping others. A peer leader is trained to help other students learn through demonstrations, listening exercises and role-playing. A peer leader should be encouraging, by giving suggestions in support of Life Skills decisions and behaviors.

Peer leaders provide assistance to the teacher, who can then spend more time on preparation for lessons.

Peer leaders are important because:

- Young people are likely to listen to and follow other students who are well-liked and respected.
- Peer leaders who set examples of life skills behavior can influence their peers' behavior and help them avoid risks.
• Peer leaders can support, encourage and help their peers both inside and outside the classroom.
• Peer leaders can help the teacher in presenting lessons, which allows more time for other activities and more individual attention.
• Peer leaders can help manage and solve problems when students are working in small groups.

What Does a Peer Leader Do?
• Helps in classroom management, e.g. handing out activity sheets, etc.
• Helps in demonstrations, e.g. how do you use a condom?
• Leads a class team, e.g. during a quiz.
• Reads stories, questions, answers to activities.
• Volunteers answers to activities.
• Leads a small group discussion or activity.
• Reports findings of small groups.
• Models appropriate behavior, e.g. is assertive.
• Carries out certain activities and reports back, e.g. buying a condom.
• Takes polls, e.g. when teacher wants to know how many answered ‘yes.’
• Draws diagrams on the blackboard.

Selection of Peer Leader(s)
Peer leaders may be selected from among their own peers. Otherwise, teachers may select peer leaders by choosing the class individuals who are:
• Considered as opinion-leaders among students.
• Concerned about the welfare of their peers.
• Able to listen to others.
• Self-confident.
• Dependable, honest.
• Well-liked by other students.
• Well-rounded students -not necessarily the best academic students.
• Not all male or all female (if possible).
• Perhaps older students.
• Perhaps sexually active (if this information is available).
In this guide, ways to use peer leaders are not explained for every activity. However, peer leaders may be used whenever the teacher feels it would be useful and appropriate.

Training Program Objectives on Peer Leaders
As a result of this training program a peer leader will:
• Understand the purpose of the HIV/AIDS/STDs education program, and the importance of the peer leader's role within this context.
• Be able to help the teacher and students with some activities.
- Be able to help small groups of students work together effectively.
- Be a good listener, provide feedback, and be able to understand other students' emotions.
- Be aware of other sources of information and counseling so that other students can be pointed toward appropriate help. Examples of information are:
  - knowledge of STDs, HIV and AIDS; attitudes about delaying sex and using condoms; feelings about people who have HIV/AIDS, and reasons that young people take risks with their life skills and their lives. You will also learn skills: (1) how to be assertive so that you say ‘no’ to things you do not wish to do, especially saying ‘no’ to sex or ‘no’ to sex without a condom; (2) how to use a condom effectively.

**Key Training Content**

**Helping Small Groups - Ground Rules**

When helping small groups, use the following group rules to encourage discussion and participation:

- No put-downs (negative comments).
- Only one person talks at a time; no interrupting of others.
- Everyone has right to ‘pass’ (to decline to discuss a personal issue).
- Everyone is given an opportunity to talk.
- Stay on the topic; no side discussions on other topics, and
- ‘What you hear stays here’ (information is confidential).

**Dealing with Problem Situations in Groups**

In small groups, not every group member may be willing to complete the activity. You should be prepared to help solve minor communication problems that might arise in small groups, e.g. when a member of the group:

- Dominates the conversation.
- Is critical of others: puts other people down, usually to make himself/herself feel superior.
- Tells others what to do all the time.
- Often interrupts other people.
- Does not participate in the group activity.
- Chats about things not related to the activity.

**Ways of Dealing with Problems in Groups**

- If there are disruptions, politely remind the group that there is a problem or task to solve, as well as a time limit.
- Talk privately to the person causing the problem. Review the basic group rules and how the person's behavior is negatively affecting the group. Request his/her support and cooperation for the next time the group meets.
- Respond to those who interrupt by saying, "Excuse me, just a reminder that everyone in the group has the right to speak without being interrupted".
• If the behavior is so disturbing that it cannot be ignored, deal with it in the group.
  Criticize what is being said or done (rather than criticizing the person responsible for
  the disruption or making disruptive statements). Point out how the behavior blocks the
  group from functioning well.
• At the end of a group session, lead a discussion about how the group is doing. Try to
do this in such a way that feelings are not hurt.

Communication Skills
Since you will be working with other students, it is important that you ensure that you have
good communication skills. You probably already have many of these skills to some extent
because you have been selected as a peer leader.
However, the three skills most people need for continual improvement are to:
• Listening actively and well.
• Use positive body language to show empathy (to show that you understand how the
  other person feels or what his/her point of view is):
  - Focus on the person with direct eye contact (looking into people’s eyes).
  - Do not interrupt.
  - Do not cut in to describe your own experiences
  - Do not give your attention to outside disruptions (other people or events).
  - Be comfortable with silence.
• Give feedback
  - To give feedback to another person means you comment on the person’s statements,
    behavior or performance. When doing this, show the other person that you are
    listening and care about what he/she has said or done.

Do
  - Ask questions to show you are interested in the person
    (How do you feel about that?)
  - Be sincere, caring and understanding.
  - Use verbal encouragement (such as ‘What happened then?’).
  - Use nonverbal encouragement (such as nodding your head).
  - Ask questions to make the situation clearer (if necessary).
  - Summarize the person’s points and feelings.

Do not
  - Judge the person.
  - Comment on things that cannot be changed.
  - Interrupt too early to give feedback.

Sources of Support
You may have the opportunity to talk privately with students who need information or
counseling that you cannot give them. Therefore, it is important for you to know where you
can get help in your community. With your teacher, your group of peer leaders should identify
a number of sources and how to reach them. These sources will enable students to get
information about HIV/AIDS/STDs; to obtain medical help; to go for counseling; and to be
tested for HIV.
Suggestions for your list are as follows:

<table>
<thead>
<tr>
<th>Doctors</th>
<th>Nurses</th>
<th>Clergy</th>
<th>AIDS hotline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical center</td>
<td>Hospital</td>
<td>Life Skills clinic</td>
<td>STDs clinic</td>
</tr>
<tr>
<td>Counselors</td>
<td>Social worker</td>
<td>Church groups</td>
<td>Youth groups</td>
</tr>
<tr>
<td>Places where you obtain condoms</td>
<td>Teacher</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Self-Training and Evaluation Forms of Peer Leaders**

**Dealing with Problems in Groups**

- On your own, read each of the situations below.
- Brainstorm in your group a number of solutions to each situation. If you need help, review ‘Helping small groups’.
- Decide as a group on the best solutions, and write them in the spaces provided.
- Answer the Follow-up questions. Discuss answers in your group.

<table>
<thead>
<tr>
<th>Situation</th>
<th>Solution</th>
</tr>
</thead>
</table>
| Situation 1  
The small group has been together for a few days now and it is quite clear that Dominick dominates the others. He talks most of the time and when others say something, he does not pay attention. |
| Situation 2  
Laura was very quiet during the first group meeting. However, suddenly she has become very critical of the other group members. She made rude remarks to one person in particular but has also objected to opinions expressed by the rest of the group. |
| Situation 3  
Jaloni is a little older than the others in the group because he has failed an earlier grade. He tells people in his group what to do and how to do it. No one has objected to what he is doing, but you can tell they are not happy about the situation. |
| Situation 4  
Helena often interrupts others in the group. She also puts others down by calling their ideas 'stupid' or 'dumb.' The rest of the group is getting angry with her because of her behavior in the group. |
| Situation 5  
Bonois is not really interested in the class. When he is with his group, he acts bored and seldom makes any suggestions to the group. At other times he tries to talk to someone in the group about something completely off topic. If others do not join him he becomes loud and disruptive. |
Communication Check
Rate each of the following skills using the key below:

1 = Never; 2 = Sometimes; 3 = Often; 4 = Always

<table>
<thead>
<tr>
<th>Content</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I do not interrupt others in my group</td>
<td></td>
</tr>
<tr>
<td>2. My voice is appropriately pitched (not squeaky, loud or too soft)</td>
<td></td>
</tr>
<tr>
<td>3. I do not dominate the conversation (i.e. I give others a chance to speak)</td>
<td></td>
</tr>
<tr>
<td>4. I talk an equal amount compared to others</td>
<td></td>
</tr>
<tr>
<td>5. When talking and listening, I look people in the face and show my reaction to the speaker (e.g. by nodding)</td>
<td></td>
</tr>
<tr>
<td>6. I do not criticize (put down) others</td>
<td></td>
</tr>
<tr>
<td>7. I can express myself clearly.</td>
<td></td>
</tr>
<tr>
<td>8 I ask (encourage) others to speak</td>
<td></td>
</tr>
<tr>
<td>9. I pay attention to the speaker the whole time he/she is talking</td>
<td></td>
</tr>
<tr>
<td>10. I criticize what a speaker says and how he/she says it rather than judging the speaker himself/herself</td>
<td></td>
</tr>
</tbody>
</table>

Total score

What does your score mean?
1 – 10 Lucky for you that this is just a test! You’ll do better next time!
11 – 20 Well done, but you need to work more on it.
21 – 30 Good! You are on the way to being communication experts!
31 - 40 Genius! Experts! Go and help others!

Effects of Peer Education on College Students
From 1997 to 2001, a joint project by the Australian-Chinese AIDS/STD Safer Sex Adolescent Peer Education Program, Australian Royal Women's Hospital, Beijing Medical University, and Shanghai Second Medical University was conducted on Peer Education.

The following article, written by a sophomore at Beijing University was a student selected as a peer leader. He really learned a lot from this experience and would like to share this story with others.

‘Get Peer Education, Act Now!’ - My Feelings on AIDS Education

Tu Dahong, Class 98, School of Public Health, Beijing University

I gained a deeper understanding of AIDS after taking our college's AIDS education course, which was truly unforgettable.

Before I took the course, the only thing I knew about the disease was that it is incurable but it's occurring far away from us. It seemed to have nothing to do with us.

Then I was shocked by what I was told in the peer education class. Right now the number of AIDS patients in Asia is surging. The horrible data made me realize that we are only a few steps away from the deadly disease. Walking on the streets, looking at the passers-by, I just couldn't calm down. Just think about how many people were infected because they were ignorant of AIDS! I want to tell everybody what I know, but this is a hard task, and how can I do it alone? Anyway, I've resolved to tell as many people as possible and they can tell their friends, and make them realize the dangers involved.

I made a plan to tell the public about AIDS, and I chose the Institute of Chinese Traditional Medicine as my venue, because most of my former classmates go to this college.

I walked into their dormitory on a Saturday afternoon with papers in hand. I was surrounded by curious students when I told them why I was there. Even those from other rooms came to ask me questions. The situation was a little more than I could handle, but I told them all I knew. They were satisfied then, but they also would have liked to know more. It made me worry about the current level of AIDS education. Society is developing and youngsters’ ideas are developing as well. Puppy love is becoming a trend in senior
high schools and even junior high schools. That's nothing terrible, but it's absolutely necessary for them to know about sexually transmitted diseases, especially AIDS. You have to know about it to keep it away. The general public can obtain some information about AIDS from newspapers and other media, but some reports only increase their fear of the disease and make people look down on AIDS patients. How can you sympathize with a patient if you don't know anything about AIDS and you are simply scared of it? That's why we have to let everybody know about AIDS and let them learn about AIDS!

I think the courses I took were very successful and it's possible to expand them. We should help youngsters get detailed AIDS awareness through peer education, to which they are even more receptive than lessons taught by teachers.

V SCHOOL LIFE SKILLS EDUCATION FOR HIV/AIDS PREVENTION

Educational Channels
Verbal Methods of Life Skills Education
- lectures or reports on special topics,
- workshops,
- forum and group discussions, and
- individual interviews or counseling.

Written Methods of Life Skills Education
- slogans,
- newspapers posted on the blackboard or classroom wall,
- life skills education leaflets,
- life skills education brochures, and
- life skills education prescriptions.

Education with Audio-Visual Aids
- slide presentations,
- movies, television programs, video presentations, and
- radio broadcasts.

Theatrical Performances and Fine Arts
- dialogues, storytelling, rhyming stories recited to the rhythm of bamboo clappers, and modern drama, and
- posters, advertisements, caricatures, photos, etc.

Exhibitions
Phone Hotlines
Social Practice


**Teaching Methods**

Teaching teenagers about HIV/AIDS/STDs requires frank and explicit discussion of sexuality, modes of transmission and methods of protection. Many people may be embarrassed about discussing sexuality and related issues. However, this initial embarrassment must be overcome if we are to educate and protect our children from these diseases.

You do not have to pretend that you are completely comfortable when you are actually embarrassed. You can admit to students that these topics are difficult for you, but you should also emphasize that these issues are so important that you cannot overlook them. You can begin by saying that sex is often an embarrassing topic and when people are uncomfortable, they usually laugh, make jokes or do other things to cover up their nervousness. This is very effective for keeping control of the class.

**Discussion**

Discussions can be held with the whole class, but they work best when conducted in smaller groups. Group discussion stimulates free exchange of ideas, and helps individuals to clarify ideas, feelings and attitudes. Discussion works very well if it follows some kind of "trigger," like a case study or story.

**Questioning**

When conducting a group discussion, teachers should be careful not to ‘put down’ a student's response. If a teacher does not accept student responses in a positive way, it may discourage students from answering further questions. The pacing of questions is also important. Students should be given time to think about a response, but questions should be rapid enough to keep the pace of the class lively. Try not to ask questions that result in simple one-word responses like ‘yes’ or ‘no’. Open-ended questions should be asked to encourage students to discuss and clarify points.

**Brainstorming**

Brainstorming is a technique that encourages and accepts a wide range of student responses. It is important to not evaluate ideas yet. Every idea suggested should be accepted and recorded on the blackboard or on a sheet of paper. Students need to know that they will not be required to justify or explain any answer while they are brainstorming. After the period of time allowed for brainstorming (which should not be too long), time for reflection or prioritizing of the list should be set aside. Brainstorming is effective for:

- Sensitive and controversial issues that need to be explored
- Encouraging students who are hesitant to enter a discussion.
- Gathering a lot of ideas quickly

**Role-Play**

Role-playing involves presenting a short spontaneous play describing possible real-life situations. In role-plays, we imitate someone else's character. This is often easier than having to express our own ideas and feelings.

Role-playing is a very effective technique but also a difficult one to master. The following points may help you make this method more effective:

- Select volunteers or students who are outgoing and energetic.
- Give students several lines or a script to get them started.
• Use ‘props’ such as hats, cards with names on them, wigs, etc.
• Use humour, if possible, to make things more comfortable and interesting.
• Pair all students in the class and assign each person to play a specific role, e.g. a father or son. This will eliminate embarrassment of being in front of the class.

Case Study/Situation
A case study is a fictional story that allows students to make decisions about how the person should act or respond and what the consequences of their actions might be. Case studies allow the students to discuss someone else's behavior while avoiding revealing personal experiences that might be embarrassing to them.

The case study can be open-ended, which means that the ending of the story may be missing. It is up to the students to decide on all possible conclusions and their consequences. Finally, students should make a decision about what would be the best ending for the scenario.

Group Work
Many of the activities contained in the units suggest small group work. Here are some teaching points for trying small group work:

• It is best to start with pairs or groups of 3 or 4. This tends to be less threatening to students. As confidence builds, you can make the groups larger.
• Try to vary the methods used for forming groups as much as possible and make sure that students frequently work with different class members. You should use some method to assign students to different groups. It is best not to let students form their own groups. Those students who are not selected by peers will feel left out.
• Try assigning roles and duties within groups, e.g. recorder, encourager, keeping the group on their task, time-keeper, presenter of group's work, etc.
• Emphasize a ‘sink or swim together’ attitude. All members must contribute to the assigned task. The group's success depends on a significant contribution from each individual.
• It may be appropriate at times to use groups where the sexes are separated rather than mixed.

Other Methods
Story telling is a traditional method of providing information and discussion topics. Situations in the student activities can be told in a story-telling format using local culture as a base for stories.

Fables are stories that have been told to explain how people can put themselves in danger by acting in a certain way. Fables often involve animals as the characters and therefore present a message without students feeling badly about their own behavior. The stories can be developed to contain life skills messages about AIDS and can be followed by discussions about what was learned and how things could be changed for the better.

Communicating life skills messages or expressing feelings about AIDS through music, dance or poetry can be very effective. Use tunes that are known locally and have students create their own lyrics. Use dances that everyone knows and put words to them. The whole group can participate in writing the words.
You can develop your role-plays (from the student activities) into full plays performed for parents or students from other schools or other classrooms. At the end of the play, the messages can be discussed with the audience.

Puppets can express things that actors may find difficult to express themselves because of cultural or other reasons. The audience can ask the puppets questions after the show. This is particularly effective with AIDS issues, which can be embarrassing or difficult to discuss openly.

**Methods for Large Classes**

Teachers coping with very large classes are unable to interact with students to the point where they are able to hold frank, open discussions. When teaching very large classes, the chalkboard is the main teaching aide. In this situation, the teacher can successfully teach facts about AIDS using normal classroom techniques. However, discussion of behavior and experiences must involve a lot of student participation. Students can be divided into groups and helped by peer leaders (see section 4).

Following the factual lessons about AIDS, students may carry out group projects and report back in various ways, e.g. through charts, illustrations, oral reports, role playing, dramatic performances, etc. Groups can report their findings to each other and display their work. Possible topics and tasks:

- What we know about HIV/AIDS/STDs.
- What our families know about HIV/AIDS/STDs.
- What the community knows about HIV/AIDS/STDs.
- How life skills centers treat and help people with HIV/AIDS/STDs: interviews with nurses/doctors.
- Identification and collection of existing materials, posters, radio/TV announcements used to inform people about HIV/AIDS/STDs.
- Individuals, groups or organizations that exist in the community and provide information about HIV/AIDS/STDs. Each group can arrange a meeting with one of the identified persons/organizations.
- Opinion survey and results.
- Identification of main recreational activities among peers.
- Behavior which could cause the spread of AIDS among different age groups.
- Meetings held to explain AIDS.
- Debates, competitions, social events.
- Writing and acting out various plays to illustrate the danger of HIV/AIDS in the community.

After these projects are completed, the teacher can arrange for a special guest to come and see the display of findings.

Often at the end of such projects, students can go on to explore other related topics, such as the social circumstances that may lead to exposure to drug and alcohol abuse, etc.
VI INTEGRATION OF UNICEF RESOURCES WITH LOCAL CREATIVITY IN HIV/AIDS PREVENTION PROJECTS

In the process of implementing UNICEF program (1998~2000), the Educational Commission at all levels of Fushun County, Zigong City, Sichuan Province, have attached great importance to AIDS prevention. Local officials and teachers have made concerted efforts to this end. Their achievements have already surpassed the program’s expectations.

Fushun County's experience may serve as a model for other schools. The following abstract of the Fushun summary and their excellent teaching plans are given below as reference.

Summary of HIV/AIDS Prevention and School Life Skills Education
Commission of Fushun County, Sichuan Province (August 1999)

Official Awareness and the Importance of AIDS Prevention
- The Foundation for a Successful Program
The County Committee of the local government and all of the Fushun County schools have established their own implementation groups and group leaders for the AIDS prevention program. Accountable individuals were designated to be responsible for specific tasks, such as teaching, publicity, logistics, development of audio-visual materials and other materials, and collection of data. Life Skills education activities were then carried out in an orderly fashion. In order to implement this program accurately, the staff of the County Committee met frequently to discuss relevant issues.
Two seminars on the program were held in Chengguan Secondary School and The Second Middle School of Fushun County on September 15th and November 26th respectively. During these seminars, different schools shared their own experiences. After the seminars they visited each other's schools to exchange perspectives even further.
In order to provide guidance for the second stage of the program, the County Education Commission compiled four bulletins to be distributed to all of the schools in the county.

Changing the Mindset Toward the Necessity for Sexual Education
- The Key to Implementing the Program
The leaders of the County Party Committee and the schools clearly understand that a sensitive topic (sex) must be involved when carrying out AIDS prevention activities with students. After careful consideration, we concluded that sex education for students must be provided at the right moment, to a moderate degree, and using appropriate methods.
We should be brave enough to break taboos regarding discussion of this important issue. At the same time, we must act with caution and work scientifically. Adolescent education is provided for junior middle school students to develop civic responsibility.
They must not be involved in potentially harmful activities, including illegal drug use. Ideals and values of friendship, love, and sex should be taught at the senior middle school level, allowing for the development of an informed and positive lifestyle for students.

Three-level Training for Teachers – the Guarantee of Program Success
Social Science and Biology teachers, club advisors, and other teachers in general are the primary educators in AIDS prevention and sex education. They also act as the students’ elder brothers and sisters, role models, and friends. They should conduct classes and organize relevant activities in a confident and open manner.
In order to guide the three-level training for the district and school leaders, Zhang Huimin, vice secretary of the Party Branch of the County Education Commission and Wei Zhonghe, vice-director of the Teaching and Research Section, accepted an invitation to train 1,094 teachers and administrative staff from 14 units. 100% of the trainees passed the examination.

All of the teachers who underwent training concluded, ‘We have learned theories, data, examples, and new educational methods. After receiving such training, we will be more steadfast in our work.’

**The Student’s Guide - Promoting the Teacher’s Role**

A teacher's task is to impart wisdom and knowledge, develop life skills, and guide students in discovering answers to their many questions. They conscientiously prepare lessons and consult the official materials distributed by the Municipal and County Education Commissions.

Many school leaders personally examine teaching plans that adopt different methods, such as lessons vs. lectures, extracurricular activities vs. classroom, decentralized teaching vs. centralized teaching, and teaching for male students vs. female students. Many teachers have conducted lively and interesting educational activities in the form of games, talkshows entitled ‘Tell it as it is,’ short plays, recitals in local dialects, songs, etc.

These activities have brought about positive responses from students and their surrounding communities.

**Attach Greater Importance to Student-Oriented Activities**

The primary focus of AIDS prevention education and life skills education is the student. All students have the right to this education. Under the guidance of teachers, students engage in activities related to learning about AIDS prevention, avoiding illegal drug use and practicing real-life skills. They may also practice handwriting, musical composition, literary composition, and drawing.

Students who excelled in these areas were selected to take part in a competition of creative approaches to AIDS prevention, illegal drug use prevention, and promotion of social skills. These programs kill two birds with one stone: promote the quality of education in school systems and enrich campus life. According to the rough statistics, 380 students participated in the calligraphy and drawing competitions, 51 students participated in the solo vocalist competition, and 21 students took part in the short play competition.

All competitions were sponsored by their county. 156 essay compositions were designated as excellent articles. The winners of the first, second, and third prizes were awarded certificates or trophies.

**Beyond the Classroom and into the Community**

- **Extend the Influence of School Activities**

During the program activities, 67 parents' meetings were held in different schools, attended by 12,805 parents in total. The school leaders personally participated in those meetings to explain and publicize Vice-Premier Li Lanqing's instructions. The school doctors or teachers in charge of classes discussed the importance of AIDS prevention and the establishment of life skills. Many students took the life skills education materials home to tell their parents, relatives and friends about what they had learned in school. On December 1st, 1999 (World AIDS Day), the teachers and pupils of the Primary School Attached to the County Teachers' School and the West City Primary School hung up banners with slogans about prevention of AIDS. They also
organized drum bands and wind bands to attract attention and teach the ‘Song of Prevention of AIDS.’

On the street, they offered counseling and distributed life skills education materials. The audience numbered more than 3,000. Such activities had a great effect on the community.

Experiences on the Third-Level Training for Teachers (30 March 2000)

Four Changes and Four Encouragements

Change the situation in which only one person is contributing. Encourage all students to be fully involved and take an active part in the activities. Encourage them to develop their own individual viewpoints. Teach them to apply what they have learned in class to their daily lives, and differentiate between saying and doing.

Change learning methods which emphasize mechanistic memorization and reading without comprehension. Instead, encourage students to pose bold questions, foster creative thinking, and take their learning to a higher level.

Change teaching methodology from teacher-centered to student-centered learning. Encourage students to think critically and carefully. Students should, under the teachers' direction, find the links between new knowledge and old knowledge.

Change teachers' tendencies to emphasize pedantry through dry lecturing. Encourage students to be attentive and active. Students should be able to recognize and appreciate their own achievements and progress. They should be encouraged to take part in class debates and boldly express their own opinions, which will arouse interest in studying. Students should be nurtured and educated in a positive environment.

Obstacles in the Three-Level Training for Teachers

The following phrases express some common misconceptions:

‘AIDS is far from us, so it only concerns foreigners.’ ‘If one preserves one's purity he/she cannot become infected.’ ‘We don't have enough funds to do AIDS prevention education.’ ‘Conducting sex education for students would make it seem as if we are encouraging them to be promiscuous.’ ‘This program makes such a large fuss over such a trivial issue.’ ‘Broader society and parents won't understand the purpose of sex education.’

These common misconceptions can be held by officials and teachers alike. We must address these naïve stereotypes during training, and carefully explain how they are mistaken.

Programs Effectively Implemented, Fuyuanhao Vocational School

(8 December, 1999)

Clearly Define Leadership Roles and Program Goals

In order to effectively carry out the AIDS and illegal drug use prevention activities among faculty, Mr. Gao Anjiu (school authority and Party branch head) was appointed as the director of the school committee. All administrative personnel, teachers in charge of classes, teachers of social science, and heads of teaching and research groups served as group members.

A committee office has been set up with links to the school's Office of Public affairs. Mr. Zhou Qirong was designated to oversee daily affairs.
Develop a Specific Work Plan and Carry Out Three-level Training

In order to carry out this program effectively, five documents - Documents (1998) No. 1, 6, 7, 9, and 12 were successively drawn up to bring up concrete suggestions about the activities.

A three-level training course was held for the school administrative personnel, Party members, teachers in charge of classes, heads of teaching and research groups, and Political Science teachers. A total of 93 people participated in the training, which took place from October 6 to 8, 1999. Mr. Gao Anjiu, the principal, spoke at the training course. Mr. Zhou Qirong, director of the Political Office, and Dr. Jian Xiuchuan, the school doctor, lectured on AIDS prevention, illegal drug use prevention and life skills training.

Materials entitled *Life skills Education Material on AIDS Prevention, AIDS Messages That Medical Workers Must Know* and 186 information packets in all were distributed to each participant. Training materials developed by the lecturers, such as ‘Stay Away from Destructive Illegal Drugs,’ ‘Cherish Life and Strengthen Life Skills’ and ‘Life skills Education on AIDS Prevention’ were among the 279 leaflets that were also distributed.

Before the training course began, a survey was conducted to test for relevant knowledge about AIDS. The average score was 54.34%, but by the end of training, all of the 93 participants passed the examination with an average score of 96.22 and a passing rate of 100%.

Conducting Education on Special Topics in Class Activities

After the training was completed, the teachers in charge of class conducted four-stage training for students in class activities, focusing on topics such as AIDS prevention, illegal drug use prevention, and life skills training. Altogether, six lessons were taught over 135 activity periods. 1,035 copies of teaching materials were distributed.

Before the training, a survey was conducted among 332 students as a baseline survey. At the end of training, the students took a final examination. According to the baseline survey, the average score for relevant knowledge was scored at 58.34 before the training.

After the training, the average score increased to 96.02. 242 students received a perfect score on the examination. The passing rates were 55.02% and 99.42% respectively before and after the training. After the training, all of the students in the school have a clearer understanding of the importance of prevention of STDs/AIDS and drug abuse.

They also had a better understanding of how AIDS may be spread, how it is harmful, how it may be prevented and controlled, and how to tell others about it. Lastly, students have been taught to develop life skills, active and progressive lives.

Life Skills Education - Hands-on Learning

Since the beginning of this program, the school clinic has published four special columns on Life Skills education in the school newspaper. Different classes have published 15 columns on Life Skills education in the class newspapers.

The school's Political Office has published four issues of a comprehensive periodical entitled ‘Bulletin on Political Education’ which focus on life skills education. The school clinic has held training sessions on life skills and adolescence for female students in grade 2 of senior middle school. 196 students attended, and a videotape was used to present the information.

The Political Office, the school committee of the Communist Youth League, and the school clinic jointly held a training course for the 120 students from the cadres of the League Committee, students union, and cadres of the League from different classes. During these
sessions, 240 copies of life skills education materials, such as ‘Life skills Education during Adolescence’ and ‘School Life Skills’ were distributed.

**Allocation of Special Activities Funds**

Although the school suffers a debt of over 1.3 million RMB, the administrative department still allocated RMB312,65 to guarantee the normal implementation of the program. Careful budgeting allocated the money to the organization of the training courses, development of education materials and the purchase of audio-visual equipment.

**Recommended Teaching Plans**

**Drama: Love Your Life, Stay Away From Drugs.**

*Written by the middle school of Daisi town in Fushun county (5 Nov. 1992)*

- **Time:** Not specified
- **Place:** Fictitious
- **Characters:** A for AIDS, D for drug needles, HA for high alert, HB for life skills behaviors. (The number of HAs and HBs is flexible.)
- One boy singer, one girl singer, two piano players.
- **Costumes:**
  - A: horrible and disgusting looking, masked by the twisted letters of ‘AIDS’, with ‘HIV’ written on the back of the clothes.
  - D: dressed up in suits, looking green and gray, with a hat simulating a needle above his/her head.
  - HA and HB - same clothes, nice but bizarre, with their titles written on their hats.
- **Stage scene:** Strange and beautiful, with trees, flowers, grass and large stuffed animals.

(The curtain rises)

*(A shows up, acting high and mighty)*

*(D follows, watching A indifferently)*

**D:** *(claps his hands)*

**A:** Who are you?

**(threatens D with ghost-like movements and howls)**

**D:** Come on, knock it off! Who do you think you are? You think I don't know who you are?

**(tears off A's mask, speaks to the audience). AIDS is short for Acquired Immune Deficiency Syndrome. It's come from elsewhere, but now it wants to stretch its legs in China!**

**A:** *(throws away his mask)* Who the heck are you!?

**(takes out his symbol and puts it on.)*

**A:** Oh! It's my old friend Drug Needle! What an honor to meet you!

**(reaches out his hand,)*

**D:** *(ignores his hand and tightens his tie)* Old friend? *(disgusted)* You are throwing that title around a little too carelessly. Behave yourself!

**(awkwardly takes back his hand)** Well, ah, in fact I am powerful, I am mighty. If anybody has me, they will be dead. Nothing can save them!
D:  *(laughs)* If! If! You know too well just how weak you can be if your
(turns A around) HIV positive virus can't get into a human body.
You know, heat can kill you, soap can kill you. Even if you stay exposed in
the air for a while, you'll be dead…

A:  *(goes mad)* Hey! Get it straight, man, I am already inside of the human body,
not like those nomads goofing around. You know, they don't call me AIDS for
nothing!

D:  *(sneers)* And you've got me to thank while you are enjoying your stay there.
I am the one who brought you into the body while they were using me.

A:  *(outraged but powerless)* Alright, you win. Mr. (Ms.) Drug, nice to meet you.
*(bows)*

D:  *(ignores)*

A:  Please! Sir/Madam! It's a pleasure to meet you! *(salutes)*

D:  *(turns around to light a cigarette)*

A:  Please! Boss! Talking to you is the greatest thing that has ever happened to me
in my life! *(salutes again)*

D:  *(puts a smile on his/her face and turns back)*

A:  Mr. (Ms.) Drug, you are Satan! *(turns around)*

D:  What? What did you say? How dare you!

A:  No, no, no, no, you've got me wrong. I said you are sacred!

D:  Why did you turn around then?

A:  Well, since you are sacred, how can I dare to look into your eyes?

D:  It's ok, just call me a friend. Let's go have some fun!
*(They sing as they destroy the stage scene)*

D:  I'm Drug Needle!

A:  I'm AIDS!

D:  He's always by my side!

A:  Like peas and carrots!

A&D:  Like peas and carrots!

D:  *(gets alerted)* Hey! We've got to hide!

D:  Be quiet, our worst enemies are coming! *(they lie down on the stage)*

*(HA and HB show up, singing and dancing)*

HA&HB: Beautiful blue sky, what a beautiful life! We are happy because
we are life skills. Let's take care of our own bodies!

HA:  *(suddenly stops)* Look, my sister, drugs and AIDS were here. What a
mess they made!

HB:  *(checking)* Right, let's stay and help out. *(they clean up the stage)* Look,
it seems that somebody's heading for the hospital!

HB:  *(Looks out)* Granpa! Granny! Are you going to the hospital? If you have to take
an injection or transfusion, be sure to use disposable needles! You're welcome!

HA:  One other thing, don't take any unnecessary blood transfusions! Yes! Right!

HA&HB: Good-bye! Hope you get well soon! *(they dance)*

HA:  There's someone else coming! They look like...... *(gets shy)*

HB:  What's that look for?
HA: They look like a couple in love, like they're going to get married.

HB: (looks out) Oh, yeah! Hello, sir and ma'am. Please include the HIV test in your marriage life skills exams. Just in case it turns out to be positive, you'd better not have a child.

HA: (in a low voice) One other thing, be loyal to your spouse, for love, and for the prevention of AIDS.

HB: My sister, why did you say it in such a low voice? It's nothing to be shy about! Come on, let's yell together!

HA&HB: Please be loyal to your love! For the sake of love, and for the prevention of AIDS!

HB: See, they thanked us!

(They sing and dance again.)

La, la, la, la, la, la, let's prevent AIDS, let's act now!
La, la, la, la, la, la, as long as we're aware, we don't fear AIDS! We don't fear AIDS!
La, la, la, la, la, la, as long as we behave ourselves, AIDS has nowhere to hide!

(D and A rise up in the dance)
A: Hey, buddy! I'm going crazy here! What should we do?
D: Run! We'd better run away!

(They try to run, but always get stopped by the dancing HA and HB.
At the end of the drama, they fall to the ground and die.)

(The end. The curtain falls.)

November 5, 1998

Games: Blindfolded relay -Helping Patients

P.E. game plans for AIDS prevention in the Baiguo primary school of Dengjingguan town.
Designed by Wang Yu, teacher of the school.

Purpose of the Game

To help students realize that AIDS is an incurable but preventable disease which kills people, causes social turbulence and destroys families. The best vaccine for AIDS is preventative behavior.

To let students learn about the ways in which AIDS is transmitted, so that they will stay away from drugs, discarded needles and public razors. They should also learn to pay more attention to sterilization and injection procedures, and be sure they go to authorized hospitals for medical treatment.

To help students develop a positive attitude towards AIDS-infected classmates, eliminating discrimination against and social avoidance of AIDS patients.

Preparations for the Game

Choose the game area.

Divide the class into 5 groups of 9 students in each group. Pick one person in each group to be designated as ‘HIV-positive.’

Materials needed: five handkerchiefs, five hats with ‘HIV’ written on them and some awards.
**Key Points**

Gather the students together and give instructions for the game.

1) Give an introduction on AIDS, emphasizing its harmfulness and the ways in which it's transmitted.

2) Tell students about how to prevent AIDS from spreading.

3) Discuss with students how to develop the positive attitude towards AIDS patients.

**Steps**

1) Choose one person from each group as AIDS patient. He/she wears the ‘HIV’ hat and the blindfold. The blindfold means insulation of AIDS virus, and it provides a way to test each team member's cooperation and teamwork skills.

2) Equal numbers of people stand on two sides of the designated line. Each time, two students from each side help the patient run to the other side, as shown in the picture. This cooperation represents support and encouragement given to the patient, making him/her feel safe.

3) People on each of the two sides help the patient in turns, until the whole range of running is complete. Those who finish the whole running first win.

4) Rules: the pretend patient must be blindfolded. If the handkerchief falls off during the game, he/she should stop to put it on again.

5) Be careful not to fall down and get hurt. Adjust your moves and be quick to respond.

6) Gather Again and Conclude the Game.

**Review What You Have Learned**

The teacher makes a short evaluation of each group's performance and asks each group to choose a number between one and five. Each number stands for a different compulsory quiz question. Students get 10 points for each right answer. Questions 6 ~8 are optional, and students will receive 10 more points for each right answer. Points will not be deducted if they give the wrong answer.

**Compulsory Questions**

- Can AIDS be transmitted by shaking hands, hugging or sharing tableware?
- Why can't we play with discarded injection needles?
- Is it safe to work, study and interact with HIV positive people and their family members?
- What's the best vaccine for AIDS?
- What kind of environment is not suitable for the AIDS virus to survive in?

**Optional Questions**

- How does AIDS harm individuals?
- How does AIDS harm families?
- How does AIDS harm society?
Talk about the answers and award points to the groups which gave correct answers.
Grant awards according to the points gained.

Class Discussion: The Fatal Red Dancing Shoes
- A Guide for Self-Discipline for High School Students
Xu Chi, No.2 high school, Fushun county

Goals
High school students today are exposed to all kinds of negative influences in society. One of
the first priorities in education is to help students gain a better sense of themselves and be
confident enough to avoid these pitfalls.
This activity focuses on initiating a dialogue between teachers and students in order to help
students learn about themselves and understand that the confusion experienced during
adolescence is normal.

Preparation for the Activity
The teacher prepares a recording of Anderson's well-known fairy tale ‘The Red Shoes.’
Before the activity, ask students for examples of bad habits that they have. Call these negative
factors ‘red shoes.’
Write the following theme on the blackboard in bold letters: ‘Resist temptation, stay away
from drugs.’

Form of the Activity
A class centered around a theme. The teacher raises a topic and the students analyze and
discuss their own views and behavior in relation to that topic. By the end of the class, students
should have clearer positions on the topic and more understanding of their own reaction
similar situations.

Content
Teacher: Let's listen to the recording, and then we will discuss what we hear. (Plays the
tape:) ‘Caron loves to dance, and she just can't stop. She dances in the rain, she dances
through the entire evening. But when she wants to move to the left, the shoes move to the
right...... When Caron tries to take off the shoes, she finds that the shoes have already been
fused with her feet......’

Students' Reaction
First they are curious about Caron's habit. They are attracted to the story's magic, and they
marvel at the strange dancing shoes. But the ending is sad, with Caron losing control of her
feet.
Teacher: Just now we listened to Anderson's well-known fairy tale ‘The Red Shoes.’ The
story was about Caron, a beautiful and hard-working girl, who has to cut off her feet because
she can't help dancing. The magic of the red dancing shoes keeps her going and won't let her
stop. What do you think about the story?
(After a while.)
Student A: The red shoes can be found everywhere in our lives. You could compare the effect
the red shoes have on Caron to the effect alcohol has on alcoholics, heroin on drug addicts,
dice on gamblers. They are usually forced to pay a heavy price for their obsessions. Their families may be destroyed and they risk early deaths.

**Teacher's Comment:** Good. That is a very graphic explanation of your understanding of what the red shoes represent. The red shoes are a kind of temptation. How do you think Caron views the red shoes?

**Student B:** Caron is so obsessed with the red shoes that she thinks that nothing in the world can be compared with them. When she is dancing, she forgets about important things, like her studies and her prayers. She even forgets to take care of her sick grandma who cared for her when she was young. She dances at her grandma's funeral, which is disrespectful and inappropriate.

**Teacher's Comment:** There are lots of temptations in life. For example, it is very difficult to break a drug addiction once you have become reliant on drugs. That is a very vivid description.

**Teacher's Guiding Question:** What are the red shoes that distract us from our studies?

(After a while)

**Student C:** My red shoes are fantasy novels. Like Caron, I read them at home, at school, during classes, day and night. I read them all the time. Caron is harmed physically in the story. I probably suffer mental trauma, because reading novels sometimes takes me away from my studies. I was so distracted that I failed to gain admission to the prestigious high school I had been dreaming about.

*All the students:* My red shoes are computer games. My red shoes are love novels. My red shoes are television. My red shoes are window-shopping. My red shoes are chatting. My red shoes are snacks and pop singers! (Everybody laughs.)

**Student D:** I learned a lot from the story, although I can't tell if I have any obsessions myself. Caron is not really addicted to dancing at the beginning. She thinks it doesn't hurt to wear the shoes for just a short while. But by the time she realizes that the shoes are controlling her, she can't take them off anymore. We should never allow ourselves to think ‘It doesn't hurt to... ‘ We are still young, and since our resistance to temptation is not very strong, we should not test our luck on the red shoes.

**Teacher's Comment:** Good reasoning. Tiny things can really cause disasters if they escalate. We shouldn't do things that are wrong, no matter how harmless or insignificant they may seem.

**Teacher's guidance again:** What can we learn from Caron's experience?

**Student C:** We should recognize Caron's courage in cutting off her feet to break away from the red shoes. I promise I will get rid of my fantasy novels, no matter how painful it is.

**Teacher's comment:** Right. You don't have to kill yourself just because you are sick. You have to cure the disease, and the best doctor is yourself. How do you plan to get rid of your bad habits?

Students make individual plans to:

- Identify my own red shoes that distract me from my studies and may be harmful to my growth. I will tell my teachers, classmates and parents about them, so that they can help me and monitor my behavior when I face temptations.

- Write ‘No ....’ (e.g. ‘No television’) on two posters and place them on my desk and bed, so that I can be reminded to be strong all the time.
• Distract myself from temptations and devote myself to studies.

*Teacher's summary:* Caron loses her feet because she can't break away from the red shoes. We may destroy our youth and regret it for the rest of our lives unless we can resist temptations and break away from bad habits. So let's work together to say NO to temptations!

### VII PERMEATING AIDS EDUCATION INTO SCHOOL SUBJECTS

AIDS is not only a public health problem, but also a social issue. It relates to social development, medical care, loss of labor and personal behavior. It follows that there are various approaches to educating youngsters about how to prevent AIDS.

Outside of Life Skills classes and P.E. classes, we should also integrate AIDS education into other courses to make students aware of AIDS and its many consequences. The following examples are some excellent case studies. We hope they will be useful references for all teachers.

#### Integration with Verbal (Chinese) Class

**Language Class Helps Understanding of AIDS**

*Cui Hengping,* Chinese teacher of Beiling high school, Haian, Jiangsu

AIDS has claimed more than 30 million lives in just the past 20 years. It is a very real threat that frightens many people. As a Chinese teacher, I know it's my responsibility to tell our young boys and girls about the disease. They should know how to reduce their risk of contracting HIV, and they should know how to interact with AIDS patients in the right way. They also have to learn what developments are currently taking place, and what developments may take place in the future, in terms of preventing and treating AIDS.

The study of Chinese can be applied to real life issues, and we can go over these sensitive subjects while practicing listening, speaking, reading and writing in Chinese class. This widens students' perspectives on the world, improves their language ability and serves as a base for further education.

**Listening Activities**

- Arrange to have students watch video footage of the ‘World AIDS Day’ program produced by China Central Television.

- Watch the video recording of the ‘Focus’ program produced by CCTV which deals with AIDS as a topic. Listen to the episodes of the Singapore International College Student's debate competition on the topic ‘AIDS is not a social issue but a Life Skills problem.’

- Biology teachers can gives lectures on adolescence life skills and human biology related to sexual functions. Students can learn about how AIDS is harmful by studying the following facts:
- AIDS can be transmitted in three ways: blood exchange, sexual intercourse and from mother to embryo.
- AIDS cannot be cured but it can be prevented. We should not be afraid of AIDS, but we should guard ourselves against the disease.
- We should not look down upon AIDS patients. We should provide caring support for them.
- Young people especially should avoid premature sexual activity and drug use. It is important to develop lifelong Life Skills habits even at a young age.

Reading Activities

During these activities, students can work on their abilities to read quickly and comprehend the main points of an article.

- Read the following materials out loud to students:
  - The Fudan team's closing statements at the first college student's debate competition. This article was written in the magazine ‘Speech & Eloquence.’
  - The poem ‘Seeing off the Devil’ written by Chairman Mao about the elimination of schistosomiasis.

- Have students read the following articles individually:
  - ‘Taiwan rules state that people who deliberately transmit AIDS will be sentenced to 7 years in jail.’ (reported in the Yang Cheng evening paper dated Dec. 10, 1997)
  - ‘Experts warn: Be careful of AIDS’ (reported in the Qi Lu evening paper dated Nov. 28, 1997)
  - ‘US scientists found new genes related to AIDS’ (reported in the Yangtzi evening paper dated Jan. 26, 1998)
  - ‘Surgery without blood transfusion emerges in the US’ (reported in the Shanghai translation paper dated Jan. 5, 1998)
  - ‘US scientists work on AIDS vaccine’ (from the Internet)

- After study and discussion, the following conclusions may be reached:
  - Other than blood transfusions and venous injections, there are also small chances that AIDS can be transmitted through more normal procedures like tooth extractions, car accidents and haircuts. Sanitary precautions should be taken.
  - Several developments have paved the way for future research on eliminating AIDS: surgery without blood transfusion, the discovery of the nef gene, and the development of an AIDS vaccine.
  - Other related measures can be taken to curb AIDS transmission. Harsher penalties for illegal drug use and prostitution are one example. Voluntary blood donations and careful screening for HIV-positive blood samples could also help. Finally, promotion of premarital life skills examinations and pregnancy life skills examinations can also contribute to prevent AIDS from spreading further.

Simultaneously, scanning ability can also be trained through this exercise.
Oral Activities:

(1) Students draw pictures to show the ways in which AIDS is transmitted. Then they clearly explain and describe the picture to others. This exercise increases understanding of the biological basis of AIDS.

(2) Students collect pictures and articles about AIDS patients from magazines and newspaper clippings. Their summaries can be presented in class.

(3) Fine arts teachers can draw pictures depicting ‘Princess Diana's affections’ and ‘Singer Elton John's anti-AIDS fund.’ Students can then describe the pictures, and discuss their own opinions. Diana and Elton John can be used as examples of model behavior in caring for AIDS patients.

Writing:

(1) ‘A call for AIDS prevention’ is the title of one assignment. This writing exercise aims to clarify information about AIDS that the students have received so far. They should review old materials and also integrate new information and developments to share with others.

(2) ‘A letter to future mothers’ is another essay that requires students to think and write about how AIDS can lead to disastrous results for individuals, families and society. Specifically, it should focus on the possibility of AIDS transmission from mother to baby, demonstrating the fatal impact of AIDS to family and society, and help students build up the sense of responsibility.

(3) ‘An AIDS patient talks about himself’ is an assignment that asks students to think about AIDS from a new perspective. This should help them understand more about the needs of AIDS patients themselves.

‘Words are not only tools for communication, they are also a reflection of culture.’ AIDS awareness education must be a part of basic Chinese education. If information about AIDS can be communicated to students effectively enough that they are committed to preventing the spread of AIDS in the future, our efforts will be successful.

Submitted in November 1997.

Integration with English Class

English learning is now a part of education in China. Choosing an English article concerning AIDS – a worldwide topic, is an effective way to generate classroom interest in this issue.

An AIDS Patient - Jane

My name is Jane and I am 41 years old. I became infected with HIV through my husband who had sex with a prostitute. We were married for 20 years, and we have two children - a daughter 14 and a son 11. Our happiness suddenly disappeared when my husband was diagnosed as being HIV-positive. Our private physician didn't want to treat him, and was disrespectful towards me. I became very depressed and had to sacrifice my job to stay home with my husband for 12 days. During the last two days, he developed a high fever and experienced difficulty in breathing. I had him to admit him to hospital. My children and I could not control our emotions, and we hugged him affectionately until he drew his last breath. There was a stigma attached to our situation, and the doctors and nurses at the hospital certainly discriminated against us. I felt shamed by the Life Skills officer who followed us to the cremation.

I was then instructed by the doctor to have a blood test. Upon being confirmed as HIV-positive, I felt so depressed and scared that I immediately resigned from my job as a
nursery school teacher. I isolated myself from others, and I didn't dare go out. I separated my belongings from my children's, and for the next two years of my life, I felt like such a failure. My family was supportive, including my two children, but they all went through a lot of pain. I was having a mental breakdown, and my mother insisted that I see a psychiatrist. After that, I was prescribed anti-depression pills and tranquilizers. Life was terrible during those two years and I thought of suicide.

Fortunately, one day I made the decision to move away from my home to Rumah Penyayang. I stayed there for three months and became involved in charity work. We observed Islam as a concept in our approach to counseling, discipline, vocational training and other activities. I am indeed grateful and thankful to Hawa for all her love, concern and support in helping me regain my confidence in living life.

She encouraged me to expose myself to the outside world and to be a good role model and mother. I learned a lot from her counseling and moved back to Ipoth. My supportive family was so happy to see the positive changes I had undergone.

The program has been beneficial to me. I now feel that I want to go on with life and accept HIV. I hope to recapture those two lost years of my life. Memories of my husband are still always with me and will remain forever in my heart. To those who have been faithful wives like me, learn a lesson from my experience, and know that HIV can still be a risk.

The Rights of Children

Children are vulnerable group in society, needing special care and protection. This is especially so in developing countries, where poverty is rarely the only cause for concern. Poverty is usually accompanied by many other social and health problems and together they endanger the mental and physical health and development of children.

In such circumstances, children affected by HIV/AIDS are faced not only with poverty and the distress it brings, but also with the disruptions to the family and its livelihood that sickness and loss of parents inevitably cause.

In addition, they may well find that society rejects them, for in many regions of the world there is still a stigma attached to HIV/AIDS sufferers and families. In these ways AIDS threatens children by restricting their chances of in the United Nations Convention on the Rights of the Child.

Integration with Geography Class

Data regarding the prevalence of AIDS both within China and worldwide can be integrated into geography classes. This can complement the lessons in Chapter 10 of the Textbook of Geography for Senior Middle School students (see the following figure).

Integration with Mathematics Class

The number of HIV-infected persons, computations of loss of manpower and materials due to AIDS can be integrated into applied math word problems. This helps students understand how harmful AIDS can be (see the following data).

Figure Distribution of HIV-infected Persons in China

Most of the HIV-infected persons are seen in the West and Middle part of China (up to the end of 1999)

More than 5,000 cases

1,001 ~ 5,000

97
Estimated Number of Adults and Children Newly Infected with HIV Worldwide during 1999

<table>
<thead>
<tr>
<th>Region</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>North America</td>
<td>920 thousand</td>
</tr>
<tr>
<td>Caribbean</td>
<td>360 thousand</td>
</tr>
<tr>
<td>Latin America</td>
<td>3 million</td>
</tr>
<tr>
<td>Western Europe</td>
<td>520 thousand</td>
</tr>
<tr>
<td>Eastern Europe and Central Asia</td>
<td>360 thousand</td>
</tr>
<tr>
<td>North Africa and Middle East</td>
<td>220 thousand</td>
</tr>
<tr>
<td>Sub-Saharan Africa</td>
<td>223 million</td>
</tr>
<tr>
<td>East Asia and Pacific Region</td>
<td>530 thousand</td>
</tr>
<tr>
<td>South and South-East Asia</td>
<td>6 million</td>
</tr>
<tr>
<td>Australia and New Zealand</td>
<td>12,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>336 million</strong></td>
</tr>
</tbody>
</table>

Cost of Treatment for AIDS Patients in China and Other Developing Countries in 1991 (US dollar)

<table>
<thead>
<tr>
<th>Country</th>
<th>Direct Cost (1)</th>
<th>Indirect Cost (2)</th>
<th>Total Cost (3)</th>
<th>Per Capita Income (4)</th>
<th>Total Cost/Per Capita Income (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>China</td>
<td>880 to 1941</td>
<td>10,779 to 13,586</td>
<td>11,387 to 1,4927</td>
<td>616</td>
<td>18.3 to 24.4</td>
</tr>
<tr>
<td>India</td>
<td>783</td>
<td>10,100</td>
<td>10,838</td>
<td>580</td>
<td>18.7</td>
</tr>
<tr>
<td>Indonesia</td>
<td>1490</td>
<td>14,680</td>
<td>16,170</td>
<td>843</td>
<td>19.2</td>
</tr>
<tr>
<td>Thailand</td>
<td>987 to 1,542</td>
<td>34,322</td>
<td>35,309 to 35,846</td>
<td>1,971</td>
<td>17.9 to 18.2</td>
</tr>
</tbody>
</table>

The total treatment cost for an AIDS patient is 18.3 to 24.4 times the annual per capita income in China, 18.7 times in India, 19.2 times in Indonesia, and 17.9~18.2 times in Thailand; the proportion of direct cost to total cost is 7.8% to 12.9% in China, 6.8% in India, 9.2% in Indonesia, and 2.8% to 8.9% in Thailand.

With respect to this proportion, the treatment cost for AIDS is a little higher in China than in other Asian countries. By and large, the cost for medical care and treatment for AIDS only makes up a small part of the influence of AIDS on the broader economy.

The loss of income and reduction in productive forces have more economic and social impact.
Integration with Social Science Class

The following article is not directly related to AIDS prevention education, but the theories and approaches to education are closely connected to the chapter on Life Skills in this book. This article is provided as a reference.

Help Students Adjust Their Emotions

Lin Jie, Kunming Foreign Studies School

In an effort to improve the quality of teaching politics for high school students, the state education department requires junior high schools to give students extracurriculum classes on morality, psychology, law, social development and state affairs. It is something new for schools to help students develop a life skillsy state of mind.

Why is it necessary to improve student's mental strength in politics class? The following is my personal opinion.

First, the focus of China's education system is to change from being based on examinations to concentrating on the quality of learning.

Quality education is an expansive topic. It involves science, morality, work and life skills. The development of mental strength and stamina is vital to the ability to study and master scientific knowledge. Morality is closely related to basic human emotions and feelings, and work ability is largely related to the ability to take action. Therefore, a student's potential depends on a life skillsy state of mind.

Secondly, young people face mental challenges posed by science and technology as well. Book lessons alone are not adequate for one to adapt to society. Highly educated people who find it hard to survive in the real world are defined by UNESCO as "functional illiterates." We should train our children to have mental strength, similar in concept to the training used for academic and physical skills. By doing so our students would win out in the future competition in society.

Thirdly, high school students between the ages of 13 to 18 are susceptible to developing psychological problems. According to a survey conducted among 30,000 students, about 32% had psychological problems. Another survey showed that only 17% of high school students are psychologically life skillsy. Liu Bin, former vice director of the state education committee said that the numbers of students running away from home or thinking about suicide are on the rise. These actions are usually due to perceived problems such as anxiety, paranoia, inferiority complex, desolation and faintheartedness. Rapid responses and solutions must be introduced to counteract these trends. Mental strength training is important for students to develop a life skillsy state of mind and personality. High school teachers should carefully consider how to carry out this type of training.

I think the key to developing mental strength is to learn how to adjust your emotions. Emotions are the windows into the heart, and they play an important role in mental activities. Mental strength is a combination of the abilities to judge situations, adjust your emotions and react accordingly. The ability to judge situations is somewhat intellectual, while the ability to adjust emotions and react are less related to intellect. Positive emotions can lead to positive action, and negative emotions can weaken one's ability to take action.

Feelings like patriotism, sense of beauty, sense of responsibility, and the satisfaction that comes from helping others are basic emotions. Those who cannot control their own emotions or understand other people's emotions may find it difficult to command respect and honor.

I tried the following initiatives in my politics class.

- First, to carry out teaching plans on the basis of analyzing the state of mind of students and their emotions. Currently, most students are the only children in their families. They receive a lot of attention from their parents and tend to be selfish, radical, willful, peacockish and mentally weak. They are feisty and their emotions are unstable. 'I'll do what I want to do' is their common attitude. Keeping these
circumstances in mind, I created a positive atmosphere in my class, encouraging students to take part in the discussion and to say what they have on their minds. Then I analyze their problems and help them sort things out.

The students love the class and flood me with questions even after class has ended. The most common problem among them is the attitude they adopt with their parents. I arranged a meeting to discuss the problem and invited their parents to come with them. During the meeting, we discussed together how to curb these attitudes that get out of hand. Both the students and their parents reacted positively to the activity. They realized how important it is to control one's emotions and they learned some basic and effective methods to do that.

- Secondly, sympathize with the students' situations. Understanding students is very important to teachers during these sorts of psychological analyses. We have to feel their emotions. When we see students crying, we should try to put ourselves in their shoes and feel their pain. When students seem down, we should try to understand how hopeless they feel, rather than dismissing their emotions. Only then will students take us to be real friends and open up to us, so that we can help them deal with their real problems.

  Attentive listening is another important part of helping students improve their mental strength. If we listen to them respectfully and show that we are understanding and willing to help, we can guide them to become more open and confident. Students will slowly learn to have faith in themselves, and we can guide them through difficult troubles and problems they may encounter.

- Thirdly, help students know themselves better. During contact with my students, I found that they are unable to develop their state of mind and control their emotions well when they don't have a clear sense of self. The students who overestimate their abilities and importance become too cocky and do not listen to other people's opinions. If they think parents and teachers talk too much, these students simply become rebellious. On the other end of the spectrum, students who have low self-esteem may develop inferiority complexes and depressed states of mind. Therefore helping students know themselves is vital to developing mental strength.

In the class, I held up the picture of 'The sheep and the giraffe' and asked for their comments. Then they were required to play two games.

1) The tree of strengths and the tree of weaknesses. I drew two trees and asked each student to write his/her own 10 strengths and 10 weaknesses on the trees, so that they could get to know themselves better.

2) Secret in the envelope. I asked parents to write down one of their child's strengths or weaknesses every day and put it into an envelope. The students could then open the envelope after one week, so that they could see themselves through other people's eyes.

The students were interested in the games and they followed the given instructions. At the conclusion of the activities, all of them believed they had gotten to know themselves better. Some of them had wondered before why they couldn't get along very well with classmates and parents, and they had always thought it was somebody else's fault. After some of the exercises, they realized that they had also been inconsiderate and disruptive at times. Students learned to tell right from wrong and learned how to control their emotions and behavior more than before.

Also, through heart-to-heart talks, I encouraged students to accept difficulties and failures with an optimistic attitude. Every week, students would write down what they wanted to tell me in their regular reports. I tried to reach their inner thoughts through the reports.

One girl had been playing the piano for years and had passed grade 9. After she got into junior high school, her piano skills didn't improve because she didn't have enough time to practice. Moreover, her parents placed a lot of pressure on her to do everything well. She felt quite depressed and wrote, "I can't stand it. I'm too nervous. Failing the grade 10 piano test has been haunting me."
After I read her report, I met with her and told her that life is full of ups and downs. Strong people will take defeats as challenges, and only cowards will let failures get them down. I encouraged her to face disappointment with the right attitude, and to smile at the next challenge to come. And I told her that I looked forward to sharing her joy when she succeeded.

Another student is not very good at scores. She wrote in her diary: ‘Teacher does not like me.’ I told her that teacher would not like or dislike anyone for no reason. Just do what she should do.

I had heart-to-heart talks like that with students after reading their reports. It took me quite a lot of time and energy but I know it was worthwhile.

Outdoor activities are another approach to reaching students. I had to plan the activities very carefully, taking the students' heavy workloads into consideration. I chose to let the students decide what they wanted to do rather than following the school's semester plans. It was more complicated to plan, but the students relished the opportunity to take part in the decision making. It was a controversial issue but I was determined to let them play a role in the planning.

One day, they challenged another class to a basketball match. Our class lost. Some of them cried to me about their experiences. The cheerleaders yelled so loudly, and they tried so hard to win the game that they felt depressed when the spectators laughed at them. They talked a lot about their emotions and the game. I was so glad to find that they had learned about solidarity, struggle, mental power and collective honor. Their character improved while playing these simple games. I resolved to organize more activities like that. Whether they win or lose, the experience is vital to the process of growing up. After they go through different kinds of emotions, they will learn to gracefully accept honor and defeat, and build an optimistic and open attitude towards life.

In any case, it is a great task to cultivate students' mental strength. Teachers should coach them on how to understand and cope with their emotions. If we begin to do that during their junior high school days, they will become the masters of the 21st century.
EXPERIENCES AND METHODS USED TO PROMOTE SEX EDUCATION AND AIDS PREVENTION IN CHINA

Nine Ways to Talk at Home With Your Kids About Sex

The following ways are also suitable for practice in schools.

Situational Teaching

Family education can be flexible. On-the-spot learning can deliver a memorable message, if parents recognize the opportunities to do so.

The following article was written by a little boy.

As soon as the door opened, I squeezed onto the bus and took a seat. I made my father sit down, because he suffered from stomach trouble. A few moments later, he stood up and let another lady sit down in his seat.

I was curious about that. There didn't seem to be anything wrong with the young lady, so why did my father give up the seat to her? I was unhappy, but my father ignored my discomfort. After we got off the bus, father smiled at me and said 'Son, couldn't you see she is pregnant?'

Then he went on to tell me how hard it was to bring a child into the world. I remember when I was very little, I asked my mum how I came into the world. She always told me that I came from a rock. Now I know I really came from my mother's belly. Every mother will have a hard time bringing her child into the world.

Since then, every time I have seen a pregnant lady on the bus I have given her my seat.

This article demonstrates how one father seized the opportunity to teach his son a little bit about human reproduction. The boy learned to appreciate his mother's role in reproduction, and also learned to respect other women.

Independent Study

It's not easy for parents to explain physical changes and bodily functions to kids during adolescence. First of all, many parents don't even know much about the topic themselves. Secondly, it is difficult for most parents to even begin to talk about it.

There is a need to abandon the old taboos about sex. Parents may want to let their children learn about sex more independently as well. There are books available that are suitable for adolescence education on this subject. This can help combat sexual ignorance. It's wrong to keep children shielded from information about sex, and it's a fruitless effort anyway. There will be a lot of other, less accurate and less reliable source from which children can acquire that information, which means that censorship of useful information only makes things worse.

A good book can be equivalent to a good teacher, but parents should still be very careful when choosing which books to give their children. The books should be appropriate for their age. Parents don't have to give the books to the children directly if there will be too much embarrassment. Books can be left on a table, as if by accident, so that shy children will still read them.
Novels

A good novel can be earth-shaking for students who are still developing their views toward life. These stories are usually more powerful than parents' lecturing. Novels and good writing can sometimes convey ideas more expressively than straightforward information.

Grown adults can often still remember the effect that characters in books they read during their youth had on their thinking. Students can learn about society through novels. They can feel happiness and pain through the characters, and they can learn about good and evil, truth and lies. They can even find role models in these books.

Suggestions

We cannot force students into a certain way of thinking, but constructive suggestions can be helpful to them. Students can often use some guidance. For example, parents can tell their children about cases of other people's misbehavior and the negative consequences of such behavior. Through these types of conversation, parents can teach their children indirect lessons about morality, values, appropriate behavior, and how to tell good from evil. These sorts of parables are more effective and more concrete than direct lectures.

Watch for the Beginning of Change

The influence that others have on young people can be so gradual that parents have to be conscious of small changes in attitude and behavior before things get too far. For example, cutting class, avoiding home, dealing with negative influences outside of school, being absent-minded in classes, being too emotional, being sneaky, etc may be signs of trouble.

However, parents should not overreact too much. Instead, they should demonstrate that they care about their children and will try to understand what he/she is going through. It is important that parents are trusted by their children so that there is openness and cooperation in working toward improvement.

Diversion of Attention

Young people during adolescence have a lot of energy and are very active. Studying all day is not relaxing. In fact students will tend to get bored very easily by constant studying. They may also be very sensitive to the slightest changes in relationships between boys and girls. There may be dramatic one-sided love stories and simple misunderstandings that will lead to both tears and joy.

Parents can also look for ways to make family life more exciting and interesting, like weekend activities, outings and hikes, etc which will keep kids' attention from being too consumed with these types of issues.

Keeping a Diary

Allow and encourage kids to make regular entries in a journal. They can record events that happen in their lives. They can also keep track of their experiences growing up - the pain and happiness that they go through. Diaries are a good way for young people to learn discipline, and their writing skills may also be enhanced. Diaries can help them to better understand their surroundings, and know themselves better.

Kids may make up some romantic stories in their diaries, but this is a common way to release their emotions during adolescence. It also helps kids who tend to be introverted to find a release.
Exchanging Letters Between Parents and Children

Some people might think that writing letters within a household is unnecessary. However, written expression usually brings out more things than daily verbal communication. It could be difficult for parents to control their emotions during direct conversation.

Detailed letters can have a more lasting effect on children, and a parent's point of view can be more clearly demonstrated. Writing can complement verbal communication. Something that is difficult to say out loud may be easier to write about. In one example, a father caught his son masturbating. He became so angry that he yelled and berated the boy immediately. When the father calmed down, he realized he was overreacting.

He wrote a letter and placed it under the boy’s pillow, apologizing for his attitude and encouraging the boy to be a real man. Some other parents quote proverbs and famous sayings in their letters to keep their children from going astray.

(The picture: An Indonesian puppeteer puts on a puppet show for children during a presentation sponsored by UNICEF. The lecture described how to use puppetry to explain issues about AIDS, sexual difference, peace and sexual slavery to children.)

Experiences with Sex Education and AIDS Prevention Education in Schools

Using Artful Language

During AIDS prevention education, the topic of sex is inevitable. However, if there are cultural taboos or obvious discomfort with the subject, then we can resort to using indirect language to get the same points across.

Students can receive in-depth information in an implied manner. For instance, a senior high school lesson on abstinence may be entitled Don’t reap the fruits until they are ripe. Educators should also be sensitive to the traditions and cultures of ethnic minorities when discussing this topic.

Wei Zhonghe, member education committee, Fushun county, Sichuan province

Discomfort usually results from sensitive language, which we can sometimes change. For example, the terms ‘sexual intercourse’ or ‘making love’ can be made more neutral and called ‘sexual action.’ Words like ‘penetrate’ can be replaced with ‘organ contact’ or ‘body contact.’ The differences are dramatic. We should act according to the particular situation.

Lin Shangren, Nanning No.1 professional high school, Guangxi province

When I explain sex, I use the words ‘sexual contact’. If a curious student asks what I mean, I answer directly, ‘It's the intimate contact made between men and women's sexual organs.’ If he/she persists in asking for details (which may be done intentionally to upset the class), I ask him/her to consult me personally after class for further information.

Xiang Jingyi, Beijing No.85 high school

We don't have to climb the wall if there's a door open to let us through.

A high school student

Teachers and Students - Relationships

The relationship between teachers and students that I am talking about is specific to special courses dealing with Life Skills education. I choose to do the following things:

Before I start class, I tell the students who I am, highlighting my professional qualifications for teaching the class.

First of all, I'm a doctor with years of medical experience. I'm also a teacher, so I can relate to students better than other doctors. Second, I am about the same age as their fathers. Third, I have two kids of my own. All of the above make me well-suited for my job teaching the Life Skills class.
I can win students' trust if I open up to them and show that I care about them. A Life Skills relationship between students and teachers will prevent some of the awkward situations caused by disruptive students. There must be mutual trust.

Lin Shangren, Nanning No.1 professional high school, Guangxi province

Know Your Students

I think teachers should get to know the students in two senses: First, how much do they know about sex and life skills? No matter what method a teacher opts to use, he/she should find that out very early. Teachers should know about the students' current understanding of sex and adapt lessons appropriately. Second, what do they want to learn? If teachers can answer these two questions, they can be more certain about what they should teach and how extensive their lessons should be. To avoid unnecessarily awkward situations, teachers should prepare for the most likely questions that students will ask them. A survey or class meeting may be helpful to find out these kinds of answers.

Lin Shangren, Nanning No.1 professional high school, Guangxi province

Multimedia

I love to watch the animated cartoons on sex education produced in Hong Kong and Japan. Teachers love to watch them, as well as the students. If the school doesn't have multimedia equipment, basic VCR's or VCD's are easily obtainable and just as acceptable.

Liu Ying, Beijing Jing Shan school

Teachers don't have to teach everything verbally, whether it's lecturing or answering questions. In situations where language is not suitable for expressing an idea, we can resort to pictures, models, projections, recordings, videos, movies, or letters, newspapers, pamphlets and posters.

To answer the questions difficult to respond to verbally, the teacher can just say: ‘Let's take a look at this model (or picture, etc), and you'll understand better.’ In any case, extra equipment and materials can be a lot of help.

Lin Shangren, Nanning No.1 professional high school, Guangxi province

Use of Diplomatic Terminology

Teachers can answer students' tough questions as a diplomat answers reporters' questions. For instance, they can respond with 'You've just raised a frequently asked question. I'll write it down and give you a detailed explanation later’ or 'I'll give you the answer after class’ or ‘I can't answer your question with a simple explanation, so I'll have to write it down and give it to you later.’

As these uncomfortable situations pass, things will get easier. Teachers can also demonstrate their senses of humor by saying things like 'I wouldn't tell that to any living soul!' which may result in laughter.

Lin Shangren, Nanning No.1 professional high school, Guangxi province

Humor and Metaphor

When I explained menstruation to my class of girls who were all studying tourism, I compared it to something else they were already studying: booking a hotel. The womb is just like a hotel. During a certain period of a month, the hotel gets ready for service (pregnancy) and awaits its customer (sperm) to settle in.

However, most months, the customer doesn't arrive, which means the hotel has to cancel the reservations. This results in menstruation. I also call the womb 'the palace for a child.' Lots of girls in our class said they had never had a class like this, and they were really impressed. I also compared premature sex and pregnancy to the premature harvest of green apples from the tree. It can be harmful to your life skills.

Lin Shangren, Nanning No.1 professional high school, Guangxi province
Controlling Sexual Desire

Some students asked me what sexiness was. One girl told me she posed the same question to her parents, and they got mad, calling her shameless and dirty. They even wanted to beat her. The girl just began junior high school and felt really upset. Her parents' reactions to her question were completely wrong. It hurt her dignity and strangled her desire to learn. Moreover, it created a gap between the parents and the girl.

I answered the question from a straightforward Life Skills and biological point of view, telling the students that boys and girls develop different body features because of the effect of hormones. It is a normal thing for boys to begin growing beards and Adam's apples. Boys' shoulders become broader, while girls gain weight around their breasts and hips. When those features become very obvious on someone, we may call the person 'sexy' because their gender becomes a more prominent characteristic.

Then I started to talk about sexiness from a psychological, ethical and real-world point of view. Influenced by many things, some young people become too obsessed with the idea of being sexy, which can be too distracting while they are growing up. The students were satisfied with my answers and the mystery was solved for them. Now they learned to behave themselves with or without the monitoring from their teachers and parents, and one goal of Life Skills education was reached.

Lan Honghua, Nanning No.4 professional high school, Guangxi province

The Right Dose at the Right Time

With the development of society, young people are growing up faster than ever and they are beginning to take an interest in sex at an earlier age. That is why I think we have to begin to answer their questions about sex beginning at the junior high school level. This can be done through classes on sex, life skills and psychology.

They should be reminded that premarital sex may have serious consequences like pregnancy before a girl is ready to be mother. They should also know about the risks involved with AIDS and STDs. Taking young students' knowledge levels and mental strength into consideration, we can still be ambiguous about certain subjects like sexual intercourse and specific ways to use contraceptives.

When I was telling them about the ways in which AIDS is transmitted, some students asked me what anal sex was. It caught me off guard, which was so embarrassing that I had to answer very vaguely. I said, 'It's the contact of sexual organs and that other part of the body.'

Then I said the inside of that part is very vulnerable and full of blood vessels. Once it is damaged, the secretion of the sexual organ can penetrate into the body's blood system, which is the most effective way for AIDS to be transmitted. I combined the above knowledge with AIDS prevention education to demonstrate the importance of abstinence, and I asked the students to think about taking real measures to prevent AIDS.

Lan Honghua, Nanning No.4 professional high school, Guangxi province

Improve the Environment

Environment includes the community environment and campus environment, as well as the indoor teaching environment. These can have a strong influence on students' learning. Teachers should try to improve the learning environment by integrating information on AIDS prevention into the environment. Electric screens, posters, pictures and files, blackboards and wall paper can be good media to communicate information about the harm of AIDS and how to prevent it.

If the students take the time to look at some of this posted information privately, they will have less questions in class. A well-designed learning environment can familiarize students with certain topics, so that they will accept it more naturally and be less uncomfortable about discussing them.

Cui Hengping, teacher of Beiling high school, Hai’an, Jiangsu province
Create the Situation

People tend to become reverential when in Church, sad when in a cemetery, relaxed and happy in a park. Emotions are linked to specific situations and places, which means that careful creation of situations can induce particular states of mind. When teaching about AIDS, the teacher can play solemn music and project black-and-white pictures of AIDS victims to convey the tragedy of the disease.

The teacher can also cover the class windows with curtains and ask students to hold candles while singing songs about the beauty of life. Once the tone for the class is set, disruptions are not very likely to occur. Also, the teacher's serious tone of speaking can make the students realize the seriousness of AIDS.

In one case, the teacher brought two naked baby dolls into the class and asked his students to describe the dolls with precise words. It's hard for anyone to make obscene remarks about babies, so these dolls can be good teaching aides in explaining sexual organs. Teachers can avoid class commotion in this way. Situational circumstances are so influential and powerful, and they are vital to life skills education.

Cui Hengping, teacher of Beiling high school, Hai'an, Jiangsu province

Avoid Awkward Situations

There are several common reasons for awkward situations to arise in Life Skills class. On the teacher's part, if he/she doesn't have a deep understanding of the teaching materials and is not adequately prepared, he/she may be caught by unexpected questions in front of students. Preparation before class is very important. On the student's part, there are usually two reasons for their awkwardness. One is that they don't really know much about sex, and they ask inappropriate questions.

On the other hand, some students may intentionally try to upset the class. They normally aren't trying to embarrass the teacher intentionally, but they may be striving for attention in class.

No matter what the reasons may be behind students raising embarrassing questions, the teacher should not be critical of curiosity. The teacher should calm down and treat the incident gracefully. I believe this very strongly.

Lin Shangren, Nanning No.1 professional high school, Guangxi province

IX       THE WORLD YOUTH AGAINST AIDS CAMPAIGN

Youth and HIV/AIDS

Cote d' Ivoire (Ivory Coast)

Students and housewives crowd in a noisy corner of a small town marketplace in Cote d'Ivoire. Laughter fills the air as the dialogue turns to the topic of sex. This is an original skit, staged by a group of Scouts, to open up discussion between teens and adults who are unaware of the threat of HIV/AIDS.

The rate of infection is escalating at 10 percent in this coastal state of West Africa, affecting an increasing number of young people. Transmission of HIV occurs mostly through heterosexual contact, which typically begins in the early teens and peaks at about age 25. With the support of UNAIDS and UNICEF, the Scouts are organized into teams to spread HIV/AIDS prevention messages through games, songs and popular drama in crowded places like bazaars.
This outreach has proven effective, especially in reaching young people. Scout members also provide on-the-spot counseling, and will soon be using a ‘Minimum Information Package’ training kit. The girls and boys comprising the Scouts team have become a formidable force in the HIV/AIDS prevention movement. At a recent conference sponsored by UNICEF, Scouts from 17 countries showed how it is possible to combat the AIDS epidemic in Africa, with commitment and a bit of creativity.

**Egypt**

Young Egyptians are engaging more and more often in risky sexual behavior, which exposes them to HIV infection at increasing rates. That is why UNICEF sponsored the ‘Youth Protection Project.’

Last year this project included surveys, focus groups, in-depth interviews and educational rallies, targeting students and factory workers in Cairo and Guiza. Project findings paint a realistic picture of young people's attitudes toward safe sex in today's society. Do young people change their sexual behavior in response to safe sex messages conveyed by the mass media, teachers or their peers?

**Honduras**

Sports events, primarily football games, are becoming a popular means of raising HIV/AIDS awareness among young people in Honduras. When young people go to watch their favorite team play, they also hear HIV/AIDS prevention messages broadcast over the speakers during halftime and other breaks in the game.

*Comvida*, a local NGO supported by the ministry of Life skills and UNICEF, has gone a step further. *Comvida* has entertained crowds at the football stadium with exhibition matches on HIV/AIDS awareness prior to the games. Players on one team represent death, drugs, an infected syringe, infidelity, promiscuity, HIV and AIDS. On the other side are abstinence and fidelity, humankind and knowledge, youth and childhood. This is one creative way to entertain young people and to influence their attitudes and behavior.

**Malawi**

Young people in Malawi are encouraged to be candid about their feelings regarding sex. Despite parental resistance, the ‘Straight Talk’ radio program has fast become a hit among youth. The 30-minute show airs once a week over two radio channels, inviting teens to discuss embarrassing matters such as dating, sexual restraints, HIV/AIDS and its prevention.

Run, hosted and produced by local youth, with the support of UNICEF, the show also solicits questions and views from over a thousand HIV/AIDS prevention clubs throughout the country. The initiative is a response to the growing threat of HIV/AIDS in Malawi, where over 605,000 people, close to 14% of the adult population, test HIV-positive.

This alarming transmission rate, one of the highest in the world, is leaving a trail of victims, including about 88,000 orphans whose parents have both succumbed to HIV/AIDS. The government and UNICEF realize that handing out information is no longer adequate enough to combat HIV/AIDS in Malawi. Interpersonal communication, peer education and the engagement of young people in discussions are far more effective in changing attitudes and behavior.

‘Straight Talk’ is drawing national attention to the HIV/AIDS epidemic, motivating young people to take action to make sex safe. It's about time, says one of the public advertisements, for parents to discuss the facts of life with their children. More Straight Talks will help, commented Malawi's largest newspaper *The Nation* in a recent editorial.
Senegal

With an estimated 30% of HIV cases occurring in young people under the age of 25 and with 14% of all women having their first child before the age of 15, Senegal is facing a severe threat from HIV/AIDS and sexually transmitted diseases (STDs).

One of the major problems is the lack of knowledge on the subject. Measures have been introduced by the National AIDS program, NGOs and UNICEF to halt this spread including setting up counseling centers, peer education programs, and HIV/AIDS education in schools and military camps. Creative HIV/AIDS and STDs awareness events have been aimed at young Senegalese in rural and urban areas. Among the successful efforts are National theater contests, a youth forum on HIV/AIDS that attracted some 300 young people, and the production of HIV/AIDS prevention posters, songs and films.

A phone hotline (free to the public) will be set up shortly, offering HIV/AIDS counseling and advice. Although the spread of HIV/AIDS in Senegal is a major concern, considerable efforts are being made on all fronts to educate young people on HIV/AIDS prevention.

South Africa

‘Before, we used to think that someone who is HIV-positive must be treated as an outcast. But after watching 'Soul City,' we know we have HIV-positive people who need support now more than ever before,’ said a young man in Gauteng, South Africa.

Messages about the social exclusion of AIDS victims, unsafe sex and other life skills-related issues are skillfully woven into a television drama series that has attracted a large following in South Africa. Broadcast during prime time, ‘Soul City’ is a powerful half-hour program that uses stories to baffle, provoke and motivate change.

Many viewers report that they are more conscious of Life Skills issues after watching the series. ‘I myself used to be a Casanova. I was such a womanizer. But now that I have seen Soul City, I always make sure I use condoms,’ a young man from KwaZulu-Natal province confesses. ‘I don't take any chances without it because I know I will not be safe.’

Materials for the drama are drawn from extensive audience research on a variety of issues. They are also adapted for a daily radio series called ‘Healing Hearts.’ The project, designed by the Institute of Urban Primary Life skills Care (IUPGC) and partly funded by UNICEF, is reaching 12 million South Africans and an additional 6 million in Kenya, Namibia, Zambia and Zimbabwe.

Sri Lanka

With one third of the population under the age of 24, young people in Sri Lanka are the primary risk group for contracting HIV/AIDS through unsafe sex. Therefore, they are also the target group for changing behavior towards safe sex.

Although this statistic is alarming at first glance, Sri Lanka, unlike many African countries, is fortunate because mass media have a broad outreach nationwide. An excellent Life Skills education network and life skills infrastructure is in place.

School AIDS education programs are becoming increasingly effective in conveying HIV/AIDS prevention messages to students. 4.3 million children attend some 10,000 schools and teachers and peers are playing a crucial role in educating them about HIV/AIDS prevention. School Life Skills clubs, run by the students themselves, have the most direct impact in changing young people's sexual behavior.
By mobilizing and participating in HIV prevention and life skills promotion activities in 11 districts, including rallies, marches and street dramas, students have succeeded in promoting life skillsy lifestyles. As a result, more young people are engaging in safe sex, contributing to Sri Lanka's low rate of HIV penetration.

**Thailand**

The implementation of a 100% condom use policy among sex workers and brothel owners in Thailand has led to behavior changes among men and a drastic decline in HIV infections in this community.

The government and the private sector joined forces to launch a full-fledged national effort to reduce the spread of HIV/AIDS in response to a 1989 national survey on sexual behavior, which showed that a high proportion of men had sex before and outside marriage, mostly with sex workers.

With the results of this survey widely publicized, the government and the general public realized that Thailand might well be headed for a major HIV/AIDS epidemic unless quick action was taken.

By investing US $80 million a year on education, prevention, care and impact alleviation, the Thai government succeeded in curbing the further spread of HIV/AIDS in the sex work community by 1996. Free condoms were provided by the government and TV and radio ads stressed that men should use condoms with prostitutes.

**Slogans to Fight Against HIV/AIDS**

1) Young People and HIV/AIDS: A Force for Change!
2) Adolescents are the Biggest Hope for Changing Behaviors and Habits!
3) Young People should Become the Masters of Their Own Lives!
4) Do not Become the Director of Your Own Tragedy!
5) Nobody Knows More than You do About how to Treasure and Protect Yourself!
6) Whether or not You Might be Infected with HIV Depends on What You are Doing, It Does not Depend on Who You are!
7) Preventing AIDS Now and Meeting the Challenge!
8) Treasure Your Own Life and Master Your Own Life skills!
9) The More Critical the Moment is for You, the More Important it is that You Need to be in Control!
10) Always Tell Yourself: I Have the Right to Make a Choice!
11) Always Believe in Yourself: I Am Capable of Making a Choice!
12) Obtain Knowledge about AIDS and Avoid Ignorance and Death!
13) You Can Choose Your Behavior and You Can Avoid HIV Infection!
X  WORLD AIDS DAY

The Origin

The first of December of each year was designated as World AIDS Day in January 1988 by the World Life skills Organization (WHO) in London.

The purpose of World AIDS Day is to raise global awareness about AIDS and to motivate people in all countries to be proactive in the fight against the spread of HIV/AIDS. A specific theme is chosen for each World AIDS Day.

The Themes

Each year is given a new theme. These are the themes used in the previous 12 years.

2000  Men make a difference
1999  Listen, learn, live
1998  Force for Change: World with AIDS
1997  Children Living in a World with AIDS
1996  One World, One Hope
1995  Shared Rights, Shared Responsibilities
1994  AIDS and the Family
1993  Time to Act
1992  A Community Commitment
1991  Sharing the Challenge
1990  Women and AIDS
1989  Our Lives, Our World - Let's Take Care of Each Other
1988  Join the World Wide Efforts

Exemplary Activities

What can Young People and NGOs Do

Life Skills Activities -Taking Part in World AIDS Day?

Marathon races, sponsored walks, candlelight vigils, or bicycle rallies are examples of activities that could be organized through a partnership with several agencies to raise awareness about HIV/AIDS. These activities require a lot of effort, but they are excellent ways of disseminating messages to young people and the general population.

Preparation Time

One month

When

On world AIDS day (December 1)

Target Audience

Young people as well as the general population
Where
In schools, universities, in the city or villages.

How
Form a partnership with youth clubs/organizations, NGOs, life skills service facilities, government agencies, teachers' associations, etc.
As a group, decide what activities you will organize, when and where they will take place.
Some suggested activities are:
- 5 km walk on a prominent street in the city or around a village.
- Participants could carry banners with different HIV/AIDS messages, and sing HIV/AIDS song, etc., during the walk.
- Running marathon or bicycle rally. A marathon can be organized according to distances, age groups and gender. The route should pass through areas where there are many people. Participants could be given red ribbons to wear on their shirts, or to tie onto their bicycles. The bicycles could also have banners with HIV/AIDS messages tied to them.
- Candlelight vigil. This activity could be organized to take place in a community center, a university hall, a park or any other open space in town. The organizers could invite life skills professionals, HIV/AIDS activists, people living with HIV/AIDS, and young people to speak at the event. Participants could be asked to bring their own candles, or you may provide candles at the event.

If you organize a marathon or a bicycle rally or a candlelight vigil, you may need to get a permit from the local police station. You should also request police cooperation to ensure security and to control traffic.

Involve young people when preparing the banners and other promotional materials.
Publicize the activities in the local newspapers and on local radio stations; hang banners and posters in schools, universities and other public places; distribute flyers, etc.
Special promotional efforts can be undertaken in schools, universities and youth clubs/organizations to ensure participation of young people.

Links
- Youth clubs/organizations, NGOs, government agencies, life skills service facilities, teacher associations, etc. These agencies could be your partners. You could also get IEC materials and condom supplies from them. They could also organize their own activities in conjunction with your activities.
- The local police station to ensure security and to control traffic.
- Local media to publicize, promote and cover the event.

Resources
- Different sizes of paper, colored pencils, paint and brushes for promotional posters and banners.
- Variety of fabric and paper, as well as paints and brushes for banners and red ribbons.
- IEC materials and condoms (if acceptable in your situation) for distribution.
• Candles
• Prizes/gifts for winners

Where to get the resources:
• Sponsorship from private stores (fabric stores, art supply stores, bicycle shops, etc.)
• Financial support from NGOs, government agencies, private companies, community trust funds or youth club/organization funds.

Note: The number of activities you organize will depend on the human and financial resources available.

XI USEFUL INFORMATION ABOUT HIV/AIDS

Where can an HIV Antibody Test be Done?
The test can be performed in the following places:
• Large and middle-sized hospitals
• Sanitation and Epidemic Prevention Stations at the prefecture and city level.

AIDS Hotlines in China
• Beijing 010-64266958
• Heilongjiang 0451-5660309
• Liaoning 024-23395239
• Inner Mongolia 0471-6924422
• Tianjin 022-24322222
• Hebei 0312-5013144
• Shandong 0531-2967895
• Shanxi 0351-4065303
• Henan 0371-5936422
• Hubei 027-7878710
• Sichuan 028-6647680
• Yunnan 0871-3611773 0871-7172835
• Guangxi 0771-2809100
• Hainan 0898-5363244
• Xinjiang 0991-2623453
• Jiangsu 025-3715340
• Anhui 0551-3633229
• Shanghai 021-64370055
• Zhejiang 0571-7048357
• Hunan 0731-4422425
• Fujian 0591-7810808
• Guangdong 020-84457336
• Shenzhen 0755-5618773
• Hong Kong 0852-27802211
Relevant Websites

- Ministry of Life skills of P.R. China http://www.aids.net.cn
- UN AIDS Planning Committee http://www.unchina.org/unaids
- Intercountry Working Group of WAPR Countries, UN AIDS Planning Committee http://unaidsapict.net.co.th
- AIDS/STDs Information, WHO http://www.who.int/asd
- AIDS Service, Life skills Department, Hong Kong Special Administrative Region http://www.info.gov.hk/aids
- International Communication Action Network http://www.comminit.com
- British AIDS Education and Research Foundation http://www.avert.org
- Canadian AIDS Laws and Regulations Research network http://www.avert.org
- AIDS Prevention Research Center, California University San Francisco Branch, USA http://www.caps.ucsf.edu
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Mariella Baldo and Elaine Furniss, Integrating Life Skills into the Primary Curriculum
UNICEF, New York, 1998

WHO World AIDS Campaign with Children and Young People, 1999
Vietnam Red Cross Society Youth Way of Life, Life Skills, 1996
Hidden Voice -True Malaysian AIDS Council Project, 1999
UNICEF The Progress of Nations, 1999

Hong Kong Education Department Learning Pack on AIDS for Secondary School Students, 1992
Yunnan Education Commission/Save the Children
Newsletter of School-based Life Skills Education, 1999
Ye Shaogong Life Skills Care Handbook for Middle and Primary Students
Popular Science Press, 1987

A Season with Dreams -Documents of Puppy Love in China,
World Language Publishing House in China, 1999

For a Better Future -Extracts of Juvenile Delinquency Prevention Exhibition, 2000
Training Manual of Project Implementation on STD EU-China Office for STD & HIV/AIDS Prevention, 2000
For a long time, we thought of developing a very practical textbook on AIDS prevention, specific to China, blending in international education theory and concept. We are working closely with the Ministry of Education to protect youth from AIDS. Cooperating with Doctor Ma Yinghua and Doctor Chen Jingqi from Beijing Medical University in 1998, we developed teaching plan drafts for junior and senior high school students. At last, our wish came true with sufficient funding support in the year 2000.

The first objective in developing this trial manual is to make it as simple and practical as possible, so that any teacher can understand and follow the instructions without any AIDS prevention teaching background. The second objective is to integrate international educational experiences into Chinese situations. Therefore teachers will not only get practical references from in-country fellow teachers but can also broaden their horizon in this field.

In Chapter 8, Experience on Sex Education and AIDS Prevention in China, we adapted a technique called Creating a Situation, which was suggested by Mr. Cui Hengpin in Jiangsu province. At first, we were worried that this technique may be too advanced for Chinese teachers. But later we decided to put it into this manual because of the wide acceptance and successful application of the technique in quite a few international seminars on AIDS prevention. We wish, through this kind of introduction, that more and more effective education approaches will emerge in Chinese classes in the future.

We have been supported by many people from various fields in the development of the book and for this we have a deep appreciation. In particular we mention those who worked closely with us and are mentioned in the acknowledgements, you have our sincere gratitude.

Our thanks also go to donors who purchased Unicef products such as cards, calendars,T-Shirts, etc. Without your support funding for this project would not have been possible.

An agreement has been reached on quality education in China’s education reform. However quality education is still at the concept level for most of Chinese teachers. In 1998, a seminar sponsored by UNICEF on Life Skills was held in Beijing. One of the experienced teacher summed it up in this way: ‘My mind was at a loss when regarding quality education before this seminar, but now I feel more confident and enlightened because I have mastered the real skills to carry out the concept.’

This manual is the first publication in this innovative series. This publication has reached thousands of middle-school teachers in Sichuan Province in the year 2000 and 2001.

We look forward to seeing China find its unique and effective way in HIV/AIDS school-based education through working collaboratively with other countries to contribute more effectively in the worldwide effort in HIV/AIDS prevention.

Editors
June 1, 2000
## Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
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<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<tr>
<td>IDU</td>
<td>Intravenous Drug Use(r)</td>
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<tr>
<td>IEC</td>
<td>Information Education and Communication</td>
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<tr>
<td>MLTP</td>
<td>Medium and Long Term Plan</td>
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<tr>
<td>MOH</td>
<td>Ministry of Life skills</td>
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<tr>
<td>MTC</td>
<td>Mother to Children</td>
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<tr>
<td>NGO</td>
<td>Non Governmental Organization</td>
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<tr>
<td>PWHA</td>
<td>People with HIV/AIDS</td>
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<tr>
<td>STD</td>
<td>Sexually Transmitted Infection</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV/AIDS</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and cultural Organization</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>WHO</td>
<td>World Life skills Organization</td>
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